

WINTER 2009

SOUTH CAROLINA



MEDICINE

University of South Carolina School of Medicine



Pregnancy
practice gets
plenty of twins
and triplets

DEAN'S MESSAGE

THE CORNERSTONE OF PRIDE

Richard A. Hoppmann, MD | Dean, School of Medicine



In my 20 years as a University of South Carolina School of Medicine faculty member, administrator, and now dean, I have always been struck by the strong support and pride that surrounds our medical school.

As I ponder why this is, I realize that what we have accomplished is only made possible because of the quality of the students we recruit; the expertise and compassion of our faculty physicians; the commitment of our staff; the talent of our researchers; and, of course, the support from the South Carolina community. With all of these factors working together, we have built a medical school that is a symbol of excellence in competent, compassionate medical care, groundbreaking research, and community outreach.

The articles within this issue of *South Carolina Medicine* further demonstrate why the passion and pride we embody is carried out in the work we do to counsel, educate, and heal. From physicians who are embarking on innovative ways to teach aspiring physicians to alumni who are creating innovative ways to care for patients, you can read about the caliber of individuals who make the School of Medicine what we are today.

As you read through the pages of the magazine, you will understand why the cornerstone of my tenure as dean will be the desire to make you proud of what we do and accomplish each day. Enjoy!

Richard A. Hoppmann, MD
Dean

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“The patient population I am privileged to care for makes my job exciting and patients are usually extremely appreciative.”

ANTHONY “TONY” GREGG, MD, FACOG, FACMG, ASSOCIATE PROFESSOR, DIRECTOR OF MATERNAL/FETAL MEDICINE AND DIVISION OF GENETICS

OBSTETRICIANS' HIGH-RISK
PREGNANCY PRACTICE GETS
PLENTY OF TWINS AND TRIPLETS

triple option

Anthony “Tony” Gregg, MD, has been seeing triple—as in triplets. Lots of them.

Gregg, an associate professor of obstetrics/gynecology for the School of Medicine, is director of maternal/fetal medicine and medical director of the Division of Genetics. He and his new partner, Paul Browne, MD, an associate professor in obstetrics/gynecology, receive high-risk obstetric referrals across the mid-state of South Carolina that includes a 16-county area surrounding the Midlands.

Many private-practice obstetricians refer their patients to Gregg and Browne when multiple-birth pregnancies or other high-risk factors are involved. That’s how the two became the primary physicians for five mothers who were all pregnant with triplets at the same time earlier this year.

“I’d never had the opportunity to care for so many patients with twins and triplets at one time until I came to the University of South Carolina School of Medicine,” said Gregg, who has been providing obstetrical care for mothers with high-risk pregnancies for the past five years at the School of Medicine’s University Specialty Clinics and at Palmetto Health Richland Hospital. “There are different views on how to manage twin and triplet pregnancies—we take an extremely vigilant approach.”

For Gregg and nurse manager Heidi Mason, that means providing an initial counseling session to mothers who are often overwhelmed but ecstatic at the prospect of a multiple birth.

“What most mothers don’t understand at first is that carrying triplets means they are at high risk for being hospitalized for some time during the pregnancy, that they likely will have low birthweight babies, and that there is a higher risk for their newborns to have cerebral palsy or to experience neonatal death,” Gregg said. “Sharing that information is a reality check that gets them prepared for the road ahead.”

The statistics are sobering: Triplets have a 17-times greater risk of suffering from cerebral palsy than singletons. They also are 20-times more likely to die in the first year; have an average birth weight of less than four pounds each; and an average-length stay of 30 days in a neonatal intensive care unit. These pregnancies can tax families emotionally and financially.

But Gregg’s intensive approach to high-risk pregnancy management—he provides his cell phone number to mothers (and fathers) and encourages them to call with any concern—pays dividends. Nearly all of his patients carrying twins and triplets approach their gestational targets—35–36 weeks for triplets; 36–37 for twins—and avoid long and expensive hospitalizations for themselves and their newborns.

“The rocky road for a triplet pregnancy starts at 18–20 weeks. That’s when the uterine volume and fetal size begin to conflict” he said. “Dr. Browne and I start seeing these patients almost weekly after 18 weeks of pregnancy to monitor the condition of the cervix, which can thin much faster with a multiple pregnancy and to review patient symptoms and address psycho-social stresses.

“This approach results in many more office visits than with a singleton pregnancy, but the extra attention can prevent weeks of expensive care in the neonatal intensive care unit. We’re also

vigilant about making sure our patients get adequate nutrition, rest, and supplementation with vitamins, iron, and folic acid during the pregnancy.”

Along with expectant mothers carrying multiples, Gregg and Browne also see patients who are diabetics, have high blood pressure, or some other underlying health condition that threatens to complicate the pregnancy. Managing their care often translates into 14-hour days.

“I’m excited to come to work every day, and I go home with a sense of fulfillment,” Gregg said. “The patient population I am privileged to care for makes my job exciting and patients are usually extremely appreciative.”

Wendy is one of the five mothers of triplets who were under Gregg’s care at the same time. She gave birth to three healthy girls in June.

“Dr. Gregg is very conservative; he never wants you to become complacent about doing all the right things while you’re pregnant,” she said. “You make it to 24 weeks, and he immediately starts encouraging you not to let your guard down—to shoot for 28 weeks, then 32 weeks. It was always like, ‘You’re going good, Wendy, but...’ And it worked—I made it!”

Wendy’s husband, Nate, called Gregg several times during the pregnancy, and Linda, whose triplets were born in October, has called after hours, too. “He said it’s OK to call any time. That’s good peace of mind,” she said. ■

a lesson in ultrasound

MEDICAL STUDENTS LEARN THE SCIENCE
OF ULTRASOUND AND THE ART OF
COMMUNICATION

Imagine volunteering to be the “patient” in a medical classroom and you learn that you have a real medical problem.

That’s not an uncommon scenario in School of Medicine classrooms, which integrate hands-on training with portable ultrasound devices.

“The more you look, the more you find, and ultrasound technology allows you to get a better look at normal anatomy—and to find abnormalities,” said Bruce Latham, MD, an endocrinologist and School of Medicine associate professor of medicine who teaches M-III and M-IV students at the Greenville Hospital System campus.

The University of South Carolina School of Medicine is the only medical school in the country that teaches first- through fourth-year students how to use ultrasound technology for bedside diagnosis.

Latham often uses ultrasound to help students understand the shape and size of the thyroid gland, located at the base of the throat. It’s not uncommon, he said, to find thyroid nodules on people who volunteer to be the subjects for ultrasound training sessions.

“As many as fifty percent of men and women by the age of 50 have thyroid nodules, and the vast majority are benign, but it’s always worth following through to confirm that,” said Latham, who graduated from the School of Medicine in 1987 and has been an associate professor of medicine since 1992.

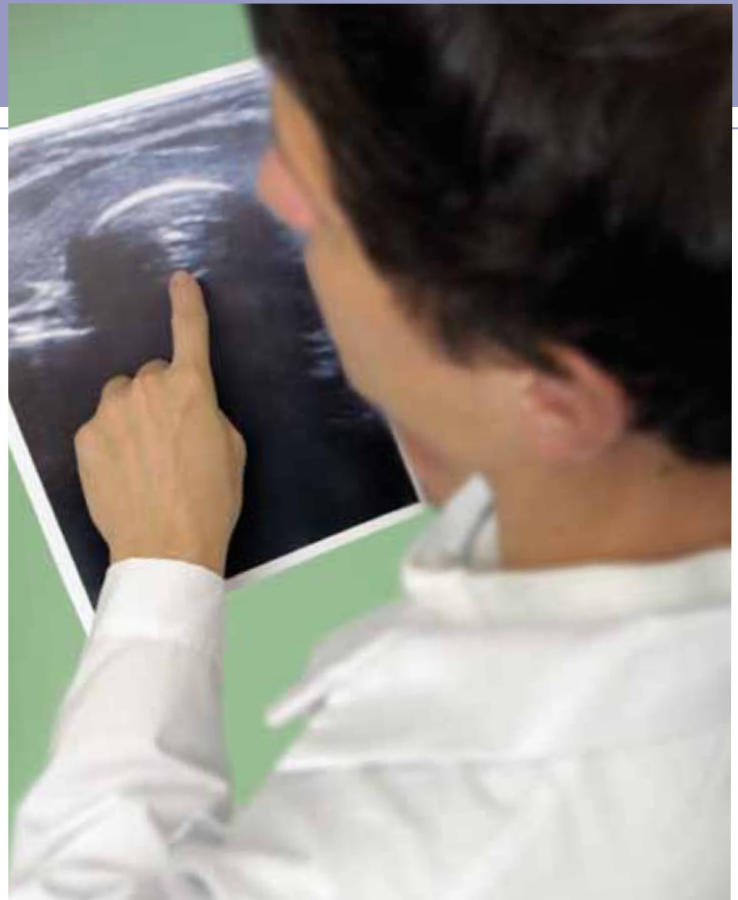
While visiting the Greenville Hospital System campus, Kimberley Massey got a dose not only of the science of ultrasound technology but also of the art of a physician’s bedside manner.

“I volunteered to be the subject for Dr. Latham’s class, and he gathered the students around as he rolled the ultrasound around my thyroid,” said Massey, a University of South Carolina graphic design artist. “When he started asking them, ‘Do you see anything unusual here?’ I said to myself, ‘Uh oh.’”

It turned out that Latham had spotted a lone nodule on Massey’s thyroid. What happened next was a teachable moment for Latham’s students.

“I try to present the information to patients—in this case a volunteer test subject—in a non-threatening way,” Latham said. “I want a patient to get the information they need to have in a comfortable way so that they understand the gravity of the situation but without panic.

“Often, the default is for doctors to not tell their patients much—and that can cause anxiety or misunderstanding.”



After calmly telling Massey what the ultrasound device detected and the statistics—85 percent of lone nodules are benign—he helped arrange an appointment with an endocrinologist in Columbia for a follow-up.

“I wasn’t too worried after Dr. Latham explained about thyroid nodules, and by the time I saw the endocrinologist for a follow up, the nodule had become too small to biopsy,” Massey said. “But I couldn’t help but think that the students got a lesson in good bedside manner that day.”

For Latham, it’s all part of a medical classroom experience. “I’ve never found anything very serious in demonstrating ultrasound to students, but it’s probably just a matter of time. And that’s part of what our students have to learn: how to find abnormalities and communicate with their patients.” ■

so you want to be a doctor?

NEUROSURGERY PROFESSOR GIVES
HONORS COLLEGE UNDERGRADS AN UNVARNISHED
LOOK AT THE MEDICAL PROFESSION

Not every student enrolled in Dr. Sharon Webb's Honors College course this fall will become a physician, but those who do will likely go into the profession with their eyes wide open.

Webb, an assistant professor of neurosurgery at the School of Medicine, earned a bachelor's degree from the Honors College in 1997 and a medical degree from the medical school in 2002. She liked the interesting courses the Honors College offered, which gave her the idea for teaching one herself.

"I've served on the admissions committee for the School of Medicine and have thought about the level of preparation some students have for medical school," Webb said. "A lot of these students don't have a clue—and they need a clue. I don't want them to come to medical school and fail."

Webb's course, *So You Want to be a Doctor*, is intended to give undergraduate students more than mere clues about what's entailed in going to medical school and beyond. To that end, she's bringing in guest speakers who will talk about various medical specialties and former medical patients who will talk about their experiences—good and bad—with doctors.

Students will choose a residency in a particular medical field and make presentations on that choice. They'll also spend a night on call with a physician's assistant or a nurse anesthetist.

"This class is all about what it truly means to be a doctor," said Greer Baxter, an Honors College student enrolled in the course. "I'm excited to spend time out of the classroom observing what really goes on in a hospital because it's one thing to be told how stressful, demanding, and rewarding working at a hospital is, but there is no substitute for experiencing this field of work first hand.

"This class will no doubt help me decide if working in a hospital is the right career path for me."

For Webb, deciding on a career in medicine came early. She had an opportunity to observe a brain surgery operation at Lexington Medical Center and, at age 16, set her sights on neurosurgery. One of her goals in teaching *So You Want to be a Doctor* is to motivate pre-med students to think about specialties that require more work and determination.

"There are only three trauma surgeons at Palmetto Richland. We're in a crisis, and it's only going to get worse because so many medical students want to choose easier jobs with shorter residencies," she said. "I'm



**SHARON WEBB, MD
ASSISTANT PROFESSOR
OF NEUROSURGERY**

looking for students who are interested in at least considering the more difficult specialties in medicine."

Another purpose in offering the course is to instill in undergraduates what it really means to choose medicine for a career, Webb said.

"True physicians really want to be in medicine and realize that it is a sacrifice you make to take care of people," Webb said. "You sacrifice your time and your life to do it.

"I tell students that you're in medical school for four years, but you're a physician for the rest of your life. So it's far more than just strategizing on how to get into medical school. You need to think about what it really means to be a doctor—the responsibility, the workload, and the reality of death and dying." ■



SCHOOL OF MEDICINE'S
INFECTIOUS DISEASE EXPERT
ON H1N1 FLU

going viral



Helmut Albrecht, MD

Unless you've been living in a cave for the past few months, you know that swine flu—officially known as H1N1—continues to live up to its pandemic status, infecting millions worldwide.

But should Americans be afraid? Is running to the doctor's office and stocking up on face masks and Tamiflu your best bet for survival?

Helmut Albrecht, MD, director of the Division of Infectious Diseases in the

School of Medicine, said precaution is in order but fear is not.

"This is going to be a flu season where everyone is going to be watching a lot, but I don't think we'll have a really severe medical problem," he said.

There is little difference between the new form of H1N1 and the regular seasonal form of H1N1 other than the fact that 2009 H1N1 is sensitive to tamiflu-like drugs but resistant to amantidines; the opposite is true for seasonal H1N1.

"One key difference [between swine flu and other seasonal flu viruses] seems to be that there is significant preexisting immunity among the elderly population, which usually carries the highest mortality," Albrecht said. "So the expectation is that we're going to see a lot of cases, but they are going to be in a population that really isn't terribly threatened by it."

First detected last April, H1N1 has killed more than 4,700 people worldwide, including about 1,000 in the United States as of mid-October. The mortality rate for H1N1 is less than 0.1 percent. Health officials have said the new strain of the infection tends to affect those under 25 more than the elderly.

"It's a population that's vulnerable but traditionally not terribly threatened unless they have certain co-existing conditions such as asthma," Albrecht said of the younger age group.

But even with a low expectation for high mortality, the disease could have severe effects on the U.S. health care system.

"I anticipate a heavy flu season, partially because everybody is so primed for it," he said. "Patients are more likely to show up and want medications, and doctors are going to be more likely to diagnose the flu."

While Albrecht thinks the increased demand can be handled, he does think it will be a decision-making test for doctors.

"If you see a patient, they're not going to have a sign on the front of their head saying 'I have swine flu,'" he said. Rapid tests take 10 minutes to two hours but are positive in only 10-50 percent of actual flu cases. Genetic tests could take several days when a result might become irrelevant.

"For anti-viral medications to work in time, it's going to require a doctor examining you and saying, 'I think you have the flu,'" he said.

So how can you keep from getting the flu, and what should you do if you do get it? Albrecht advises common sense.

"If you have the flu, you stay home. Don't play football, don't go to the bar, stay home, have chicken soup and Tylenol, and survive it," he said. "If you get really ill, then see someone. I don't think everybody should run to the doctor because the waiting room is the most likely place where you could get the flu."

Using hand sanitizer and keeping hands away from one's face is going to be key in keeping the disease contained, he said, along with being on the defensive.

Flu avoidance:

- keep your hands away from your face
- cover your nose and mouth with a tissue when you cough or sneeze
- throw the tissue in the trash after you use it
- use hand sanitizer
- avoid contact closer than six feet with people who are sneezing and coughing
- if you are in the vulnerable age group for either strain of flu, take the vaccine
- stock up on dry pasta or soup that can be warmed at home in the event you start feeling ill. ■

health education

SCHOOL OF MEDICINE PARTNERS WITH MORRIS COLLEGE TO TRAIN FUTURE PASTORS AND TEACHERS

Ministers and educators usually diagnose and attend to the spiritual and intellectual health of their congregants and students. With a little training, they can learn to take the pulse of their attitudes toward physical health, too.

With a century-long history of producing preachers and teachers, Morris College, a traditionally black institution in Sumter, S.C., offered the perfect population when the School of Medicine began looking for ways to promote health and wellness in the local African-American community. The Morris College Partnership, a two-year program funded by a retired businessman, philanthropist, and longtime Sumter resident committed to community development, hopes to use the college's future preachers and teachers to address health issues ranging from cardiovascular disease to diabetes to stroke.

"In public schools, health education is taught, more often than not, by teachers who have no health education training in college or thereafter," said Duncan Howe, Ph.D., special projects coordinator in the School of Medicine's Office of Clinical Research and Special Projects. "In African-American churches, pastors, even if they support health and wellness among their congregation, have difficulty finding time to promote these issues.

"We started thinking that if we began educating teachers and preachers at the undergraduate level about health and wellness, they would take this information into their schools and churches. We thought it sounded like a great program. Our benefactor did, too, and said, 'Let's do it.' We met with the administration at Morris College, and they were enthusiastic about partnering with us."

While Morris College is implementing the partnership with an equal share of the funds provided by the benefactor, the School of Medicine will develop and define objectives.

First, the partnership sponsored two on-campus health promotion programs during the 2008-09 academic year with public presentations; student screenings with assistance from members of the Student National Medical Association in the School of Medicine; and other health and wellness programs, including screenings and counseling for sickle-cell anemia and HIV-AIDS.



Patricia Witherspoon, MD, an associate professor in the Department of Family and Preventive Medicine, made a presentation to students on diabetes, a prevalent problem in the African-American community. The partnership plans more fairs and lectures in the fall and spring.

"The health fairs have been a win-win situation for the partnership and the School of Medicine," Howe said. "The partnership has support from the budding health professional, and the medical students get to practice their skills, such as taking blood pressures."

“The health fairs have been a win-win situation for the partnership and the School of Medicine.”

DUNCAN HOWE, PH.D., SPECIAL PROJECTS
COORDINATOR

Second, the partnership wanted to develop the capacity for Morris College to train pastors and students in Christian education in health and wellness. Working with faculty in the Christian education department, the partnership developed eight health and wellness classes—on subjects from helping people make behavior changes to identifying the risks, taking preventative measures, and managing chronic illnesses—that have been incorporated into the curriculum and added to the course catalog.

“Having these classes made a permanent part of the curriculum and catalog is a good strategy for ensuring the sustainability of the program once our funding ends,” Howe said.

Third, the partnership sought to develop health education programs within the curriculum at Morris College. The program encourages education majors to take six hours of electives in health science classes. The School of Medicine reviewed Morris’ health science major curriculum and defined the 25 credit hours needed for students to take the Certified Health Education Specialist (CHES) examination.

“Having that CHES behind their names makes Morris College students more competitive in the job market and opens a lot of doors,” Howe said.

The fourth objective focuses on health disparities between African Americans and other populations and provides opportunities for Morris College students to do research in the health sciences to address this issue. “Students might use anonymous data on blood pressure, glucose, or cholesterol from health fairs as part of a research project to devise an intervention program and use the data to look at pre- and post-levels,” Howe said. “The whole program targets the issue of health disparities. If you look at health statistics for blacks and whites, the prevalence of many chronic illnesses is far worse for African Americans. There is a definite need to close the gap on these disparities.”

The fifth objective promotes service-learning experiences related to health and wellness. Service learning allows Morris College to promote health and wellness not only among its students but also to people in the Sumter community.

As its last objective, the partnership plans to seek a federal grant to develop the program model further so that it can be replicated at



other colleges and universities, especially historically black institutions, around the state and country.

“We’re excited,” Howe said. “We think it’s a good program. We’ve tried to make it culturally appropriate and to empower its participants by giving them responsibility for the program.”

“We’ve gotten a lot of enthusiasm and cooperation from the faculty, students, and administration at Morris College. I think all of us will see an impact on the student population and an increased incentive for more students to get involved with health and health science.” ■

RICHARD A. HOPPMANN, MD, TALKS ABOUT HIS VISION FOR THE SCHOOL OF MEDICINE WHERE HE HAS BEEN AN EDUCATOR AND ADMINISTRATOR FOR NEARLY 20 YEARS.

conversation

with the dean

Richard A. Hoppmann, MD, a long-time professor at the School of Medicine, was appointed dean of the school this past May.

“It has been a singular honor for me to assume the role of dean of the University of South Carolina School of Medicine,” Hoppmann said. “The level of support I have received from so many since May has been gratifying and inspirational.”

Hoppmann joined the faculty in 1990 and has been an integral part of the school’s growing national reputation for its innovative approach in medical education. While spearheading the strategic focus of the medical school, he continues to make time to volunteer at The Free Clinic in Columbia, serve as an international expert in ultrasound technology, and teach medical students.

“Dr. Hoppmann has demonstrated exemplary clinical, research, and educational leadership during his nearly 20-year tenure with the University of South Carolina,” said University President Harris Pastides. “We are confident that his visionary approach to medical education will complement the University’s ongoing efforts to make a meaningful impact on the health and well-being of South Carolinians and beyond.”

Hoppmann’s dedication to medical academia, the practice of medicine, and the University of South Carolina is quite evident. *South Carolina Medicine* asked Dean Hoppmann about his vision for the future of the School of Medicine and his commitment to medicine, patients, faculty, staff, and students.



When and why did you decide to become a physician?

There was no defining moment when I decided to become a physician. In high school, I enjoyed science, problem solving, and working with people. My mother was a nurse and suggested I consider becoming a physician. Being an academic physician has turned out to be the perfect career for me. I love learning, teaching, and taking care of patients.

What accomplishments are you most proud of?

I am most proud of my children. Raising children is the single greatest responsibility a person can have, and with a lot of luck, prayer, hard work, and an incredible wife, we have raised three children who make us very proud.

In terms of my career in medicine, I am most proud of the contributions I have made to the educational program at the School of Medicine. I don't spend much time thinking about what has been done because it seems there is always something new that is needed for the students and the school.

What are your top goals for the School of Medicine?

It is really hard to pick just a few; there are many. Goal No. 1, however, would be to have several programs—whether they be in education, research, or clinical care—that make our students, alumni, faculty, staff, the community, and the state proud of the School of Medicine. These programs would also bring us national recognition so that when a particular topic would come up, others around the country would immediately make the association with the state of South Carolina and the University of South Carolina. Con-

“It has been a singular honor for me to assume the role of dean of the University of South Carolina School of Medicine. The level of support I have received from so many since May has been gratifying and inspirational.”

sistent with that would be to preserve and expand the high quality of education and the supportive environment that has been the essence of the School of Medicine since it opened its doors in 1977.

What is the greatest impact you feel you have made in the lives of students?

I can only tell you what impact I would like to have on the lives of our students. That would be that they never forget why they chose to enter medicine and that they continue to live their lives that way throughout their careers. I hope I can help keep the flame alive and they feel and understand the privilege and the joy of practicing medicine is like no other.

What is the greatest impact you feel you have made in the lives of patients?

As a rheumatologist, my goal is to keep my patients doing the things they need to do and

love to do for as long as they possibly can with as little discomfort as possible. I also hope that they know that I truly care for them as people.

What do you envision the School of Medicine becoming in the next five years?

I see the School of Medicine bigger, stronger, and better known. We have wonderful faculty, staff, and students here and excellent educational and clinical partners. But we must grow if we are to address the needs of our citizens and raise our profile nationally. We are presently determining particular areas to focus on to do just that.

What is the one aspect about the School of Medicine that you would like for students to remember?

That we genuinely care about them and the quality of their education. Since my first day here nearly 20 years ago, it was clear that this was a special place for students, and I want every graduate to remember it that way.

What key role do you think the School of Medicine plays in the lives of South Carolinians?

It is our mission to improve the health of the citizens of South Carolina through education, research, and service; and we must strive to fulfill each component of that mission not only for our present-day citizens but for generations to come. We are blessed with outstanding partners in the mission such as the Dorn Veterans Administration Medical Center, Palmetto Health, and the Greenville Hospital System. With our partners as well as alumni practicing throughout the state, we touch the lives of many South Carolinians every day. ■

IN BRIEF: RICHARD A. HOPPMANN, MD

Richard A. Hoppmann, MD, earned his bachelor's degree from the University of South Carolina in 1982 and a master's degree from the University of Georgia. He earned his medical degree from the Medical University of South Carolina and completed an internal medicine residency at East Carolina University School of Medicine and a rheumatology fellowship from the Bowman-Gray School of Medicine at Wake Forest University.

Hoppmann joined the faculty of the School of Medicine in 1990 as director of the Division of Allergy, Immunology, and Rheumatology and was named O.B. Mayer Sr. and Jr. Professor of Internal Medicine in 1995. He also was vice chair and interim chair of the Department of Medicine and Chief of Medicine for the Dorn VA Hospital. In 2000, he became associate dean for medical education and academic affairs and was interim dean of the school from 2006 to 2007.

A true medical innovator, Hoppmann is the founder and president of the Society of Ultrasound in Medical Education, an initiative that has gained worldwide attention. He has been listed in *Best Doctors in America* and is a highly sought-after clinician and accomplished educator.

Hoppmann is recognized as a national authority on musculoskeletal problems of musicians and has been president of the Performing Arts Medical Association. He is a diplomate of the American Board of Internal Medicine and the Subspecialty Board of Rheumatology and a fellow of the American College of Physicians and the American College of Rheumatology. His contributions to medical literature include numerous articles and book chapters.



the science RESEARCHER EXAMINES LINK BETWEEN WOMEN, HORMONES, AND SLEEP APNEA

of sleep

If you're among the one in five adults with sleep apnea, not being able to get a restful night's sleep is a big deal.

It's bad enough that you get drowsy at work, yawn a lot, and feel foggy-headed. Research shows that people who have sleep apnea are also more likely to have a stroke, diabetes, high blood pressure, congestive heart failure, pulmonary hypertension, and memory difficulties.

Sleep apnea—a disease in which the airway narrows during sleep, allowing insufficient oxygen intake—does not afflict only overweight men. While that's a commonly held belief among members of the medical community, only about one-half of all sleep apnea cases occur in overweight people.

"There's a lot more to it than weight," said Antoinette Williams, MD, an assistant professor of clinical internal medicine in the Division of Pulmonology and Critical Care Medicine who studies sleep apnea. "You must also take into account jaw lines and facial structure. Just because you are skinny doesn't mean you can't have sleep apnea.

"As for the disease afflicting mostly men, well, even though 10 to 13 percent of the male population has sleep apnea, about 10 percent of women overall have it, too," she said.

"Sleep is still a young field compared to other parts of medicine: there's not much known, and there's a lot of room for growth," said Williams, a native of Orangeburg, S.C. "Doctors are becoming more aware of it. With the implications of sleep disturbances leading to illness, it is important that they ask about the sleeping habits of their patients."

A 2001 summa cum laude graduate of the School of Medicine, Williams became interested in the study of sleep while completing a two-year fellowship in pulmonary disease at the University of Maryland.

"I did a medical rotation in a sleep clinic," she said. "I first focused on sleep apnea in children. It is not very common in kids, but they do have it. After the apnea gets better or goes away, research has shown that on average the child's grade level goes up one full grade."

Williams' next move was a fellowship in sleep medicine at Maryland, where she studied with Steven Scharf, a professor of medicine and director of the Sleep Disorders Center.

She became intrigued by the study of hormonal fluctuations and sleep apnea in women.

"I studied oxidated stress in relation to obstructive sleep apnea," she said. "It was interesting how chemicals and hormones change during sleep, and how different that change is for people who have sleep apnea. It made me begin to question if this is why pregnant women develop diabetes, cardiomyopathy, and other illnesses.

"Research released earlier this year shows there may be a connection between pregnant women who have sleep disturbances or sleep apnea and the number of low-birth or pre-term babies those women have," said Williams, a member of the American Academy of Sleep Medicine. "It was also found that pregnant women who had sleep apnea are at increased risk of developing gestational diabetes."

As they move into menopause, many women experience disruptions in sleep thanks, again, to fluctuating hormones.

"Estrogen protects against sleep apnea, so when the level of estrogen goes down, women may develop sleep apnea or other sleep disturbances," Williams said. "The numbers bear this out: three to five percent of pre-menopausal women have sleep apnea, but that goes up to seven to nine percent after menopause.

"Doctors might not link sleep apnea in women to snoring and daytime sleepiness, as they do with men. And it's more likely they wouldn't link it to post-menopausal women. But it is important that they take it into consideration when a patient comes to them with sleep difficulties."

To add to the body of information about sleep, Williams is conducting research, publishing her findings, and building a sleep clinic.

"Within the next six months to one year, we'll have a dedicated sleep clinic at the School of Medicine," she said. "We'll treat patients with any kind of sleep disorder, from restless legs to sleep apnea. One of my long-term goals is to have a clinic focusing on women and their sleep issues." ■



ANTOINETTE WILLIAMS, MD
ASSISTANT PROFESSOR OF
CLINICAL INTERNAL MEDICINE

SCHOOL OF MEDICINE HOSTS IRAQ SCHOLAR RESCUE PROJECT RECIPIENT

Intellectual capital and medical scholars are priceless commodities that countries, both developed and developing, rely on to sustain economic growth and a healthier society.

But many people around the world can't enjoy academic freedom without the fear of being persecuted, harassed, or paying the ultimate price with their lives.

It's estimated that more than 6,000 professors have fled Iraq since February 2006, with thousands more unable to teach, conduct research, or carry out their academic responsibilities. To preserve the scholarly talent of the country and in response to an urgent appeal in 2007 from Iraq's Ministry of Higher Education, the Iraq Scholar Rescue Project was developed by the Institute of International Education Scholar Rescue Fund.

The project provides fellowship assistance to established scholars in any academic discipline from Iraq. Recipients of the fellowship have the opportunity to study in the Middle East, North Africa, and other world regions for as long as two years.

This year, the University of South Carolina School of Medicine's Department of Pathology, Microbiology, and Immunology hosted an Iraq Scholar Rescue Project recipient, Khalida Al-Mousawy, MD, Ph.D. Al-Mousawy earned her medical degree from Baghdad University and a Ph.D. from the University of Sheffield in England. She is a lecturer and professor at Baghdad University.

"I am so fortunate to have this opportunity to not only escape the violence I have endured for so many years, but to be able to do what I love so much in peace," Al-Mousawy said. "I have learned so much by working with experts in immunology research, and it felt good to do bench work again with modern equipment."

Al-Mousawy, an accomplished physician scientist, said her work has been significantly affected by the devastation caused by war and unrest in Iraq. She and her family have been victims of bombings and often live and work in fear. While at the School of Medicine, Al-Mousawy attended conferences, conducted immunology research, and discussed scientific theories—all of which rekindled her passion for scientific research.

"The last six years I felt broken. Coming here made me feel whole again and at home. I am so grateful to Prakash and Mitzi Nargakatti [professors in the Department of Pathology, Microbiology, and Immunology] for their kindness and encouragement—they are wonderful people with lots of compassion," she said.

Al-Mousawy worked for more than a year in the department. Under the leadership of Mitzi Nargakatti, Ph.D., and Prakash Nargakatti, Ph.D. she was introduced to newer, state-of-the-art research techniques and equipment. She was also afforded the opportunity to learn new and innovative ways to think about and pursue investigations.

"Prakash and Mitzi Nakargatti are the most scientific people I ever came across, not only in continuously publishing work in very high-standard scientific journals, but also in the distinctive, scientific way of running the lab," Al-Mousawy said.

"It was a privilege to host Dr. Al-Mousawy and share our research ideas with her," Mitzi Nargakatti said. "She is certainly a talented scientist who has a lot to offer the Iraqi people."

As is the goal of the Iraq Scholar Rescue Project, Al-Mousawy hopes to return home to Iraq to use her knowledge and skills to rebuild her academic community.



From left: University President Harris Pastides, William Keane, MD, Janice Bacon, MD, Katherine Stephens, Jerry Youkey, MD, Dean Richard Hoppman; not pictured: Debbie Truluck and Alfred Boykin, MD

DEAN'S DISTINGUISHED SERVICE AWARD

Each year, the dean selects faculty and staff who have exhibited outstanding commitment and service to advancing the mission of the School of Medicine. Dean Richard Hoppmann selected community partners who have also been instrumental in supporting the efforts of the medical school. A special Senate Resolution was presented to long-time friend and supporter, Donald Saunders Jr., MD.

South Carolina Senator Joel Lourie presented a Senate Resolution to Saunders for his "distinguished career in medicine and medical education, and for his numerous contributions to his profession and community."

STAFF

Debbie Truluck

Alumni Director,
University of South Carolina
School of Medicine

COMMUNITY

Katherine Stephens

Vice President for
Medical Education,
Palmetto Health

Jerry Youkey, MD

Vice President for Medical and
Academic Services
Greenville Hospital System

FACULTY

Janice Bacon, MD

Chair and Professor, Department of
Obstetrics and Gynecology

Alfred Boykin, MD

Chief of Staff, Dorn VA
Medical Center

William Keane, MD

Internal Medicine and Nephrology

CLASS OF 2011 MAKING A LASTING LEGACY—BRICK BY BRICK

The Class of 2011 organized the first-ever medical student class gift to the School of Medicine: the purchase and installation of a landscaped area with two water fountains at the entrance of Building 3. To start the project, the class raised seed money from family and friends, a requested \$20.11 donation per person. In addition to the fountains, students plan to install engraved brick pavers that will enhance the landscape as well as pay for the fountains and the upkeep of the area.

Leave your mark on the School of Medicine campus! Purchase an engraved brick for \$125 each. Brick pavers include up to three (3) engraved lines. All proceeds will be used to purchase the fountains and provide ongoing maintenance.

To purchase an engraved brick paver, contact Susan Greer at (803) 733-3321 or mail a check/money order to USC School of Medicine Class of 2011, Office of Advancement, Attn: Susan Greer, Columbia, SC 29208. Designate on the check "Class Gift—2011 #1A3309." Forms can be downloaded online at www.med.sc.edu.

STUDENT SPOTLIGHT

William E. Bynum IV, Class of 2011, was selected to serve a three-year term as a student representative on the national Board of Directors for Alpha Omega Alpha, the honor medical society. Only one student each year is chosen to serve on the board. Bynum is one of three student representatives.



MATCH DAY

On Thursday, March 19, 2009, 68 students of the University of South Carolina School of Medicine Class of 2009 joined nearly 30,000 other applicants in the largest Match Day in history.

School of Medicine students matched in excellent programs in Columbia, throughout South Carolina, and around the country. Nearly 34 percent will remain in South Carolina and nearly 65 percent will enter primary care and areas of need in South Carolina, including family medicine, internal medicine, OB/GYN, psychiatry, emergency medicine, and pediatrics.

SCHOOL OF MEDICINE RECEIVES THE MAXIMUM ALLOWABLE ACCREDITATION

The Liaison Committee on Medical Education (LCME), the accrediting authority for medical education programs leading to an MD degree in U.S. and Canadian medical schools, has granted the University of South Carolina School of Medicine full accreditation. The medical school was granted eight years, the maximum allowable accreditation duration, rather than the typical six years.

"It was a rigorous and long process that gives the medical school the opportunity to take a comprehensive look at our programs and educational strategies," said Richard A. Hoppmann, MD, dean of the School of Medicine. "This was a tremendous team effort that was achieved only by the hard work and efforts of many."

There are multiple accreditation standards for which a medical school is evaluated, including objectives of educational programs in course design and evaluation; curriculum introducing students to the principles of clinical and translational research; policies and practices to achieve appropriate diversity among students, faculty, staff, and other members of its academic community; student access to preventive, diagnostic, and therapeutic health services, among others.

Based on the School of Medicine's performance during the accreditation process, the school was invited to serve on a three-school panel at the annual AAMC meeting in November 2009 to help other schools prepare for their site visits.

"It is validation that we are a medical school with a sound vision and strategy to educate future scientists and physicians," Hoppmann continued. "I could not be more proud of our students, our faculty, our staff, our partners, and our University."

GRADUATION

May 8, 2009, marked the culmination of a four-year journey of challenging, intense work and specialized medical training, as 68 aspiring doctors earned their medical degrees. In addition to those students who officially became physicians, five students earned Ph.D.s in biomedical sciences, four received master's degrees in biomedical sciences, seven received master's degrees in genetic counseling, 26 received master's degrees in nurse anesthesia, and five earned master's degrees in rehabilitation counseling.

During the commencement ceremony held at the Koger Center for the Arts, graduates received their degrees, participated in the traditional hooding ceremony, and took a professional oath to mark the start of their medical careers. The commencement address was delivered by Robert R. Ireland, MD, Class of 1985, program director for mental health policy, Office of the Assistant Secretary of Defense (Health Affairs).

In addition to the degrees, several special awards and honors were presented during the ceremony:

FACULTY AWARD

O'Neill Barrett Teaching Excellence Award

Awarded to faculty members by the Class of 2009 in recognition of outstanding teaching during their four years of medical school.

Paul V. Catalana, MD

B. James McCallum, MD

L. Britt Wilson, Ph.D.

STUDENT AWARDS

Dean's Leadership Citations

Presented to students who have demonstrated outstanding leadership in service to the profession, community, and/or school.

Richard Thomas Forrest, MD

Ann Marie Patterson, MD

Dean's Special Recognition Awards

Presented to graduating students who have combined outstanding academic achievement and commendable service to the school and the community.

Amin Aghaebrahim, MD

Christopher James Huffman, MD

Dean's Award

Presented to the graduating medical students who have developed the highest attributes of the medical profession as reflected in academic and clinical achievement, devotion to patient care, and leadership among his or her peers.

Leslie Erin Gilbert, MD

Rebecca Suzanne Napier, MD

CONTINUING MEDICAL EDUCATION AMONG BEST IN CLASS NATIONALLY

For the second time in a row, the University of South Carolina School of Medicine-Palmetto Health Richland Continuing Medical Education Organization (USCSOM-PHR) has accomplished two significant achievements.

The Accreditation Council for Continuing Medical Education (ACCME), a national agency based in Chicago, has accredited the program for the maximum six years instead of the usual four and awarded accreditation "with commendation." The ACCME directly accredits 725 providers across the country. In the most recent two rounds of accreditation of 170 providers, 16, or just under 9.5 percent, received accreditation with commendation. The School of Medicine is the only such program in the state to have its continuing medical education program accredited for six years.

"It's wonderful to have the recognition," said Morris J. Blachman, assistant dean for Continuing Medical Education and Faculty Development. "This achievement recognizes that the work we are doing is high quality."

The difference between a four-year and a six-year accreditation and receiving or not receiving commendation involves two different compliance levels. The USCSOM-PHR CME organization not only met 15 required criteria; but also excelled at seven other "stretch goals." The additional criteria address the extent to which a CME organization is integrated in their sponsoring institutions to achieve systemic change and improvements in quality of patient care.



From left: 2009 Graduates Ann Marie Patterson, MD, Karyn Hansen, MD, Hailey Gillis, MD, Jesse Woodard, MD and Anna Woodard, MD



Marion Burton, MD, director of community pediatrics at the School of Medicine and associate dean for clinical affairs, was installed October 19, 2009, as president-elect of the American Academy of Pediatrics. In October 2010, Burton will become president of the organization, which comprises 60,000 pediatricians. He is the first pediatrician from South Carolina to hold this position.

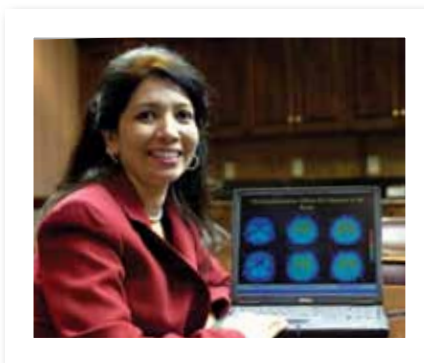
"This is an opportunity to serve children and my pediatric colleagues in a broader sense than I have ever been able to do before," Burton said. "The American Academy of Pediatrics is internationally respected for its commitment to the health and well-being of infants, children, adolescents, young adults and their families. I consider my election as president-elect to be an extraordinary honor personally and professionally."



Joshua T. Thornhill IV, MD, has been named associate dean of medical education and academic affairs for the School of Medicine. In his most recent position as assistant dean for clinical curriculum, Thornhill played an integral role in helping the School of Medicine secure the maximum allowable accreditation by the Liaison Committee on Medical Education (LCME).

Thornhill is a nationally recognized psychiatrist and has been named in *Best Doctors* for five consecutive years. He is a diplomate of the American Board of Psychiatry and Neurology, an American Psychiatric Association Distinguished Fellow, and a general psychiatry examiner for the American Board of Psychiatry and Neurology.

Distinguished Fellow, and a general psychiatry examiner for the American Board of Psychiatry and Neurology.



Meera Narasimhan, a professor of psychiatry and director of biological research in the University's Department of Neuropsychiatry and Behavioral Science, and Benjamin Druss at Emory University have received a \$1 million grant from the National Institute of Mental Health to evaluate and explore the outcomes from an emergency telepsychiatry project in South Carolina that could become a model for other states.

The project, called Clinical and Policy Implications of a Statewide Emergency Telepsychiatry, will examine the effectiveness of a telemedicine initiative in

emergency departments across the Palmetto State called Partners in Behavioral Health Emergency Services.

The emergency telepsychiatry project, funded by a Duke Endowment grant, makes psychiatrists available for around-the-clock consultation with hospital emergency departments across South Carolina.



Marlene A. Wilson, Ph.D., has been named chair of the Department of Pharmacology, Physiology, and Neuroscience at the School of Medicine. She is internationally known for her research on the regulation of neurotransmission by drugs and the

role of gender in brain function. Wilson's research is funded primarily by the National Institutes of Health, one of the world's foremost medical research centers.



Jamee Lucas, MD, received the 2009 S.C. Area Health Education James G. Halford Jr., MD, Award for Leadership in Human Education. The Halford Award is presented to a family medicine faculty member in recognition of outstanding

leadership in providing humane education in South Carolina.

"I was very honored to even be considered. On one level, it felt a little strange to be recognized for just doing what you love," she said. "I get to go to a job that is a life calling, spend my day trying to do good and help others, and all the while work alongside devoted and caring faculty colleagues."



James Stallworth, MD, received the 2009 S.C. Area Health Education Dr. Raymond Ramage Award for Leadership in Humane Education. The Ramage Award is given to a faculty member who exhibits outstanding leadership in providing humane education in a

specialty other than family medicine.

"The most satisfying part of this award is that it represents the successes of many of my former students," he said. "I am so impressed with all of their accomplishments in family medicine in the state."



A MESSAGE FROM DR. JIMMY WILLIAMS, CLASS OF 1988

PRESIDENT, SCHOOL OF MEDICINE ALUMNI ASSOCIATION

Dear Alumni and Friends:

It has been my privilege to serve on the School of Medicine Alumni Association Board since its inception. Now it is my honor to serve as the president of your Alumni Association. I hope that my service will do credit to those who have served as president before me and to all the members of the association.

Every year, our Alumni Association has grown in numbers and in service to our members and to our school. I expect us to continue growing and hopefully expand our reach as our school continues to produce outstanding physicians, doctoral and graduate students, and others who have called the School of Medicine home.

I encourage every graduate of the USC School of Medicine to participate in the Alumni Association in whatever way you can. We offer a variety of social events during the year that many of us have enjoyed and have also raised support for our Alumni Scholarship Fund. With the considerable efforts of our fourth-year students, we enjoy the Black Tie/White Coat Gala each spring and the Alumni Association Tailgate is a fixture every fall. We also sponsor reunions each year to bring together the individual classes; in a couple of years we'll celebrate our first 30th reunion for the class of 1981. Even if you can't attend due to distance or time constraints you can still participate by staying in contact through the alumni office and by contributing to the Scholarship Fund.

Finally, I want to thank our director of alumni relations, Debbie Truluck, and the fine staff of the association. Without their efforts this association would not be what it is today. Again, thank you for allowing me to serve as your president this year.

Jimmy Williams, MD
Alumni Association President

CLASS OF 1981

- **Thomas John Goldschmidt, MD**—“Laura is in her first year of medical school and passed all of her first series of tests. Brooks is a senior in college and recently starred in an off-Broadway play entitled *Boca on Broadway*. Paulette is the hospitality chairwoman for Coral Springs First Presbyterian Church and active in church leadership. Tom is thinking about retiring in 20 years.”
- **Dwight R. Reynolds, MD**—“On June 1, 2009, we opened in our new office space at Lexington Medical Center on the Lexington Campus. We now have five practitioners.”

CLASS OF 1982

- **David F. McKee, MD**—“I am a specialty surgeon for the Department of Defense. I also serve as an active member of the Army Reserve. I teach head and neck anatomy at the USC School of Medicine.”

CLASS OF 1984

- **Dennis Lewis Holwerda, MD**—“I am the senior partner at Albany Pediatrics PC in Albany, Ga.”
- **Gregory Read Malcolm, MD**—“I currently serve as chief of anesthesia at Palmetto Health Baptist Medical Center and on the Board of Directors of Critical Health Systems SC and Critical Health Systems Baptist/Providence. My son, Reid, is in his third year at USC law school and daughter, Whitney, is a junior at the College of Charleston.”

CLASS OF 1985

- **F. Earl Scott, MD**—“I am currently serving with First Forward Surgical Team in Iraq and will be there from June to September 2009. I then will go back to living in Kauai for a while.”
- **Stewart Gregory Young, MD**—“July 1 makes my 23 years of walk-in primary care and occupational medicine at First Care. I tire more easily now and have lost a step or two, but still have 29 years to go until I reach my great aunt Mildred’s record of practicing dentistry until she was 87!”

CLASS OF 1987

- **Katie Bell Hanna, MD**—“I just received my certificate of Added Qualification in Hospice and Palliative Medicine. I have an entirely home-based practice in association with Hospice of the Upstate in Anderson, S.C. I love it!”
- **James G. Hendrix, MD**—“I am a partner with North East Orthopedics. I am the chief of orthopedic surgery at my hospital, CMC-North East in Concord, N.C.”

- **Kimberly B. Hendrix, MD**—“I am a partner with Charlotte Radiology at CMC-Union in Monroe, N.C.”

CLASS OF 1988

- **Steven W. Corso, MD**—“As a result of the death of an 18-year-old patient, we have established a non-profit ministry, Hannah’s Hope Ministry, which is serving to reach out to individuals/patients in health crises and to provide spiritual help.”
- **Richard Lesesne Frierson, MD**—“I was recently named councilor for the American Academy of Psychiatry and the Law. I was awarded the Steven L. Von Riesen Lecturer of Merit Award by the National College of District Attorneys on June 3, 2009.”

CLASS OF 1989

- **Bolling Whitfield Brawley, MD**—“I’ve been in rural Tennessee for almost 17 years doing general pediatrics and still loving it!”
- **Suzannah K. McCuen, MD**—“I am the chief psychiatrist of adult admission services and chief psychiatrist of admitting services at Broughton Hospital.”
- **David E. Pallares, MD**—“We proudly welcomed our second girl, Grace Angelica, born January 27, 2009.”
- **Donna M. Schwartz-Watts, MD**—“I am a professor of clinical psychiatry and director of forensic services. Our school is the reason for my career choice. As a first-year medical student participating in the summer clerkship program, I became exposed to forensic psychiatry. USC still has one of the few programs in the country and one of the best.”

CLASS OF 1991

- **Phillip Alan Fragassi, MD**—“I am the medical director of the Cuyahoga County Juvenile Detention Center and New Directions, an adolescent drug and alcohol treatment center, along with my regular staff position at MetroHealth Hospital. I have recently won both the chairman’s awards for teaching and Ohio University specialty teaching honors.”
- **C. Michael Remoll, MD**—“In January 2009, I was elected to a two-year term as an at-large member of the Medical Executive Committee at Anne Arundel Medical Center in Annapolis, Md.”

CLASS OF 1993

- **Alice D. Lawrence, Ph.D.**, biomedical science—“After being a stay-at-home mom for more than a decade, I went back to school for a master’s degree in library and information science so I could work at my children’s school. I am still head librarian at Grace Baptist Acad-

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emy in Chattanooga. My Ph.D. in biomedical science had equipped me to step in and also teach a joint-enrollment biology class where our high school students receive college credit from the local community college. I enjoyed teaching so much that I am now teaching some night classes at the community college as well as adding some additional high school classes to my schedule in the fall. It's a career path I would never have predicted, but I am thankful for the role that the School of Medicine played in preparing me to impact the lives of these tremendous young people."

- **Robert Anderson Sullivan, MD**—"I enjoy wilderness medicine. I have climbed Kilimanjaro, Denali, Mt. Whitney, and Rainer."
- **Stephanie Kirsten Sullivan, MD**—"I have been practicing for 12 years with my husband and four other partners. I am interested in wilderness medicine."

CLASS OF 1994

- **Rodd R. Lantz, MD**—"I am a partner of the Upstate OB/GYN group and medical director for OB/GYN Service Line at St. Francis Hospital."
- **Troy W. Privette, MD**—"At Palmetto Health Richland, I am assistant program director of EM residency, medical director of chest pain unit and liaison to trauma services director. I am also on the Board of Directors of SCCEP and Carolina Care PA and course director, SCCEP Oral Board Review Course."
- **Kent Brian Sizemore, MD**—"I am practicing as a hospitalist, faculty member, and instructor in Anderson Family Medicine Residency program and clinical pediatrician at AnMed Hospital System. We have seven children now, four from birth and three from adoption, leading to a very full and busy life."

CLASS OF 1995

- **Terry K. Gemas, MD**—"I passed the subspecialty certification exam in orthopaedic sports medicine in November 2008. I am presently one of approximately 900 certified in the world."
- **Eric Lewkowiez, MD**—"I am an assistant professor and director of the Child Outpatient Teaching Clinic at the Medical College of Georgia. I work with medical students, residents, and fellows. The School of Medicine enabled me to get a position in a top-ranked training program with thought leaders in the field."
- **Mark K. McPherson, MD**—"I just left the Office of the Surgeon General this summer to start a second residency in Aerospace Medicine thru the USAF at Brooks City Base in San Antonio. I recently finished a 15-month tour in Kirkuk, Iraq. I am looking forward to

the next stage, and anyone who is coming to San Antonio, my door is always open! I am also single again and very happy!"

CLASS OF 1996

- **Benjamin T. Griffeth, MD**—"I am the associate program director for curriculum, Department of Psychiatric Medicine, and Carilion Clinic. I am also head of the ER Psychiatry at Salem VAMC and commander of the U.S. Navy Reserve Component."
- **Donald W. Shenenberger, MD**—"I currently am a staff dermatologist on active duty in the U.S. Navy. I practice medical, laser, surgical, and cosmetic dermatology. I am active in graduate medical education and am planning on retiring from the Navy in about 2011 or 2012."

CLASS OF 1998

- **Tisha Smith Boston, MD**—"I am currently the medical director of Palmetto Health Senior Primary Care Practice. I have continued involvement with the medical school as I frequently serve as an ICM-1 preceptor and a facilitator for problem-based learning."
- **Javier E. Carles, MD**—"Find us on facebook.com 'javierandshellie carles'."
- **Melanie F. Cole, CRC**—"I have been working for vocational rehabilitation in North Carolina for 10 years. I began as a rehabilitation counselor and switched roles to become a vocational evaluator."

CLASS OF 1999

- **Lisa A Durette, MD**—"I currently am the medical director and president of the Nevada Psychiatric Association. I seek to recruit good physicians to the Las Vegas area!"

CLASS OF 2000

- **Nioaka N. Campbell, MD**—"Nikki and Tony are happy to announce the birth of their daughter, Arin Nicole Campbell. She was born Oct. 28, 2008."
- **Melissa Hess Hummel, MD**—"Besides internal medicine and sleep medicine, I also have an interest in noninvasive cosmetic medicine and have practiced and served as medical director of Rejuvenations Medical Spa in Irmo."
- **William B. Owens, MD**—"I'm currently the medical director of the MICU (Medical Intensive Care Unit) at Palmetto Health Richland and an assistant professor with Carolina's School of Medicine. I am happily married to Lorien Owens, and we have three wonderful kids—William (6), Zachary (4), and Amelia (2)."

- **Mary Cicero Romanic, MD**—“I started my own rheumatology practice, Hagerstown Rheumatology Associates LLC, in Hagerstown, Md., in fall 2008. I also run the rheumatology clinic at the Martinsburg, W.V. Veterans Affairs Medical Center where I work as a contract physician.”
- **Country E. Rowell, CGC**—“The genetic counseling program at the School of Medicine not only prepared me for ‘traditional’ roles in the field of genetic counseling, but also prepared me for the ‘non-traditional’ roles in which I have found myself working for the past eight plus years. The foundation and access to leaders within the genetic counseling field provided during my training have yielded benefits beyond my imaginations.”

CLASS OF 2001

- **Brian A. Hanna, MD**—“I currently practice solo in a satellite office of a larger multispecialty group.”
- **Crystal Yolanda Johnson, MD**—“I am a partner in Three Rivers OB/GYN.”
- **Matthew Ryan Laye, MD**—“I moved back to Spartanburg and joined Regional Maternal-Fetal Medicine in May 2008 after finishing a fellowship in MFM at the University of Mississippi Medical Center in Jackson, Miss.”
- **Bryan V. May, MD**—“I received my MBA from The Citadel and my MHA from MUSC both last year. I also traveled to Romania for two weeks with a surgeon from Carolina’s Medical Center to work on correcting children’s congenital heart defects.”
- **William McIver Merritt, MD**—“I am just finishing up a four-year fellowship in gynecologic oncology at MD Anderson Cancer Center in Houston, Texas. We are very excited about heading back to South Carolina to be near family and friends.”
- **Cayce Cole Tangeman, MD**—“My solo practice, Advantage Primary Care, has been going strong for three years. Our daughter, Anna Leigh, will be five in July and wants ‘to be a bigger doctor than mommy’ when she grows up!”
- **Joel S. Waldrop, MD**—“I am now practicing as an emergency medicine physician at Lexington Medical Center. I separated from the USAF in 2008 after serving my commitment, but transferred to the S.C. Air National Guard and am now a flight surgeon for the 169th Fighter Wing at McEntire Joint Nation Guard Base in Eastover.”

CLASS OF 2002

- **Tasha Matthews Boone, MD**—“My husband, Michael, and I opened our own private practice, the Medical Place Family Practice where I am

the solo practitioner. It opened in December 2008 and has been very successful! We’re also the parents of very active and beautiful three-year-old twin girls, Jessica Michelle and Jennifer Monique.”

- **Lurlene Isabell Scott, MRC**—“I was newly promoted to GS13 level vocational rehabilitation counselor, quality assurance position in Nashville, Tenn. When I graduated, I immediately was offered a position with the Department of Veteran Affairs Medical Center as a vocational rehabilitation counselor working with the homeless population. In 2005 I was promoted and began work with returning Iraqi veterans. I was recently promoted to work with the Central Office of the Department of Veteran Affairs to ensure the services provided by all vocational rehabilitation counselors throughout the country provide quality services to our veterans.”
- **Shane R. Mull, MD**—“I am the ER director in Edgefield County Hospital in Edgefield, S.C.”
- **LaShondra T. Washington, MD**—“I am a board-certified child and adolescent psychiatrist on staff at Gwinnett/Rockdale/Newton Community Service Board, providing outpatient mental health services for children and adolescents in the metropolitan Atlanta chapter of the Black Psychiatrists of America.”
- **James P. Watson, MBS**—“I am associate headmaster at Athens Academy in Athens, Ga. My degree in biomedical sciences has continued to impact my approach to education in the independent school world.”

CLASS OF 2003

- **Brion Vincent Randolph, MD**—“I completed my hematology/oncology fellowship at Baylor in June and plan to move to Jackson, Tenn., where I am joining the Jackson Clinic. I will also serve as director of cancer clinical trials for West Tennessee Healthcare.”

CLASS OF 2004

- **Sachin Lavania, MD**—“I am currently in fellowship at the University of Maryland in pulmonary critical care. After graduation in summer 2010, my hope is to move back down South.”
- **Christopher S. Stanley, MD**—“I am finishing a child psychiatry fellowship this month and will be starting a fellowship in forensic psychiatry in July. I am married to Candace who is also a child psychiatrist, and we welcomed Olivia Grace Stanley on September 18, 2008.”
- **J. Brent Varnadoe, MD**—“I am an academic hospitalist on the faculty at the Dorn VA in Columbia. I split my time between the staff and teaching services, where I teach internal medicine to medical students and residents.”

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■ **Caroline Burnett Webber, MD**—“Ryan and I recently welcomed our second son, Will, to our family. I am enjoying working for Lexington Pediatrics.”

■ **Mary E. Siefert Zander, Ph.D.**, biomedical science—“I am the senior medical writer at Kendle International. My Ph.D. from the School of Medicine gave me the opportunity to get into this field, helping me ‘land’ my first job as a medical writer, which led me to my current position.”

CLASS OF 2005

■ **April K. Getz, MD**, and **Alex Getz, MD**—April is currently in academic medicine at the Medical College of Georgia as an assistant professor in the Department of Family Medicine. Alex is in his first year of child and adolescent psychiatry fellowship. They have a daughter, Anna Grace, who was born in December 2007.

■ **Robert Joel Jones, Jr., MD**—“I completed an emergency medicine residency in San Antonio, Texas. I am now active duty Air Force living in Pensacola, Fla.”

■ **Stephanie P. Mathews, MD**—“I am completing anatomic/clinical pathology residency training and will be starting a hematopathology fellowship in July 2009.”

CLASS OF 2006

■ **Katie Flickinger Baston, MD**—“One more year of ophthalmology to go! After that I am heading to El Paso, Texas. My husband, Kirk, is already there as a professor at the new Paul L. Foster School of Medicine. There’s plenty of work there for me. We miss everyone in South Carolina and never miss an opportunity to let people know that we grew up there.”

■ **Heidi Best, MD**—“I am currently chief resident of emergency medicine residency at Eastern Virginia Medical School in Norfolk, Va. I signed a contract to work with Emergency Physician of Tidewater in Virginia Beach starting in July.”

■ **Justine Dela Rosa DeCastro, MD**—“My husband, Alec, and I just had our first child, Alexis Dela Rosa de Castro, on Mother’s Day, May 10, 2009. I completed my intern year in pediatrics at LSU-Shreveport in 2007 and am currently completing my three-year USAF commitment health professions scholarship program at Barksdale Air Force Base in Louisiana. Alec is completing a fellowship in sports medicine at Southern Illinois University in Quincy, Ill.”

■ **Richard Patton Wilson, CRNA**—“I am currently a certified registered nurse anesthetist at Greenville Memorial Medical Center in

Greenville, S.C. I have been the student clinical coordinator for 18 months and recently accepted a position as one of the assistant program directors for the USC School of Medicine Master’s in Nurse Anesthesia Program. I will be heading up the program on the Greenville Memorial Medical Campus.”

CLASS OF 2007

■ **Jacob Foster Riis, MD**—“I am a flight surgeon with Air Force Special Operations Command.”

■ **Daniel Joseph Teague, MD**—“My elective pathology rotation led me to choose pathology.”

■ **E. Robeson Tinsley, MD**—“I am currently a first-year resident at the Ventura Family Medicine Residency Program and am enjoying it and working very hard. I also got married to the love of my life and best friend, Natalie, one year ago in March 2008 and am so blessed to have her as my partner, friend, and bride!”

CLASS OF 2009

■ **Jeremy Owen Williams, MNA, CRNA**—“I work for Unicorn Anesthesia group as a CRNA. We cover University Community Hospital associated with the University of South Florida in Tampa, Fla. This is also the primary clinical site for the CRNA program here in Tampa through Barry University and the University of South Florida; we help teach future nurse anesthetists.”

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alumniPROFILE

DALE HAMRICK, MD, CLASS OF 1995

ALUMNUS MAKES HOUSE CALLS

You can expect to have regular home visits from relatives and friends. But what about home visits from your doctor? That's the basis for the geriatric medical practice of Dale R. Hamrick, MD, Class of 1995.

"Seeing an elderly patient in the home environment is the secret," Hamrick said. "I know in 30 seconds how well the patient is being cared for by the feel of their environment."

Before medical school, Hamrick worked for a family business for many years. When the business was sold, he began searching for a new career. What he chose changed his life forever.

"I made several calls to medical schools in the Carolinas," Hamrick said. "But Robert Sabalis, the USC School of Medicine admissions director at the time, influenced my decision to come to Columbia. I knew he cared about my interest in medicine and my success as a physician."

At age 39 Hamrick enrolled at the University to complete prerequisites and entered the School of Medicine at age 41. After medical school, Hamrick completed an internal medicine residency at Richland Memorial and Dorn VA hospitals, and a geriatrics fellowship at Wake Forest University Baptist Medical Center.

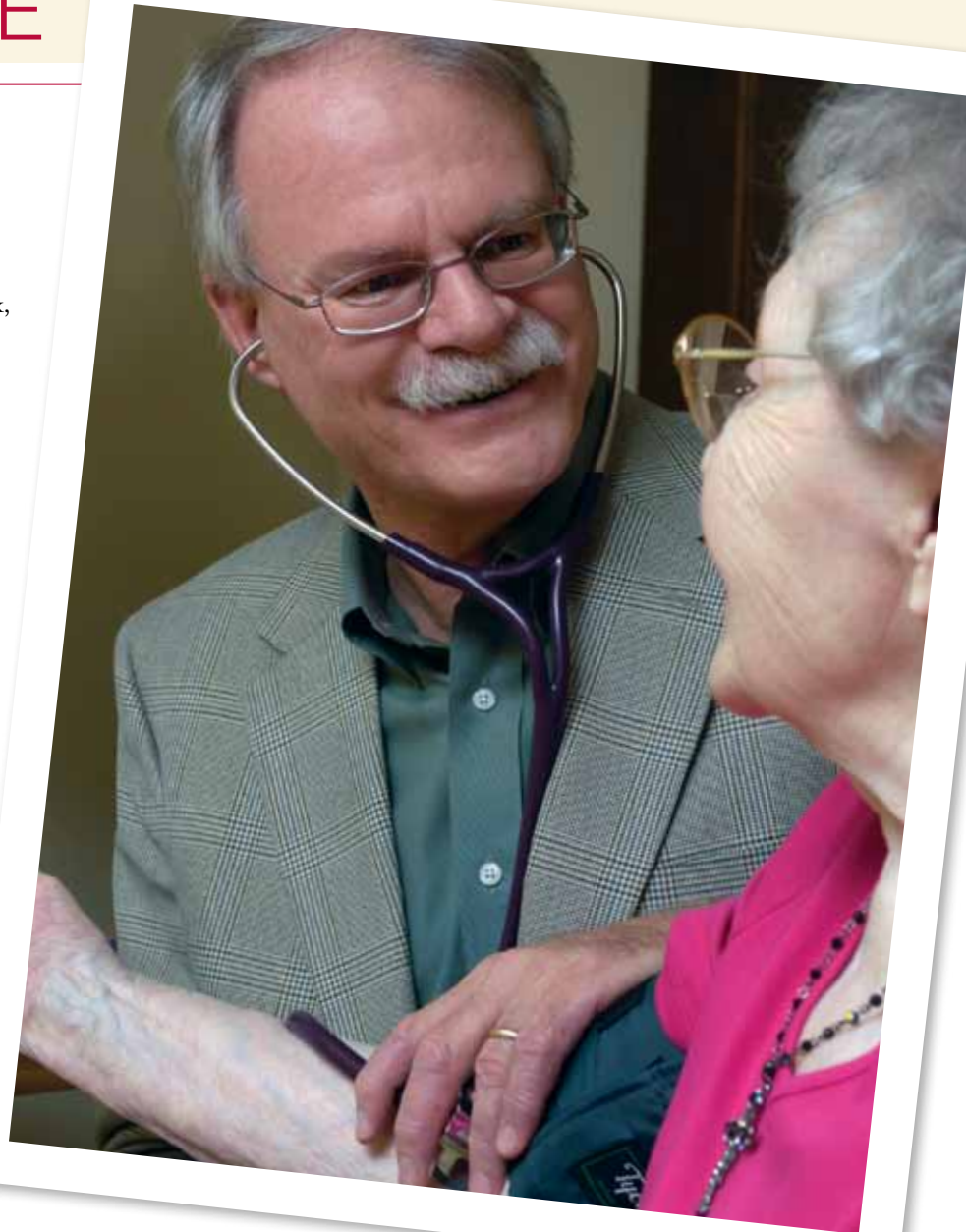
Making house calls at Wake Forest inspired the idea to open a house calls-based medical practice. As his 100-year-old patient Christine Eastwood can attest, "Dr. Hamrick is very thorough. I had pneumonia and a bad case of the flu. He came by three times in one week to make sure I got better.

"He is truly caring, and he makes my life so much easier because I don't have to worry about getting dressed and waiting a long time in a doctor's office."

"Caring for Mrs. Eastwood is the epitome of what I am trying to do with my practice," Hamrick said. "What better satisfaction is there than in keeping someone at home, healthy, and for 100 years to boot!"

In addition to keeping patients comfortable in their familiar surroundings, Hamrick has seen first-hand how house calls can help his patients stay put—either at home or in an assisted living environment and not in an expensive nursing home.

And he is saving money for Medicare and other insurance companies. "Many elderly patients rely on the emergency room for their regular



medical care," Hamrick said. "That's extremely dangerous for their well-being, and it's terribly expensive. House calls put a big dent in that."

Hamrick credits the School of Medicine with influencing him to stay on the primary care track. "That's where health care begins, and, with luck and sweat, that's where it stays for many patients."

Hamrick sees geriatric patients in the greater Columbia area. He hopes to influence other doctors to do the same.

E-mail Hamrick at drhamrick@msn.com to learn more. ■

profiles of GIVING

A HEARTFELT GIFT FOR THE BENEFIT OF OTHERS

Michael and Allison Stanley, from Allendale County, S.C., were elated when they discovered they were expecting their first child, Kayla Elizabeth Stanley.

Allison, a nurse practitioner, remembers the exact day when the news about their unborn child began to turn from excitement and anticipation to worry and uncertainty—November 4, 2008. During her 20-week scheduled visit, Allison’s doctor in Orangeburg advised her to undergo further screenings for possible heart abnormalities due to her family history of congenital heart problems. They were referred to a maternal-fetal specialist.

“My brother was born with a rare heart disorder, so in the back of my mind I knew there could be a possibility of my child having some sort of treatable heart condition,” Allison said.

Allison chose Anthony Gregg, MD, high-risk pregnancy expert, and Osborne Shuler III, MD, pediatric cardiologist, at the School of Medicine’s University Specialty Clinics. She and her husband, Michael, went that day for what they thought would be a simple Level 2 ultrasound to assess their baby’s heart development.

“From the moment I met them, I knew we were in good hands because they were so attentive to my needs and very knowledgeable,” Allison said. “I felt like I was the most important person to them—not just another patient.”

The Level 2 ultrasound revealed fluid around Kayla’s heart and what was thought to be a possible tumor. Gregg performed a series of additional tests, including an echocardiogram and amniocentesis to further diagnose the condition of the baby’s heart and other possible chromosome and genetic abnormalities.

“Dr. Gregg made phone calls to get the results of our tests quickly; he stayed with us through several procedures. We just knew he was working for us,” Allison said. “He was so impressive.”

Although the chromosome tests were normal, Shuler and Gregg became increasingly concerned when a follow-up test revealed that the ductus in the baby’s heart were narrowing, causing more pressure. Gregg performed a fetal pericardiocentesis to fully gauge the condition of the heart.

When the pericardiocentesis revealed blood rather than clear fluid, the Stanley’s knew the baby’s condition was dire. Two days later, baby Kayla was delivered still-born.

“Looking back on it, I realize that everything Dr. Gregg, Dr. Shuler, and their staff were doing was helping me to bond with Kayla. They gave me several 3-D ultrasound photos of her face, and they spent a lot of time explaining things to us,” she said. “They knew the gravity of the situation, and what they did helped us cope in a way that we would be able to deal with the inevitable.

“It is a horrible thing to lose a child. Because of the excellent care we received, we were able to make difficult decisions that were right for us,” Michael Stanley said. “We do not have to wonder about the what ifs. This was very comforting for us after the loss of our Kayla.”



Choosing to grieve in a way that would provide comfort and hope for others, the Stanley’s created the Maternal Fetal Medicine Research Fund in memory of their baby girl. The fund specifically supports maternal-fetal medical research at the University of South Carolina School of Medicine. “It’s rare that someone thinks about other people during such moments like this,” Gregg said. “The Stanley’s’ gesture has the potential to make a great impact on patients with high-risk needs.”

To date, the Stanley’s have received funds from family, friends, and businesses in the Allendale community. Happily, the Stanley’s welcomed a healthy baby girl this past October.

To help support maternal-fetal research, consider giving to the Maternal Fetal Medicine Research Fund. For more information, contact Mechelle English, senior director of development, at 803-733-1567 or mechelle.english@uscmcd.sc.edu. ■

why philanthropy? why now?

For many people, times are financially tough. We understand your need to know how philanthropic dollars are working to secure a healthy future for South Carolinians.

Why philanthropy? Why now? are questions we address in this Q&A.

Q: Why should I give to the University of South Carolina School of Medicine?

A: Giving to the School of Medicine is important because the school receives only a small portion of its total annual budget from state funding. Through September 2009, the medical school has experienced a 36 percent reduction in state funding since its highest funding level 10 years ago. Philanthropic contributions are critical to the school's continued success. We depend on private support so that we can continue to deliver the local impact, national influence, and global reach for which the University and School of Medicine are known.

Q: Where should I designate my gift? How much should I donate?

A: The reasons for making a gift are personal to each donor, and the School of Medicine offers more than 200 giving opportunities to meet your personal goals. Call 803-733-1567 or 803-733-3221 to discuss your giving options. Your donations, no matter how large or small, can make the difference in finding a cure for cancer, developing policies to promote global security, or recruiting the best and brightest students and faculty. Even small contributions, when pooled with gifts from others, can achieve big results—and begin a lifetime of philanthropy.

Q: Can I specify how my contribution is used?

A: Yes. Donors can select from a variety of funds that support people and programs across the entire campus. Whether you choose to support students, staff, or faculty, or contrib-

ute funds toward academics or research programs, your donation will ensure a successful future for the School of Medicine.

Q: Can I give over a period of time?

A: Yes, donors often pledge gifts to be made through a series of payments. The Development Office staff will work with you to establish a pledge commitment over time that suits your individual giving needs.

Q: How do I include the School of Medicine in my will?

A: The USC School of Medicine Development Office will work with you and the University's Office of Planned Giving to address any inquiries you might have about including the School of Medicine in your will.

Q: I can only afford a small gift. What good will that do?

A: The accumulation of small gifts has a big impact on the School of Medicine. Gifts both large and small convey gratitude, engagement, and commitment to the medical school's students, researchers, physicians, faculty, staff, and friends. We welcome all gifts, no matter the amount.

For more information:

Michelle English
Senior Director of Development
School of Medicine Development Office
(803) 733-1567
mestelle.english@uscmed.sc.edu
www.med.sc.edu/giving

2010 Calendar of Events

**University of South Carolina
School of Medicine
Alumni Association**

BLACK TIE/WHITE COAT CLASS REUNION WEEKEND

Friday, **March 5, 2010**

3–5 p.m. **Alumni Board Meeting**
Dean's Board Room, Bldg. 3
VA Campus
7–11:30 p.m. **Black Tie/White Coat Gala
and Silent Auction**
NEW LOCATION
701 Whaley St.
Columbia, SC 29201

NEW OPTION TO PAY ONLINE at btwcgala.sc.med.edu

All proceeds will benefit the School of Medicine Alumni Scholarship Fund and The Free Medical Clinic in Columbia. Enjoy a wonderful silent auction and live music from Liquid Pleasure Band and heavy hors d'oeuvres.

Saturday, **March 6, 2010**

6:30 p.m. **Class Reunions**
Capital City Club
1201 Main St.
25th Floor
Columbia, SC 29201

CLASSES CELEBRATING REUNIONS:

1985, 1990, 1995, 2000, AND 2005

QUESTIONS/REGISTRATION:

Debbie Truluck: 803-733-1568 or
debbie.truluck@uscmed.sc.edu
Johnny Hakim: 803-733-3311 or
johnny.hakim@uscmed.sc.edu

**Register for events online at
www.alumni.med.sc.edu.**



From left: John Goree, MD, Suzy Goree, Donald Saunders Jr., MD, Carol Saunders, Patricia Moore-Pastides and University President Harris Pastides

A rare honor for a dear friend

More than 30 years ago, the prospect of a second medical school in South Carolina seemed impossible and unlikely until a group of Columbia-area physicians rallied to champion the cause. With dedicated involvement from supporters like Donald E. Saunders Jr., MD, the School of Medicine at the University of South Carolina became a reality.

“Dr. Saunders has served as a mentor and role model for hundreds of medical students, residents, and faculty,” said Richard A. Hoppmann, MD, dean of the School of Medicine. “I consider myself fortunate to be one of those individuals who has benefited from knowing him.”

John A. Goree, MD, Saunders’ 1955 classmate from Duke University medical school, watched Saunders pour his heart into the School of Medicine. Goree, now a retired professor and radiologist at Duke, was the featured speaker at a special reception and lecture in honor of Saunders, held Sept. 9, 2009, on “The Woodblocks of Vesalius: Their Travels and Fate and the *Icones Anatomicae*.” Goree owns the rare book and has given lectures across the country on its origin and the history of its famed author, the 16th-century physician Andreas Vesalius.

Vesalius (1514-64) was an anatomist, physician, and author of one of the most influential books on human anatomy, *De humani corporis fabrica* (On the Structure of the Human Body). *Icones Anatomicae* is an excerpt of that early work. It was published in 1934 by the New York Academy of Medicine, the University of Munich, and the Bremer Press, using original prints from the woodblocks of Vesalius’ 1543 anatomy book. Each copy of *Icones Anatomicae* was hand made, and only 130 institutional copies remain in circulation.

At the end of the Sept. 9 lecture, Goree announced that he would donate his copy of *Icones Anatomicae* to the School of Medicine Medical Library in honor of Saunders.

“We thank Dr. Goree for gracing us with a spectacular lecture that was a fusion of art and science and a fusion of friendship and learnedness. What a wonderful way to celebrate the uncountable contributions of Dr. Saunders,” said University of South Carolina President Harris Pastides. “Now, the University will be able to count itself among the famous libraries with a copy of this magnificent book.” ■