An Excellent Fight
Ralph Budd, M.D., helps the immune system in its battles

- STUDENT VIEWS ON GLOBAL HEALTH
- ALUMNI AWARD WINNERS
- THE 2017 MATCH
Seeler’s Gift to Scholarship Fund Supports Students Specializing in Primary Care

Ruth Seeler, M.D.’62, continues her commitment to medical education at the UVM Larner College of Medicine with a $150,000 gift to the scholarship fund she established 17 years ago bringing its current value to $500,000. The fund has a storied history of supporting students in achieving their dream of becoming a doctor. The Andrea Seeler M.D.’62 Scholarship, awarded annually to a third- or fourth-year student specializing in primary care, has to date awarded nearly $150,000 to 22 recipients.

To ensure the fund meets that need into the future, in September of 2015, Seeler committed $2 million in her estate plan to be added to the scholarship fund. The college estimates the bequest will enable it to increase scholarship awards to primary care students by approximately $90,000 annually. Once the bequest is realized, the Seeler Scholarship will be in the top five largest scholarships for the Larner College of Medicine.

Seeler’s commitment to her medical alma mater runs deep. She was president of the UVM Medical Alumni Association Executive Committee from 2008 to 2010, and was presented the Service to Medicine and Community Award in 1998. In 2007, she received the A. Bradley Soule Award, the highest UVM medical alumni honor. The only woman in the 1962 graduating class of medical students, she is currently emerita professor of pediatric hematology-oncology at the University of Illinois College of Medicine.

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For information about how you can support the UVM Larner College of Medicine, please contact the Medical Development and Alumni Relations Office.
In the third week of April this College lost its namesake, Robert Larner, M.D., a member of the Class of 1942. A proud Burlington native — a product of the city’s Old North End — Dr. Larner was the first member of his family to go to college when he came “up the hill” to UVM in the fall of 1936.

Dr. Larner’s undergraduate and medical degrees were funded in large part by scholarships, and he never forgot how important that assistance was in completing his education and starting him on his chosen career.

For more than three decades, students at this College have benefited from Dr. Larner’s philanthropy. And the entire alumni community has benefited too. Bob was deeply committed to developing what he called “the culture of giving back.” He structured the Lerner Loan Fund to encourage further giving from others, and to this date more than 1,300 alumni donors have joined in contributing to the fund, which has directly aided more than 1,300 medical students — a cycle of growth that will continue in the future.

In the last several years, Bob became increasingly interested in the changes taking place in medical education. He and his wife, Helen, gave us broad support in our efforts to incorporate “active learning” into our medical curriculum. This June, more than 600 medical educators from across the world will gather in Burlington as we host the annual meeting of International Medical Science Educators. On our campus they will see firsthand the improvements in classroom and simulation facilities, as well as our new Learning Commons and our new Teaching Academy — all part of our effort to expand the curriculum and student support systems already in place. In this issue you will find a collection of essays by students who have taken part in our Global Health program that began in conjunction with WCHIN by Dr. Majid Sadigh — just one eloquent indicator of the importance of this educational connection.

In its clinical form, that education is available to our students in a wide range of settings. I am pleased to share the news that the State of Connecticut has approved our application for licensure of a branch campus in partnership with Western Connecticut Health Network (WCHN). Establishing an accredited branch campus with WCHN will allow a cohort of our medical students the option to complete their entire clinical experience (Clerkship and Advanced Integration) in Connecticut.

We greatly appreciate the efforts of our colleagues at WCHN, including the support and leadership of Dr. John Murphy, President and CEO, and Dr. Jonathan Fine, Director of Medical Education. The faculty at Danbury and Norwalk will be champions for medical education and our students, and we look forward to expanding the curriculum and student support systems already in place. In this issue you will find a collection of essays by students who have taken part in our Global Health program that began in conjunction with WCHIN by Dr. Majid Sadigh — just one eloquent indicator of the importance of this educational connection.

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Davidson Named Associate Dean for Graduate Medical Education

Dean Rick Martin, M.D., and Claude Deschamps, M.D., senior associate dean for clinical affairs and president and CEO of the UVM Medical Group, have appointed Melissa Davidson, M.D., as an associate dean for graduate medical education at the Larner College of Medicine and Designated Institutional Official at the UVM Medical Center. Davidson succeeds Mark Levine, M.D., professor of medicine, who was appointed earlier this year to serve as the commissioner of health for the State of Vermont.

Davidson, who joined UVM in 2012, is an associate professor of anesthesiology and pediatrics. Prior to coming to Vermont, she served as associate professor and assistant dean for graduate medical education at Rutgers-New Jersey Medical School. At UVM, her leadership positions have included service as director of anesthesiology education since 2014, and chair of the anesthesiology residency Clinical Competence Committee, which oversees for family medicine development in the department. She is a member of the Larner College of Medicine’s Teaching Academy Task Force, and was inducted as a Distinguished Educator of the Teaching Academy in 2015.

At the UVM Medical Center, Davidson created the Chief Resident Leadership Workshop, which now is in its fourth year and integrated within the Teaching Academy. She has worked to create a new evaluation system consistent with the Accreditation Council for Graduate Medical Education (ACGME) Milestones Project, which has been developed as an abstract and shared with other programs nationwide. She has also been integrally involved in revising the curriculum for the medical student elective in anesthesiology.

Davidson’s national service includes membership in The American Society of Anesthesiologists, and involvement in The Society for Education in Anesthesiology, where she has served on the Committee for ACCM Competencies and the Committee on Research in Education since 2005, and co-directs that Annual Workshop. She is also associate editor of MedEdPORTAL, which has recognized her as an Outstanding Reviewer.

She received a medical degree and completed a residency in anesthesiology at the UVM/ New Jersey Medical School, after which she joined the Rutgers New Jersey Medical School faculty as assistant professor of anesthesiology. Davidson was promoted to associate professor in 2014 and was appointed assistant dean for graduate medical education in 2017. For ten years, she served as vice chair of education and program director for the Department of Anesthesiology, and from 2001-2010, she served as interim chair.

Governor Appoints Levine Vermont Commissioner of Health

Vermont Governor Phil Scott announced in January the appointment of Mark Levine, M.D., professor of medicine and associate dean for graduate medical education at the Larner College of Medicine, as Vermont’s most recent Commissioner of Health. Levine succeeds Harry Chen, M.D., who has served as Commissioner of Health since 2012 and will continue as the Vermont's Department of Health Commissioner.

An internal medicine specialist at the UVM Medical Center, Levine has held a number of leadership positions—locally, statewide and nationally. In addition to his primary academic roles, he has also served as the Designated Institutional Official at the UVM Medical Center and vice chair for education in the Department of Medicine. Levine was elected a member of the Board of Regents of the American College of Physicians (ACP) in 2015, has been a Fellow of ACP since 1992, and served as Governor of the Vermont chapter of ACP from 2003 to 2010. This past fall, Levine was also elected President Elect of the Vermont Medical Society. Board-certified in internal medicine, Levine’s clinical and research interests include health promotion and disease prevention, diagnostic problems, medical education and curriculum, and teaching in the ambulatory setting.

While serving as the UVM faculty in 1992, Levine earned his medical degree from the University of Rochester School of Medicine, and completed an internal medicine residency and served as chief medical resident at UVM, and also did a fellowship in general internal medicine and pediatrics at the University of North Carolina.

Leffler Named Chief Population Health and Quality Officer of UVM Health Network

The University of Vermont Health Network has selected Stephen Leffler, M.D.’s, a chief population health and quality officer in this role. Leffler, who currently duals medical officer and chief quality officer for the University of Vermont Medical Center, will oversee coordination of quality, patient safety and population health programs for the UVM hospital, the UVM Health Network. This is the first senior leadership position created at the UVM Health Network since its formation in 2011, reflecting that enhanced coordination of care is critical to achieving federal and state reform goals.

“As we continue to move from a fragmented healthcare system that rewards quantity of care to one that focuses on the quality of care and overall health of our communities, we need an experienced, trusted leader like Dr. Leffler to make sure patients in the UVM Health Network are getting the full benefit of those promising changes,” said John Brumsted, M.D., president and CEO of the UVM Health Network and co-CEO of the UVM Medical Center.

He offers a powerful combination of views and practicality that will help us achieve our goals of providing the support people need to be as healthy as possible.

CUSHINER NAMED EDITOR-IN-CHIEF OF NEW INTERNATIONAL JOURNAL ON THROMBOSIS AND HEMOSTASIS

On January 10, 2017, the Society on Thrombosis and Haemostasis (ISTH), in partnership with John Wiley and Sons, Inc., announced the launch of the Society’s new open-access journal, Research and Practice in Thrombosis and Haemostasis (RPTH). The journal was established to publish in peer review and publication of research, and to serve as a resource for the ISTH community.

Dr. Mary Cushman, M.D., M.Sc., named a 2017 International Thrombosis and Haemostasis Outstanding Investigator Award. Cushman was honored at the American Society of Thrombosis and Haemostasis (ASPIRE) awards banquet in Boston on July 10, 2017.

Professor of Pathology and Laboratory Medicine and a Wrenn Janssen-Heininger, Ph.D., has been approved among the inaugural recipients of the Outstanding Investigator Award from the National Heart, Lung and Blood Institute (NHLBI). This prestigious award provides more than $900,000 in annual funding for a total of roughly $3.5 million over the course six years. The NHLBI Outstanding Investigator Award is designed to “promote a scientific productivity and innovation by providing long-term support and increased flexibility to experienced Program Directors (PDs/Principle Investigators (PIs) who are currently (D0s) or can achieve at least two NHLBI D1 equivalent awards and whose outstanding record of research demonstrates their ability to make major contributions to human, lung, and blood research.”

Janssen-Heininger says this award will enable her to focus on innovative research, finding new treatments and therapies into clinical care.

JANSSEN-HEININGER RECEIVES INAUGURAL NHLBI OUTSTANDING INVESTIGATOR AWARD

Liam and Stein Recognized as AAAS Fellows

University of Vermont Cancer researchers, Jan K. Carney, M.D., M.P.H., and Jane Lian, Ph.D., have been elected fellows of the American Association for the Advancement of Science (AAAS) for contributions to education, innovation, and scientific leadership. The two Larner College of Medicine professors of biochemistry were presented with official certificates and pins at the AAAS Annual Meeting in Boston, February. Both Stein and Lian join the UVM faculty in 2017. Stein’s research focuses on the regulation of gene expression during cellular growth and during the programmed cell death, or differentiation transition. Lian’s research involves several areas, including combinational cancer mechanisms for cell development, characterization of mouse pain, resulting from mutation of bone related genes, and cell biology in the bone microenvironment.

CARMEN RECEIVES CRYSTAL HEART AWARD AND GO RTD FOR WOMEN RED LINEUCHE

Janine K. Capone, M.D., M.P.H., associate dean for public health, was honored as the recipient of the 2017 Crystal Heart Award at the American Heart Association’s 10th annual Women Go Red for Heart event in January. Go Red for Women is the American Heart Association’s national movement to end heart disease and stroke among women, and the Crystal Heart Award is presented by the board of Go Red for Women. Capone was honored for her work to further the AHA’s mission “to build healthier lives, free of cardiovascular diseases and stroke.”
Sadigh Named Inaugural Trefz Family Global Health Endowed Chair at Western Connecticut Health Network

A personal experience with human suffering as a child in war torn Iran instilled a passion for caring for people in Majid Sadigh, M.D., who knew at a young age he wanted to become a physician. In the 42 years since he came to the U.S. as a refugee, the associate professor of medicine at the Larner College of Medicine at the University of Vermont and UVM/Western Connecticut Health Network (WCHN) Global Health Program has become an internationally recognized global health expert and humanitarian, impacting countless lives in numerous poor countries across the globe.

While his portfolio of accomplishments is check-full, the extremely modest Sadigh, an infectious disease specialist who has dedicated much of his life to fighting HIV worldwide and provided care to Ebola patients in Liberia, is well-known for his humility and propensity to attribute successes to his collaborators. So when Sadigh was inducted this academic year as the inaugural Christian J. Trefz Family Endowed Chair in Global Health, he thanked his partners around the world, his students and trainees, and the patients and their families who make his work not only possible but meaningful.

The endowed chair is the first-of-its-kind in the State of Connecticut and one of only a few hospital-based endowed global health chairs in the nation. Established with a generous gift from Christian J. and Eva W. Trefz of Westport, Ct., the endowed chair advances the work of the UVM/WCHN joint Global Health Program, launched in 2012 to provide medical residents, students and faculty with hands-on learning opportunities to experience global health care systems and to better understand public health issues and the impact of globalization on vulnerable populations. WCHN is the network organization for Norwalk, Danbury and New Milford Hospitals and affiliated organizations.

The endowed chair aims to promote an environment of learning and innovation that serves the needs of WCHN’s very diverse community, according to Christian Trefz, vice chairman of the Trefz Corporation and owner of a number of Connecticut-based McDonald’s restaurants and a member of the Norwalk Hospital Foundation Board of Directors. He and his wife Eva are longtime Norwalk Hospital donors. The Trefz Endowed Chair in Global Health is the eighth endowed chair at WCHN.

The WCHN Global Health Program has expanded to include collaborative training opportunities for students and faculty at Norwalk Hospital, as well as at the UVM Larner College of Medicine, for which WCHN serves as the clinical training partner. Thanks to Sadigh’s immense efforts the Global Health Program currently offers clinical training opportunities at partner sites in five countries, including the Democratic Republic of Congo, Uganda, Zimbabwe, Rwanda, and Vietnam.

Karen Leonard, M.D., Associate Professor, Pediatrics;
Sarah McCarthy, Ph.D., Assistant Professor, Neurosciences;
Stephen Morana, D.P.M., Assistant Professor, Orthopaedic Rehabilitation;
Julie Phillips, M.D., Ph.D., Assistant Professor, Obstetrics, Gynecology and Reproductive Sciences;
Constance van Egen, Dr.P.H., Assistant Research Professor, Medicine;
Richard Worts, M.D., Associate Professor, Radiology.

PROFESSOR

Tess Aulett, M.D., Resident, Surgery, UVM Medical Center, and Fellow, UVM Clinical Simulation Laboratory;
D. George Ormand, M.D., Resident, Surgery, Danbury Hospital, and Fellow, UVM Clinical Simulation Laboratory;
Lauren Pearson, D.O., Resident, Pathology and Laboratory Medicine, UVM Medical Center;
Mirjal Shukla, M.D., Fellow, Surgery, UVM Medical Center.

LITTENBERG & CHOPAN’S STUDY FINDS ASSOCIATION BETWEEN EATING HOT PEPPERS AND DECREASED MORTALITY

Like spicy food? If so, you might live longer, say Larner College of Medicine researchers who found that consumption of hot chili peppers is associated with 15 percent reduction in total mortality primarily in deaths due to heart diseases.

The large prospective study published recently in PLoS ONE. The new study by Harry and Carolyn Tufi, professors of medicine, Benjamin Littenberg, M.D., and medical student Mustafa Chopan, 1D, used National Health and Nutritional Examination Survey (NHANES) III data collected from more than 10,000 Americans who were followed for up to 23 years, and estimated the total number of U.S. adults consuming hot peppers participating to help not red chili pepper consumption. “Because our study adds to the generalizability of previous findings, the people around the world who consume hot peppers would benefit from a dietary recommendation and/or fuel further research in this field of clinical trials,” says Chopan.

STRESSED-OUT INTERFERONS REVEAL POTENTIAL KEY TO ALTERNATIVE LUPUS TREATMENT

Only one drug has become available over the past 50 years for the estimated 1.5 million Americans and millions more worldwide suffering from lupus, but new research has identified a previously unknown mechanism involved in the immune response that could provide an alternative therapy target. Lupus, a chronic autoimmune disease, is marked by elevated levels of type 1 interferon, a substance normally secreted by immune cells in response to viral infections. The origin of the interferon signature in lupus has remained a mystery for years. With working to solve this mystery, researchers, including Ivonne Buskiewicz, Ph.D., and Andreas Kastrin, Ph.D., assistant professors of pathology and laboratory medicine at UVM Larner College of Medicine, have identified an unexpected finding: a protein that normally signals an immune system pathway during viral infections was transcriptionally activated in lupus patients, even in the absence of viral infection. These results were published recently in the journal Science Signaling. Chopan describes her team’s publication as “the first paper showing that the interferon pathway can be activated by something other than viral infection or nucleic acids.”

NOVEL DIMENSIONAL APPROACH UNCOVERS BIOMARKER FOR INATTENTION

Disorders such as attention-deficit/hyperactivity disorder (ADHD) occur in a reported 11 percent of U.S. school-aged kids. But clinicians still don’t fully understand the underlying causes of this common condition. Now a brain marker may be on the horizon, thanks to a new approach that provides evidence of a relationship between brain structure and dimensional measures of ADHD symptoms. The study’s results were first reported in an online article in Biological Psychiatry in March. Using data from the European-based IMAGEN study, researchers, including Matthew Albaugh, Ph.D., from the Larner College of Medicine, took a multi-informative approach for assessing whether or not dimensional measures of ADHD symptoms and brain imaging data could shed new light on the roots of ADHD’s symptoms, including hyperactivity and impulsivity. Their work represents the largest structural imaging study to date on ADHD symptoms in adolescents. In addition to Albaugh, study collaborators from UVM include Catharine Orr, Ph.D., postdoctoral associate in psychiatry; Robert Altshul, M.D., associate professor of psychology; Nicholas Allgrove, Ph.D., postdoctoral associate in psychiatry; Nicholas D’Alberto, neurotranscience graduate student; Kyle Laviron, clinical psychology graduate student; Scott Mackey, Ph.D., assistant professor of psychiatry; Philip Spechler, M.A., NIH postdoctoral fellow in the Vermont Center on Behavioral Health; Hugh Oyarzun, Ph.D., assistant professor of psychiatry; Alessandra Petrarca, Ph.D., assistant professor of psychiatry; and Bader Chaoori, Ph.D., postdoctoral fellow in psychiatry.

SIGMON REPORTS ON STUDY OF WASTILEITED OPIOID-DEPENDENT ADULTS IN NEJM

Associate Professor of Psychology Stacey Sigmon, Ph.D., in addiction research expert at the Vermont Center on Behavior and Health, has seen the opioid addiction problem firsthand as the director of the Chittenden Clinic Opioid Treatment Program based in Burlington, Vermont’s largest methadone clinic, the Overdose Crisis Center recently increased capacity from 400 to 1,000 patients, but waitlists for treatment persist. Sigmon conducted a study to test on “Interpersonal Hypotheses” (IPHT) for treating opioid-dependent adults. The results debuted in the New England Journal of Medicine December.

Not only did 81 participants achieve for more illicit opioid cravings, they also demonstrated greater reductions in their anxiety levels of injection drug use and also in psychological symptoms, such as anxiety and depression.
Medical students see a lot of the health care system — the good, the bad and the ugly — during their training, and their fresh perspectives sometimes lead to the identification of a need and a potential solution. But without sufficient support, an idea for an innovative technology to improve health care can falter. Medical student Al Marchese ’19 has established a system for bringing these ideas to fruition — he’s leading an initiative, called the Catamount Innovation Fund, which links innovation and entrepreneurship to the practice of medicine, among other industries.

During his first year of medical school, Marchese recognized a need to connect medical students with healthcare entrepreneurs and to foster a space for future medical professionals to think creatively about new, groundbreaking ideas that could significantly improve health care. This is where the idea for a student fund was born.

In the fall of 2017, the Catamount Innovation Fund will open its “doors” to UVM undergraduate and graduate students seeking to collaborate with and invest in current student entrepreneurs and inventors, as well as recent alumni. With approval from UVM President Tom Sullivan and Vice President for Research Richard Gallbraith, and collaboration with numerous other students, including Andrew Dacca ’19, an undergraduate in economics, Marchese is now preparing to raise capital for the fund and to form an innovation team for the 2017-18 academic year. He notes that no previous finance or business experience is required to become a part of the team, just a willingness to think creatively about the future of innovative health care technologies.

Class of 2019 Celebrates Foundations Completion

Plaques, applause, Clerkship Survival Kits and the first ever Larner College of Medicine white coats were among the highlights of the Class of 2019 Foundations Awards Ceremony this spring semester. The event — a welcome late-January break for second-year medical students busy studying for their U.S. Medical Licensing Examination Step 1 Exam — marked the completion of the Foundations level of the Vermont Integrated Curriculum and recognized the students’ next phase of their education — clinical clerkships.

STUDENT LAUNCHES INNOVATION FUND

INNOVATION FUND

A $1 million bequest from Bloomfield supports two existing visiting professorships at the Cardiovascular Research Institute of Vermont. The gifts — one to support creative careers in research and the other to bring leading cardiovascular thinkers to campus — honor both his lifetime of work at the front lines of heart health and the CVRI’s mission to reduce the incidence, morbidity, and mortality of heart and vascular diseases through improving prevention, diagnosis, and treatment.

A $250,000 gift from the Department of Plastic and Reconstructive Surgery, from 2008 to 2017, and again since 2016, has also been critical in clinical care for the state of Vermont. In 1984, Lttrout established the UVM Medical Center Macromolecular Reconstructive Surgery and Replantation Services, and he played a key role in the Vermont Department of Health’s Children with Special Needs program by staffing the Civil Polio and Congenital Hand clinics. This Lttrout’s generosity in establishing a national M.D. professorship provides key support for finding edge research and teaching in the Department of Surgery.

For information about how you can support the UVM Larner College of Medicine, please contact the Medical Development and Alumni Relations Office.

The UNIVERSITY OF VERMONT LARNER COLLEGE OF MEDICINE Medical Development & Alumni Relations Office
(802) 656-4014  |  medical.giving@uvm.edu
www.med.uvm.edu/alumni
This is a big moment for you, and a big moment for all of us at the College who have helped you prepare for it. We share your love of medicine — your dedication to your profession — and we wish you all the best as you take this next big step.” — Dr. Richard W honor

A huge celebration — and a couple of surprises and twists — were on the agenda for the Lerner College of Medicine Class of 2017’s Match Day event on Friday, March 17. The festivities began just before noon in the Health Sciences Research Facility’s Holsh Gallery, with "Paul Pope" (radiology oncologist M. James Wallace) M.D. ’99, leading the more than 100 senior medical students to the stage where they learned their future fates — the locations for their residency training for the next three or more years. A video livestream made sharing in the day’s excitement possible for students, family and friends in remote locations around the globe.

"Class of 2017, you face a lot of revolutions in your career, though certainly may be the most public of all," said Dean Rick Morin. "This is a big moment for you, and a big moment for all of us at the College who have helped you prepare for it. We share your love of medicine — your dedication to your profession — and we wish you all the best as you take this next big step."

Other speakers and special guests at the event included UVM President David Rosenberg, Ph.D., Senior Associate Dean for Medical Education William A. Jeffries, Ph.D., Professor of Medicine Laurie Leclair, M.D., co-center director for Cardiovascular, Renal and Respiratory Systems, and Class of 2007 President Mohammad Moradiabadi, Christa Zehle, M.D. ’99, associate dean for students, delivered the Match envelopes to the stage, where Class of 2017 attendees randomly selected envelopes and announced respective patient's names for reading in public or private.

A total of 120 senior students from the College participated in the main Match. Three students learned their residency locations early through the Military Match and four students participated in separate matching programs for their specialties — two in nephrology and two in otolaryngology. After graduation, students in the Class of 2017 will begin residency orientation at locations across the country in mid-to-late June.
The Calling

BY MAJID SADIGH, M.D.

Dr. Sadigh, the Trefz Family Endowed Chair in Global Health, directs the UVM/WCHN Global Health Program and is a driving force behind its success. The following, which reflects the principles behind the global health program, was part of a speech he gave at the 2016 Global Health Celebration hosted by the College.

The practice of global health connects us to people of diverse perspectives and colors, and upon reflection, to ourselves and the lived experience. We learn to respect differences and recognize shared humanness. We cultivate pure human connections rooted in empathy, unhindered by superficial separations created by classism, racism, colonialism, and structural oppression. We are invigorated by the fortune of understanding others through their histories, strengths, weaknesses, fears, and failures. We learn about ourselves by reciprocating that vulnerability, by being exposed openly. In that openness we discover weaknesses, impurities, prejudices, and deficiencies in our own substance. We are then driven to improve our humanness — to become more caring, more compassionate, more aware, and more giving.

Tragedy and suffering born from human rights inequalities, particularly health inequality, social injustice, and poverty are illuminated on a grand stage under a beam of light. All that is usually hidden is revealed. We stand united on the stage to advocate for those who have been enshrouded behind the curtain. Their tragedies teach us something about resilience, and we find hope in their strength. Their stories tremble through the comfortable encasement of our privilege until it cracks. We learn to care about something outside of ourselves. In discovering the roots of empathy, we rediscover what calls us to the field of medicine. In its essence, this profession is a calling. At the service of the underserved, we follow that calling.

Above, from left, Dr. Brian Beesiga, Dr. Sohi Ashraf, medical student Mary-Kate LoPiccolo ’18, and Dr. Majid Sadigh examine a patient during clinical rounds at Mulago Hospital in the capital city of Kampala, Uganda.

FEELING EMPATHY AT WORK THROUGHOUT THE WORLD

Global Health experiences broaden skills and horizons for students and faculty

These are some of the emotions medical students have expressed after returning to Vermont at the end of a global health rotation through the Larner College of Medicine’s Global Health Program in partnership with Western Connecticut Health Network. It takes time, but these feelings often coalesce into a changed outlook on their chosen profession. Many come to a deeper understanding of how different health care systems and socioeconomic structures affect patients’ lives. Most are changed by their experiences, and especially by the patients they care for, leaving them both awed and humbled by the responsibility inherent in becoming a physician.

The Larner College of Medicine/Western Connecticut Health Network Global Health Program, established in 2012, continues to grow in size and scope. It allows medical students, residents, fellows, and faculty from the Western Connecticut Health Network and the College to travel to five partner sites in Uganda, Russia, Vietnam, Zimbabwe, and the Dominican Republic. The program is unique in its emphasis on bi-directional exchange: Medical students and faculty from the U.S. travel overseas, but physicians and other health professionals from partner institutions come to the U.S. and visit other sites across the globe to experience medicine in different cultures as well.

Students are asked to reflect on their experiences in writing. Many talk about difficult situations they encounter, bringing up questions about power, privilege, and the role of the physician. Some write about experiencing the death of a patient — sometimes for the first time — and come to poignant realizations about their work. Many of these reflections are published on the College’s Global Health Diaries blog. The following are excerpts from recent posts.
Turning Vulnerability into a Great Inspirational Tool for Global Health

BY ROBERT KALYESUBULA, MBCHB, MMED, FISN
Uganda | August 5, 2016

Each of us has a point of vulnerability that is often heightened by an unfamiliar environment. What differs from one person to another is the level of resilience. Participant resiliencies vary and are often hard to predict before they face real life experiences. It is very important to be aware of, and appreciate, vulnerability when it surfaces. When the clinicians come to a foreign country for the first time they need to be patient and not too hard on themselves. They need to take time and be willing to learn not only the medicine but also the culture and environment where they have gone to work or study. They should be willing to be silent but curious observers who may not be able to contribute much at the outset. However, every lesson should be used to learn and be prepared to give back when the right moment comes. For the medical student, it may be going back to finish their residency so that they can gain more skills in order to return and treat the patients who enabled them to learn so much.

Great global health participants look at every patient as an opportunity to learn something new, not only in medicine but also in culture. They use their experiences as a platform for building empathy, which is the essence of medical practice. Vulnerability of patients and students should stimulate us to look deep in ourselves and draw from the inner strength to make ourselves and, more importantly, our patients better.

Necessity is the Mother of Invention

BY OMKAR BETAGERI ’19
Parirenyatwa Hospital, Harare, Zimbabwe | July 15, 2016

One of my first thoughts upon viewing the medical system was that I incorrectly thought that a system without money needed for an adequate number of resources could not maintain prompt and effective continuity of care necessary to treat patients. Though some of these limitations can be a barrier to care, what I have learned is that the word “adequate” is truly relative, a term that is redefined within the context of Pari. In the vein of “necessity is the mother of invention,” the medical practice here at Pari has developed many ways to combat the limitations that they seemingly face. The medical system has evolved its strengths in a way unique to Zimbabwe, which is what I feel makes this system inherently special and a pleasure for international students and faculty to visit.

For example, the most common day-to-day patient presentations at Pari are respiratory, gastrointestinal, or neurological issues that might require extensive imaging (e.g. TB, COPD, strokes, etc.). However, I was lucky to partake in a tutorial with fifth year medical students this week in which students practiced their respiratory exam on a patient to formulate a diagnosis. The instructor called upon the students one by one to practice a component of the exam, such as examining fingertips for asymmetry, general appearance for signs of respiratory distress, lymphadenopathy, etc. It was a meticulous process in which students were assessed on their ability to be specific and recall information with precision. The students ultimately progressed to diagnose the patient with a pleural effusion and its location, solely on the basis of auscultation, chest movement upon respiration, and tracheal shift. The professor emphasized to the class that there was really no need for imaging in this case if the physician had conducted a proper physical exam, upon which the diagnosis would essentially present itself.

This type of comment embodies the philosophy of the teaching system here at Pari, where students are indeed taught how to utilize and analyze imaging modalities when possible, but are taught first and foremost how to use their hands, eyes, and ears to conduct a thorough physical exam which guides their diagnostic thinking. Also noted and emphasized by numerous instructors is the value of thorough history taking, in that, along with the physical exam, it can often elucidate the diagnosis.

There are aspects of this approach that resonate with the clinical philosophy at the Larner College of Medicine. For example, we already know history taking to be a critical part of making a clinical decision. Nonetheless, throughout the next few weeks at Pari, I recognize that I have a unique opportunity to really build upon my ability to use my hands, eyes, and ears to understand patients, simply by acting as an astute observer of the skilled medical faculty.
The Vietnamese Family Unit

BY LYNN SIPSEY ’18
Cho Ray Hospital, Ho Chi Minh City, Vietnam | December 1, 2015

Since returning from Vietnam, I have been unable to see U.S. hospitals in the same way. The halls here are clear, there are rarely more than two people to any room, no one is refused standard care based on their income, and visitors only populate the hospital during certain hours. While there is a noted difference in care, it is only a factor of resources and the system in which physicians are operating. What Vietnam’s healthcare system lacks in resources, it makes up for in ingenuity, resourcefulness, and the cultural importance of family.

In Vietnam, the family is truly a unit, both inside and outside the hospital. I have seen family members function as an IV pole, a fan, a ventilator, and perform all the duties (and more) of a LNA. Family members serve as a strong patient advocate, something which is desperately needed in the crowded and busy hospital.

One of the interns I spent much of my time with in the pulmonary unit left work early to take care of his mother who had woken up that morning with common cold symptoms. Her tonsils were inflamed, he reported, and he wanted to go home and collect a sample to run tests on. I was pleasantly surprised and told him that he was an extremely caring son. He, in turn, was surprised by my response, telling me that it was very common in Vietnam. “I am the doctor of my family and I must take care of them, so when they are sick, I am there.” In the United States, I explained, everyone usually takes care of themselves, and it would be frowned upon if I called out of work with a mild illness, let alone someone else’s. He looked at me in shock.

“...One of the things I spent much of my time with in the pulmonary unit...”

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As the patient’s breathing became labored, the respiratory therapist came to the bedside and suctioned out the airway. As he worked, I noticed the tubing was filled with blood. I knew then that this patient was going to die. The death I was watching was not that of a quick trauma, but one of slow agony. It was a difficult death to witness.

I was excited to work in a hospital in Zimbabwe as part of a medical team. I knew the conditions would be different, but I was unprepared for the severe ailments affecting the patient population at Parirenyatwa Hospital (Pari). Reality set in quickly as I saw a young HIV-positive stroke patient seizing in the hospital bed. The patient began seizing during morning rounds and the diazepam we gave did not stop the convulsions. No other intervention was available, so the seizures continued.

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...This new encounter with death reinforced my commitment to serving others. At the end of life, patients rely on physicians to relieve suffering and provide guidance for the social and spiritual issues at hand. The training we received at Pari went beyond the mere science of pathophysiology and treatment protocols; it provided us with insight into the very human experience of working with patients during their most precious moments. Through them, we learned something of the essence of mortality and grappled with the very real burden such an intimate experience with death can have on a person.

What Women Want During Labor: Cultural Competency in Uganda

BY JANEL MASTIK ’17
Mulago Hospital, Kampala, Uganda | June 10, 2016

Conversations regarding women’s global health rightly focus on reducing maternal mortality, family planning, and the provision of effective prenatal care. However, I find that these conversations are sometimes problematized by the notion that more developed countries think they know what is best for developing countries. This sort of medical elitism is dangerous and underlies the notion that global health is about the exportation of westernized values — namely and problematically — democracy and capitalism. This is unfortunate given that the discipline of global health was conceived within the ambitious idealism and self-determination spurred in the era of decolonization in the 1970s.

The practice of global health is not about the imposition of one’s cultural values on another’s as some sort of ideological imperialism. It is about keeping patients and communities healthy and safe, and recognizing that health is a right, not a luxury.

Global health experiences are opportunities for learning, and it is important to remember that the exchange of knowledge and information ought to be bidirectional. Developed countries can learn just as much from what works in the developing world.
University Distinguished Professor Ralph Budd, M.D., fancies himself a late bloomer. He’s almost apologetic for not having considered studying medicine till he was well into his junior year of college, and for not settling on a specialty until the final rotation of his clinical year of medical school. In his research, he thinks he’s sometimes a little slower than he might be.

“It’s my whole career, backing into everything,” says Budd. Whether or not that’s an accurate description, he makes an effort to recognize and nurture those who, like him, need time and encouragement. Indeed, this much-lauded physician and scientist has made a science of helping others to find their way.

“He’s skilled at mentoring the whole spectrum of learner-faculty member-student,” says Beth Kirkpatrick, M.D., professor of medicine in the Division of Infectious Disease. “He can mentor the basic scientist, the translational scientist, the physician, the basic researcher. He knows the critical thinking skills that develop folks into independent scientists. That’s one of his real legacies in Vermont: how many people, and the broad spectrum of research strength they’ve had.”

Budd was the force behind the establishment of the Division of Immunobiology in the Department of Medicine. He is also the founder and director of the Vermont Center for Immunology and Infectious Diseases (VCIID), a multi-department partnership that brings together work in immunobiology and infectious diseases, with faculty from the Departments of Medicine, Microbiology and Molecular Genetics, Obstetrics and Gynecology, Animal Science, Surgery, and Pathology, as well as students from the Cellular, Molecular, and Biomedical Sciences graduate program. In ten years, the VCIID has grown to include 26 faculty members who have published more than 400 articles and garnered more than $92 million in grant support. It is supported by a twice-renewed National Institutes of Health (NIH)-sponsored Centers of Biomedical Research Excellence (COBRE) grant.

In May of 2016, Budd, the only member of the Association of American Physicians at UVM, received University Distinguished Professor status. Last November he was named Research Laureate of the Larner College of Medicine at the inaugural Dean’s Excellence in Research Awards.

“He has done an enormous service within the College of Medicine in terms of building up the immunobiology program and then reaching out to and integrating the immunobiology research with the microbiology research going on around campus,” says Gary Ward, Ph.D., professor of microbiology and molecular genetics and co-Principal Investigator with Budd on the COBRE grant. The grant has supported the recruitment and development of a number of junior assistants.
faculty, including Kirkpatrick, who went on to start the University’s Vaccine Testing Center and serves as its director; Christopher Huston, M.D., whose work on treatment of intestinal parasites caught the eye — and the funding — of the Bill & Melinda Gates Foundation; and Aimee Shen, Ph.D., whose work led to her being named a recipient of one of only 102 Presidential Early Career Awards for Scientists and Engineers as well as a prestigious Pew Scholar Award.

Budd has also made a point of encouraging undergraduates, including Katie Bashant, a former Goldwater Scholar, who graduated from UVM in 2016 and is now an NIH Cambridge Scholar using real-time deformability cytometry to characterize neutrophils within inflammatory disease states. She spent close to four years as an undergrad in Budd’s lab, where she contributed to research on how necroptotic dendritic cells activate gamma delta T cells, and says it was his genuine support of and interest in her work that gave her the confidence to tackle the challenging research she’s now engaged in — work that many people don’t get to until they are well into their doctoral program.

“Even though I was just an undergraduate student, I saw Dr. Budd every week when I was there,” says Bashant. “He’s not one of those professors who’s in his office and you don’t see them unless you go seek them out. He actually comes into the lab and says, ‘Hey, how are things going? Do you have some data to show me? Do you have any concerns?’”

Bashant is an example of how Budd nurtures independent learning, but at the same time, says Shen, now assistant professor of molecular biology and microbiology at Tufts, he has long “helped to initiate a lot of collaborations. Now that I’m in academia and trying to manage people, I appreciate how talented Ralph is at taking on these leadership roles and really helping to direct people. He’s selfless in it and he’s very, very good at it. He’s always thinking about how to stimulate research and how to get people to work together.”

It’s an approach that begins with mentoring, for everyone from students to postdocs to junior faculty — with the latter having two or three senior faculty mentors each to help them learn grant writing, how to run a lab, and the finer points of publication. Thursdays mean research-in-progress meetings, and junior faculty members in particular are encouraged to present their work.

“We tear it apart,” Budd says of the process, which is informally known by participants as a COBRoscopy. “We’re rigorous because if we’re not, they’re going to get it when their work is put before an NIH study section. As a result, our success rate is better than most medical schools.”

Ralph Budd, M.D., works in one of his two laboratory spaces in the Given Building.
Ralph Budd, M.D.

University of Vermont
2006–PRESENT Director, Vaccine Center
for Immunology and Infectious Diseases (VCID), The University of Vermont
1997–PRESENT Professor of Medicine, Department of Medicine, Larner College of Medicine
1995–PRESENT Associate Chair of Research, Department of Medicine, The University of Vermont College of Medicine
1995–PRESENT Director, Immunobiology Program, Department of Medicine, The University of Vermont College of Medicine
1992–1995 Associate Professor of Medicine, Department of Medicine, The University of Vermont College of Medicine
1989–1992 Assistant Professor of Medicine, Department of Medicine, University of Vermont College of Medicine
1988–1989 Scientist, Division of Molecular Immunology, Genentech, Inc., South San Francisco, California
1986–1988 Assistant Professor of Medicine, University of Vermont College of Medicine
1983–1986 Postdoctoral Fellow, Division of Molecular Immunology, University of California, San Francisco
1982–1983 Research Fellow, University of Geneva, Geneva, Switzerland
1980–1982 Student, University of Geneva, Geneva, Switzerland

Education & Training
1972–1973 M.D., Cornell University Medical College, New York, New York

Selected Honors
2016 Research Laureate, Larner College of Medicine
2015 Joseph Collins Foundation Research Award
2015–PRESENT Member, Association of American Physicians
2015 University Distinguished Professor of Medicine, Microbiology & Molecular Genetics
2013 University of Vermont College of Medicine: Excellence in Research Awards
2012 Larner College of Medicine Research Laureate
2011–PRESENT Member, American Society for Clinical Investigation
2009–2010 University Scholar, University of Vermont
2009–1999 Francis International Fellow, University of Rochester, Rochester, New York
1995–1994 Pew Scholars Program Award in the Biomedical Sciences
1988–1992 NIH National Research Service Award in Immunology
1983–1984 Arthur Foundation Postdoctoral Fellow Award
1978–1979 Joseph Collie Foundation Scholar, Cornell Medical College

2011–PRESENT Membrane, Association of American Physicians
2016 University Distinguished Professor of Medicine, Microbiology & Molecular Genetics
2013 Research Laureate, Larner College of Medicine: Excellence in Research Awards

“AS I TELL STUDENTS: ‘NEVER COME IN MY OFFICE AND SAY THE EXPERIMENT DIDN’T WORK— USUALLY IT DID, AND IT’S TRYING TO TELL YOU SOMETHING YOU DIDN’T EXPECT.’”

The reason we missed it is because it’s very subtle and slow,” he says, likening the lymphocytes to an engine in a firehouse, perpetually running just in case the alarm goes off. Approximately 3 to 5 percent of the lymphocytes in a human body are turned over every day, which doesn’t sound like much until you take into consideration what that looks like after a month—or six—of the body not ridding itself of them. Through microarrays, they found upregulation of a lot of cytotoxic molecules, which in turn could cause significant damage if they were so abundant that they invaded the wrong tissues. Then, using flow cytometry, they moved the mouse model to humans and found the same upregulation. That suggests “this process of homeostatic proliferation is going on in all of us, but when it gets accelerated, as possibly in lupus, it may well contribute to the inflammation we see here,” says Budd. Those studies are ongoing.

“I was raised with nothing but two older brothers,” Budd says. “My parents had me when they were 40. I never thought that I would work with a group of people but that’s the way it worked out.” What appealed to him was that by working with a group of people, he could make a connection to various cell types. It was also where the groundwork for his focus on lupus was laid.

“Transformative...the one period of his life Budd lived outside the United States (“New country, new language, new baby, new laboratory—piece of cake,” heLaughed). It turned out to be the most transformative, the one period of his life Budd would live over, if it was given the opportunity. It’s also where the groundwork for his focus on collaboration was laid.

“There’s a moment when your life is transformed,” Budd says. “You have to have a context, a trigger. Otherwise you don’t have a pathway to think laterally.”

“The reason we missed it is because it’s very subtle and slow,” he says, likening the lymphocytes to an engine in a firehouse, perpetually running just in case the alarm goes off. Approximately 3 to 5 percent of the lymphocytes in a human body are turned over every day, which doesn’t sound like much until you take into consideration what that looks like after a month—or six—of the body not ridding itself of them. Through microarrays, they found upregulation of a lot of cytotoxic molecules, which in turn could cause significant damage if they were so abundant that they invaded the wrong tissues. Then, using flow cytometry, they moved the mouse model to humans and found the same upregulation. That suggests “this process of homeostatic proliferation is going on in all of us, but when it gets accelerated, as possibly in lupus, it may well contribute to the inflammation we see here,” says Budd. Those studies are ongoing.

“They also looked at how making lymphocytes sensitive to the death signal, and through a now famous “failed” experiment (“As I tell students: ‘never come in my office and say the experiment didn’t work—usually it did, and it’s trying to tell you something you didn’t expect.’”), they determined that by simultaneously stimulating growth and giving a death receptor signal, the cell not only did not die, it actually grew faster. The graduate student went on to show that one of the molecules in the death signaling pathway was also required for cell growth. That finding was not initially well received in the field, but was subsequently confirmed by several other labs.

More recently, Budd contributed to a study that appeared in Science Signaling in which he and his co-authors (who included Assistant Professors of Pathology and Laboratory Medicine Ivona Buskiewicz, Ph.D. and Andreas Koeng, Ph.D.) examined a pathway through which the immune system detects foreign viruses. They observed that in lupus patients this pathway is activated in the absence of viral infection, and this is likely driven by oxidative stress in cells. They further found that an antioxidant that specifically targets mitochondria may serve a therapeutic effect in people with lupus, potentially significant news, given that exactly one new drug to treat the disease has been approved in the last half century.

Despite these findings, of late, Budd has had to maintain a near-exclusive focus on the V CID and his students and postdocs and junior faculty, which steadily imposes on the amount of time he can spend on his own research. But he has no regrets.

“Are you going to go for your own career your whole life or are you going, at some point, to devote a little bit of your time to help the junior folks? And I just decided it’s the right thing to do, to get them going,” he says, adding that he is more than okay with fewer personal grants and a smaller lab. In life outside the lab Budd indulges in his love of chamber music. He is a former board member of the UVM Lane Series, and a pipe organist (he first studied it at college as a break from science, though until he convinces Lenore that there’s room in their house for an instrument, he’s making do with a piano).

The father of two and grandfather of one, Budd wouldn’t mind a little more down time. But not just yet. He’s keeping a window open for research and hoping that the antioxidant-related findings will lead to an antidepressant therapy for lupus.

“It would be fun, after all the years of research, to do one thing that really impacts human health,” says Budd. “So few people get to do that.”
“WHO WE HAVE BROUGHT WITH US” ARE THOSE WHO HAVE INFLUENCED US, THOSE WHO HAVE TAUGHT US, THOSE WHO HAVE SHOWN US THE WAY.

I once heard a story about a young man who knocked on a monastery door. The monk dressed in orange, opened the gate. “I have come to learn,” said the young man. “Can I learn with you?” The monk in orange looked at the young man. “Who have you brought with you?” he asked. The young man looked behind him. “No, none,” he answered. But the young man learns from his encounter with the monk that no one reaches any important goal in life all by themselves.

“We who have brought with us” are those who have influenced us, those who have taught us, those who have shown us the way. All of our parts of my life as a physician — the caring, the sensitivity, the medicine, the quest to learn, to heal, to come, all came from my years as a medical student at UVM. That is “who” I brought with me. It is “who” I have kept with me. Through my years of practice, my time with the Lakota people, the medical missions I served in Peru and in the jungles of Ecuador. Over the years I have carried the same wondrous to all of these shared feelings as a call to respond to the moment and to continue to teach the heart, “May your teaching be with us.”

On Match Day, March 17, 2017, our students at the Larner College of Medicine began the next stage of their journey as physicians. They take with them the same heart, the same sensitivity, the same ability to listen and respond that we have all found at our alma mater. Although, over time, the educational content may be different, the qualities of the practice of patient care are the same. This is the constancy of the College of Medicine through all of our years. I am sure most of us recall our own Match Day: That mixed feeling of leaving and moving on has not changed. I hope you would consider all of these shared feelings as a call to respond to the College of Medicine: a call to keep the College of Medicine’s medical education up to the moment and to continue to teach the heart, “May your teaching be with us.”

If you have news to share, please contact your class agent or the Development & Alumni Relations office at medalumni.relations@uvm.edu or (802) 656-4014. If your email address has changed, please send it to medalumni.relations@uvm.edu.
of research and development, of Aegerion Pharmaceuticals, Inc., a biopharmaceutical company that develops innovative therapies for patients with debilitating rare diseases. John has nearly 20 years of global experience in drug discovery and development. Aegerion merged with a Canadian company later that month to become Novartis Therapeutics, Inc.

Stephen Russell Payne has published a new book, Two That Bind Us, a collection of Vermont-themed short stories. It is available via Amazon.com.

Brick Campbell wrote in to report that “an route to Bar Harbor, Maine, we met Jeff Darrow and his lovely wife, Ellen, for lunch in Bar Harbor. We enjoyed outdoor activities with his wife and playing with his grandchildren, as well as fitness and amateur natural bodybuilding.

Dennis Klein has been named state medical examiner for the state of Iowa. He has academic appointments with Des Moines University College of Osteopathic Medicine and the University of Iowa’s College of Medicine.

Maureen Phillips was interviewed for an article in Ob.Gyn News, titled “Women Reach for the Top in Ob.Gyn,” published May 31, 2016. She is chair of obstetrics and gynecology and assistant dean at the Women Albert Medical School of Brown University.

Michael Pollack is joined the University of Illinois College of Medicine Rockford Family Medicine Residency Program. He is responsible for the clinical teaching in the family health center, inpatient family medicine service, and surgery rotations.

Diane Smith joined the Internal Medicine practice at Southwestern Vermont Medical Center in Bennington, Vt. With this appointment, she also joined the Dartmouth-Hitchcock Putnam Medical Group.


Sederick Munie, an attending physician and director of global health in Medicine at the University of Arizona, has been a volunteer clinical faculty member at the University of Vermont. He died in 2012 at age 95. But where is this unmarked photo from the UVM archives — with his face covered, Chris Bigelow, and Mike Cavalli, Karen (Kari) Dittrich, John Berreen, Christine Lipman, and Michelle Lapp, M.D.’s, an assistant dean at the Warren Albert College of Medicine.

Maureen Phipps is co-author of a paper published in the August 2016 issue of Polychydron titled “Reactivity of electrophilic Cp*Ru(NO) complex toward alcohols.”

Melissa Mendez writes: “Class of 2015 is throwing up internet years! I’m sure I speak for many of us when I say UVM prepared us well!”

Ph.D.s

Historically Black University of Arkansas at Pine Bluff received $245,000 grant from the National Science Foundation to fund improvements to the university’s Immersive 3-D Visualization, Teaching, Research, and Outreach Laboratory. The grant, under the direction of Sederick C. Rice, Ph.D., is co-authored by an assistant professor of pathology and director of the Clinical Pathology Laboratory at the Moys Clinic.

Gabrielle Jacquot has been named Medical director of Child Family Health International, a non-profit organization providing more than 30 global health education programs in 10 countries. Jacquot, an attending physician and director of global health at emergency medicine at Boston Medical Center (BMC), and assistant professor of emergency medicine and assistant director of global health programs at Boston University School of Medicine, will assist with pre-departure training and research as well as curriculum development.

2010s

Pyush Gupta was named Clinical Director of CareMore Health System in San Francisco, California. Previously, he had served as a patient safety and quality improvement fellow and internal medicine attending hospitalist at Kaiser Permanente in Northern California.

Semaret Mane is co-author of a paper published in the August 2016 issue of Polychydron titled “Reactivity of electrophilic Cp*Ru(NO) complex toward alcohols.”

No Kids’ Stuff

We know one person who appears in this unmarked photo from the UVM archives — R. James McKee, M.D., featured in the student background. Dr. McKee was the first full-time pediatric faculty member when he arrived in Burlington in 1959. He was professor and chair of the Department of Pediatrics for 33 years. He died in 2012 at age 96. But where is this meeting taking place, and who are the students or residents in the room?

If you have a clue, send your information to erin.post@uvm.edu and we will include it in the next issue of Vermont Medicine.
The MAA Awards for 2017 are presented every year at the Celebration of Achievements Ceremony. Full biographies of the awardees can be found at www.med.uvm.edu/alumni

A. BRADLEY SOULE AWARD: Presented to an alumna whose loyalty and dedication to the College of Medicine must emulate those qualities as found in its first recipient, A. Bradley Soule, M.D.

DISTINGUISHED ACADEMIC ACHIEVEMENT AWARD: Presented to alumni in recognition of outstanding scientific or academic achievement.

SERVICE TO MEDICINE AND COMMUNITY AWARD: Presented to alumni who have maintained a high standard of medical service and who have achieved an outstanding record of community service or assumed other significant responsibilities not directly related to medical practice.

EARLY ACHIEVEMENT AWARD: Presented to alumni who have graduated within the past 15 years in recognition of their outstanding community or College service and/or scientific or academic achievement.

ROBERT LARNER, M.D. ’42 STUDENT AWARD: Presented to a current student(s) for his or her outstanding leadership and loyalty to the College and one who embodies Dr. Larner’s dedication to not only supporting his medical alma mater, but to inspiring others to do so as well.

2017

Medical Alumni Association Awards

A. BRADLEY SOULE AWARD

James C. Hebert, M.D. ’77
Surgeon, University of Vermont Medical Center. Albert G. Mackay, M.D. ’32 and H. Gordon Page, M.D. ’45 Professor of Surgery, University of Vermont Larner College of Medicine.

Dr. Hebert arrived in Burlington as a freshman medical student in 1973 and has spent his residency and entire career at what is now the Larner College of Medicine, where he has supported the academic, teaching, and clinical mission in many ways. Encouraged by his friend and mentor, Richard Gamelli, M.D. ’74, he stayed for a residency in surgery and was subsequently hired as an assistant professor of surgery in 1982. He established a laboratory based on work he had done as a surgery senior major at UVM and was able to secure NIH funding as a new investigator. A true general surgeon, Dr. Hebert was described by Dr. David Pilcher in his book Catamount: The University of Vermont Medical Center as a “jack-of-all-trades and master of many. He never refused an assignment.”

Dr. Hebert maintains an active surgical practice and has been the primary pancreatic surgeon for the past two decades. In 1983, he was asked to represent the department at a newly formed organization, the Association for Surgical Education, where he developed a passion for medical education. In 1997 he was appointed by Dr. Premner to chair the Curriculum Task Force which developed the principles upon which the current Vermont Integrated Curriculum was built. Dr. Hebert has served on many committees within the College including the Admissions and Instructional Improvement Committee and has had key leadership positions at the College including Division Chair for General Surgery, Vice Chair for Education in the Department of Surgery, Program Director for the Surgery Residency, and Associate Dean for Graduate Medical Education and Designated Institutional Official at Fletcher Health Care. Dr. Hebert was promoted to Professor in 1994 and in 2005 became the Albert G. Mackay, M.D. ’32 and H. Gordon Page, M.D. ’45 Professor of Surgery.

Dr. Hebert is a past president of the Association for Surgical Education and the New England Surgical Society. He is currently the immediate past president of the Vermont Medical Society and remains active on the UVM executive council. He has been an active member of the Medical Alumni Association as Class Agent and as a member of the Medical Alumni Executive Committee (MAEC) serving as president from 2010 to 2012. He also serves on the UVM Foundation Leadership Council. Dr. Hebert received the Distinguished Academic Achievement Award awarded by the MAEC in 2002.

DISTINGUISHED ACADEMIC ACHIEVEMENT AWARD

Michael L. Cunningham, M.D. ’87, Ph.D.
Professor of Pediatrics and Chief of the Division of Genomic Medicine at the University of Washington School of Medicine and the Jean Penny Chair of Cardiovascular Medicine and Medical Director of the Children’s Cardiovascular Center at Seattle Children’s Hospital.

Donald P. Goldsmith, M.D. ’67
Director, Section of Rheumatology, St. Christopher’s Hospital for Children, Philadelphia; Professor of Pediatrics, Drexel University College of Medicine.

Davidson H. Hamer, M.D. ’57
Professor of Global Health and Medicine, Boston University Schools of Public Health and Medicine; Adjunct Professor of Nutrition, Tufts University Friedman School of Nutrition Science and Policy.

SERVICE TO MEDICINE & COMMUNITY AWARD

Dara Anne Mills, M.D. ’87 M.P.H.
Vice President for Clinical Affairs and Interim Vice President for Research, University of New England (UNE), Portland, Maine, and Director of UNE Center for Excellence in Health Innovation.

William A. O’Rourke, Jr., M.D. ’57
Retired, Internal Medicine and Infectious Disease physician, Rutland Regional Medical Center and Physician, Rutland Free Clinic.

Kerry D. Solomon, M.D. ’87
Co-Founder, Operation Sight; Private practice ophthalmologist; Former Chief of Storm Eye Institute at the Medical University of South Carolina, President of the American Society of Cataract and Refractive Surgeons.

2018 Nominations

Do you know a class member deserving of recognition? Send in your nominations for the 2018 awards at: www.med.uvm.edu/alumni

2018

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HALL A | MAA AWARDS

KERRY D. SOLOMON, M.D. ’87

RUTLAND REGIONAL MEDICAL CENTER

ROBERT LARNER, M.D. ’42 STUDENT AWARD

Eric T. Schmidt
University of Vermont Larner College of Medicine, Class of 1988

Mitchell Hon-Bing Tsai, M.D. ’02
Anesthesiologist, Department of Anesthesiology, UVM Medical Center; Associate Professor, Larner College of Medicine

Kristen K. Pierce, M.D. ’02
Infectious Disease Specialist, Department of Medicine, UVM Medical Center; Associate Professor, Larner College of Medicine

Joseph H. Dayan, M.D. ’02
Plastic and Reconstructive Surgeon, Memorial Sloan Kettering Cancer Center, NYC; Director MSK Facial Reanimation Program; Assistant Professor of Plastic Surgery — MSKCC.

Dora Anne Mills, M.D. ’87 M.P.H.
Vice President for Clinical Affairs and Interim Vice President for Research, University of New England (UNE), Portland, Maine, and Director of UNE Center for Excellence in Health Innovation.

William A. O’Rourke, Jr., M.D. ’57
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HALL A | MAA AWARDS

KERRY D. SOLOMON, M.D. ’87

RUTLAND REGIONAL MEDICAL CENTER

ROBERT LARNER, M.D. ’42 STUDENT AWARD

Eric T. Schmidt
University of Vermont Larner College of Medicine, Class of 1988

Mitchell Hon-Bing Tsai, M.D. ’02
Anesthesiologist, Department of Anesthesiology, UVM Medical Center; Associate Professor, Larner College of Medicine

Kristen K. Pierce, M.D. ’02
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Robert Larner, M.D. • Dr. Larner died peacefully on April 20, 2017, at his home in Woodland Hills, California. He was 90 years old. He was born January 19, 1927, in Burlington, Vt., the seventh child of Russian immigrants Jacob and Lillian Likofsky, and his father, Rabbi. He attended the public schools of Burlington, and became a state champion debater in high school. Scholarship money he won through debating allowed him to become the first member of his immediate family to attend college. He entered the University of Vermont (UVM) in 1945, and received his M.D. from the UVM College of Medicine in 1949. After a brief internship, Dr. Larner joined the U.S. Army Medical Corps and served worldwide through World War II in the Pacific Theater, treating Lt. Commander. He served his duty in the U.S.S. Ochsen to Halifax, and as an officer in the South Pacific. He graduated from UVM in 1949 before entering the College of Medicine. He began his medical practice in UCLA, where he performed reconstructive surgery in the Tuba area. He then returned to the UCLA campus and continued to study family medicine and continued world-wide journeys to do medical missionary work. He retired in 2003.

Arthur D. Walk, M.D. • Dr. Walk died on November 17, 1991, in Rutland, Vermont. He grew up in Rutland, attended Rutland public schools, UVM, and the College of Medicine, and moved to New Hampshire as a first lieutenant in the U.S. Army Medical Corps. He practiced as a Rutland-based family physician, where he lived for the past eight years at The Gables at Eden Valley. He married and moved to Southern California where he practiced

Raymond L. Hackett, M.D. • Dr. Hackett died on November 17, 1992. Following medical school Dr. Hackett did a rotating internship at Colorado General Administration Medical Center until his retirement in 1971, where he served as Chairman of the Pathology Department of the Faculty of the Department of Pathology at Dalai Khal School of Medicine, and retired as a member of the College of Medicine Alumni Association. He was the Distinguished Academic Achievement Award.

Thomas J. LaPlaca, M.D. • Dr. LaPlaca died September 27, 1993, in the New York Medical Center from cancer. Born in 1948, he was raised in the United States and attended college in internal medicine in Rutland for five years then returned to Maine Medical Center for a two-year residency in anesthesiology, followed by a one-year fellowship in cardiac anesthesia and pain control. He practiced anesthesiology at the Rutland Regional Medical Center for 20 years before moving to the Berkshire Medical Center in Pittsfield, Massachusetts, for more than eight years.

Richard N. Fabrizius, M.D. • Dr. Fabrizius, 87, died March 27, 2016 at the Vermont Veterans Home. Shortly after receiving his medical degree he entered the U.S. Navy as a medical officer. He served in the Korean Conflict aboard the U.S.S. Robert E. Lee under Lt. Commander. He served his surgery internship at the Albany Medical Center, and then completed the orthopedic surgery residency at Ochsner Foundation Hospital in New Orleans and Monroe, Louisiana. He returned to Rutland and began private practice. He founded Orthopedic and Hand Surgery in Burlington, from which he retired in 1997. He enjoyed an active research career as an NIH-funded investigator.

Kenneth Shiu Kee Ho, M.D. • Dr. His death October 6, 1993. He was born in 1923 in Kowloon, Hong Kong, he was one of seven children. He graduated from the University of Washington, he became chair of the Department of Pathology, a position he held until 1990. He was the recipient of numerous awards, in the later years of his life, he worked extensively to study flora worldwide. His wife, Joy, and former students at UVM will assure his memory continues.

Dr. Gammon died unexpectedly on December 15, 2016. He was born on August 16, 1953, in Morristown, N.J. He grew up mostly in Morristown, before moving to Eau Claire Community High School with his family. He graduated from the University of Wisconsin-Madison, where he studied medicine, and then returned to UMass Medical School for a research fellowship in the medical school.

Dr. Gammon practiced medicine for 40 years in West Virginia and Minnesota, Vermont, North and South Carolina, Virginia, and Mexico.

John P. Mears, M.D. • Dr. Mears was expected on November 17, 2016 in an early morning car accident on his way to work. Dr. Mears was born in Saratoga, Vt., and attended the College of Medicine. After graduating in 1983, he went on to complete fellowship in internal medicine in the Maine General Medical Center and moved to Boston, Mass., where he practiced internal medicine in Rutland for five years then returned to Maine Medical Center for a two-year residency in anesthesiology, followed by a one-year fellowship in cardiac anesthesia and pain control. He practiced anesthesiology at the Rutland Regional Medical Center for 20 years before moving to the Berkshire Medical Center in Pittsfield, Massachusetts, for more than eight years.

John Craighead, M.D. • John Edward Craighead, M.D., a professor of medicine, physiologist, and director of the Department of Pathology at the College of Medicine and Surgery at the University of Vermont. He was the recipient of numerous scientific awards and lectureships. He was also an avid botanist and horticulturist who traveled extensively to study flora worldwide. Craighead, and former student at UVM, David Novis, M.D., 74, shared his memories of Dr. Craighead’s career and his key contributions in the field of organ transplantation. His pioneering clinical studies first identified cytomegavirus as a major infectious complication of organ transplantation. His research was recognized in the later years of his career on the diseases of the lungs resulting from occupational exposures to inorganic dusts, particularly asbestosis. Dr. Craighead’s early years were spent in the coal mining districts of southeastern Pennsylvania. He later moved to Utah where he obtained degrees in botany and medicine. After training on Washington University’s faculty, then to the National Institutes of Health, where he undertook studies in respiratory physiology, to moving to the Carolin Atlantic Research Unit, Public Health Service. In 1965, Dr. Craighead joined the staff of the Peter Bent Brigham Hospital in Boston to undertake training in pathology. He then joined the faculty of Harvard Medical School. In 1968, the American Board of Pathology. In 1970, he was born in Rockville, Vt. He graduated from the University of Vermont College of Medicine before entering the College of Medicine.

Peter E. Esteran, M.D. • Dr. Esteran, died April 18, 2016. He was born in Barre, Vt., on May 17, 1923, the youngest of five children. He graduated from the University of Vermont and began attending medical school before being called to serve in the U.S. Army. He served in General Patton’s Third Army and participated in the invasion of France. After receiving his internship award, he was granted a Junior Research Fellowship and completed his medical training, then returned to his family’s farm in Williston, Vt. He graduated from Burlington High School and then served in the Navy in World War II in the Pacific Theater, treating Lt. Commander. He served his duty in the U.S.S. Ochsen to Halifax, and as an officer in the South Pacific. He graduated from UVM in 1949 before entering the College of Medicine. He began his medical practice in UCLA, where he performed reconstructive surgery in the Tuba area. He then returned to the UCLA campus and continued to study family medicine and continued world-wide journeys to do medical missionary work. He retired in 2003.

Norman Snow, M.D. • Dr. Snow died February 9, 2017. He was born in Providence, R.I., and grew up in Burlington, Vt., and graduated from UVM before entering the College of Medicine. After surgical internship at the University of Virginia, he was drafted by the U.S. Army and was sent to Cleveland, where he served as a Medical Officer in the U.S. Corps. He completed his residency in general and cardiothoracic surgery at Case Western Reserve University, then began his career at the University of Vermont College of Medicine. He returned to Cleveland as associate professor and director of cardiothoracic surgery for Cleveland Metro Health Medical Center. He served as the inaugural medical director of Metro Health Life Flight, one of the largest helicopter EMS programs in the country, winning the Distinguished Physician Award from the Association of Air Medical Services.

David Park, M.D. • David Paul Park, M.D., 91, died September 20, 2016 at his home in Seattle, Wash. A renowned researcher and critical care medicine physician at Harborview Medical Center and Professor of Medicine at the University of Washington, he had his longest battle with cancer. Born in 1928 in Rochester, N.Y., he was raised on his family’s farm in Willston, Vt. He graduated from Burlington High School and then served in the Navy in World War II in the Pacific Theater, treating Lt. Commander. He served his duty in the U.S.S. Ochsen to Halifax, and as an officer in the South Pacific. He graduated from UVM in 1949 before entering the College of Medicine. He began his medical practice in UCLA, where he performed reconstructive surgery in the Tuba area. He then returned to the UCLA campus and continued to study family medicine and continued world-wide journeys to do medical missionary work. He retired in 2003.
February 2, 2017
4:23 P.M.

Medical student Rio Beardsley ’20 high-fives a patient as Karen Lucas, R.N., looks on during a nurse-shadowing session at The University of Vermont Medical Center.

PHOTOGRAPH BY ANDY DUBACK
Students Share Global Health Thoughts

A Record of Excellence

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