BROWN MEDICINE

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o r i ed ancer

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MM

B B B

LETTER

o ndations and og ess

The Division of Biology and Medicine is alive with pro ress and pro ise on do ens of fronts as we approach the idpoint of the 200 -0 acade ic cycle r research enterprise alone offers a ndant evidence of the o ent that is ener i in all aspects of o r wor

In this iss e, Medical School fac lty and al ni fi re pro inently in two articles of co pellin interest to investi ators, clinicians, and patients the infl ence of patient advocacy ro ps on the research environ ent and the rowin foc s on the health challen es that face cancer s rvivors indy Schwart M 9, an advisor to the ro nd rea in ational ancer S rvivor St dy, is a pioneer in the creation of hospital-ased s rvivorship clinics, incl din one at the as ro hildren s ospital Another al na, eslie B Gordon, Ph ScM 91 M 9 , t rned her research attention to the st dy of pro eria after her yo n son was dia nosed with the disease The advocacy ro p she fo nded with her h s and de onstrates the power of rass roots efforts to foc s research attention in iven areas thro h pilot st dies, conferences, wor shops, and yes, lo yin

The i portance of the afore en-tioned wor and the reco nition it receives are a oon to s all These critical research efforts enhance the visi ility and rep tation of acade ic edicine and of the ltifaceted io edical endeavor that is thrivin in o r idst

As I e in y last se ester as dean of the ivision of Biolo y and Medicine, I a pleased y the reco nition that we have laid a stron fo ndation pon which o r f t re will e ilt rther, I a honored to oin the ran s of estee ed e eriti leaders who re ain co itted and involved lon after leavin the ean s s ite

The st dents, al ni, fac lty, and staff who pro dly represent Alpert Medical School, the Pro ra in P lic ealth, and the Pro ra in Biolo y are the heart of this reat instit tion n their ehalf, I as for yo r contin ed s pport and involve ent as we ove ever onward and pward

Sincerely,

EJI

BROWN MEDICINE

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Brown Medicine is p lished three ti es a year y the ffice of Bio edical Advance ent

The use of war metaphors to describe any illness including cancer does such a disservice. What does that say about the people who didn t live It s not about courage.

—R an a ra MD

INSIDE

EATURES

COVER STOR

2 illion a ed

ancer s rvivors and their doctors learn how to deal with the disease s after-effects

2 o sel es and the s

Increasin ly, patient advocacy ro ps are playin a role in research f ndin

8 afe ee ing

ow does a doctor now when it s safe for a patient to o ho e

CO U NS

ON T E COVER

Min esi n

LETTER FROM THE EDITOR

hin ing t o d

As we finali e another iss e of *Brown Medicine*, I a str c even ore than s al y the any voices contained in its pa es everywhere there are people tal in , people listenin , people respondin There are the voices of patients and their fa ilies as they advocate efore law a ers and scientists, eco in decision- a ers in the allocation of research dollars There is the voice of an nder rad ate who s rvived cancer t who sh ns the very ter s rvivor There is the voice of a pediatrician descri in the sy iosis inherent in the doctor-patient relationship the patient cared for y the doctor, the doctor learnin fro the patient And there is the pra atic r ency in the voice of a edical st dent explainin why she favors action over words and has faith in the wisdo of the people she wants to help specially ratifyin are the voices of the doctors and soon-to- e doctors who are also reflective and ele ant writers, and who have contri ted to this iss e Writerly physicians are in no short s pply aro nd here, of co rse Ta e fre ent contri tor hristine Montross, whose oo we excerpted last fall, or resident col nist Micaela ayes, whose essay each iss e foc ses on a partic lar point of her learnin c rve, always descri ed with inti acy and clarity This winter two articles, Safe eepin and Shan hai Under ro nd, ca e in over the transo The for er is a psychiatrist s tho htf l exploration of the l rry o ndary etween his responsi ility to ens re his patient s well ein and his patient s freedo to decline his care Two other pieces, It s Si ple, Really and Ana and Mia Are ot o r riends, have already received the distinction of ein p lished the for er, written y a c rrent edical st dent, in the presti io s *o rn o e eric n Medic oci ion* I tr st yo will en oy hearin these voices, and I hope yo will tal ac

INBO

In her recent letter eepin Up Appearances, all 200 , r ean S ith expresses concern lest edical st dents need for self-expression, sex al or otherwise, present a arrier a ainst sensitive patient care She entions one of her own ay patients who said she d e dist r ed at the si ht of a physician with a lip piercin

I don t wish to ref te r S ith s point that in the exa roo , the patient st co e first And yet her letter s ests what dan ero s i plications this point, when p shed, can have There are still places in the Unites States where the si ht of a lac physician, or a fe ale physician, wo ld a e any patients nco forta le r S ith i ht ar e that facial ewelry, dreadloc s or tattoos are so ethin else, a rash declaration of a part of one s identity that o ht to re ain dis ised nderneath a la coat Many people who have s ffered that sin lar self-eras re nown as the closet wo ld disa ree with her

As an older edical st dent and a person fort nate eno h to have rown p in an envelope of tolerance, I feel little need to wave y sex al orientation a o t li e a fla

DEAR SIR OR ADA

Brown Medicine welco es readers letters, which ay e edited for len th or clarity

Brown Medicine
Box G-A413
Providence, RI 02912
rown edicine rown ed

There are patients for every kind of doctor but there are not yet doctors for every kind of patient.

and it s een ore than a decade since I re oved that pes y elly tton rin B t nli e e or r S ith, ost edical st - dents are twenty-two years old an a e when the freedo to assert and express one- self has very eanin f l conse ences on one s capacity for happiness and self-accept- ance later on And who can ar e that happy people a e etter doctors

c y for r S ith s traditional patient pop lation, ost ed st dents still appear freshly pressed y the coo ie c tter B t what of the patients who loo different, who feel different These patients s ally the least li ely to see edical care or to ret rn for follow- ps deserve physicians aro nd who they can feel co forta le et s e honest edicine, for all it s evolved, re ains a conservative and, for so e, repressive pro- fession when I told a yo n doctor friend that I was writin this letter, he told e, only half- o in ly, that I d etter hope no ortho- pedics residency directors ever read it

B t it is not st for their own sa e that ed st dents sho ld feel per itted to e the selves There are patients for every ind of doctor, t there are not yet doctors for every ind of patient

Rob Haskell MD'10

As the proud parent of one of Brown University s eer Med pro ra leaders, I was so very disappointed to read r ean S ith s opinion as expressed in In ox in the all 200 iss e As a clinical instr ctor in edicine at a pro ressive edical school, I wo ld have hoped that she co end these st dents for their ission rather than criti- ci e their appearance Rather than ein shoc ed y the ter eer Med, I wo ld appreciate her assistance in helpin the develop a c rric l to etter train physi- cians to care for the GBT pop lation, a co nity widely reco ni ed as edically

nderserved It was not that lon a o that any physician other than a white an wear- in a shirt and tie was, as she stated, off- p ttin to the avera e patient fort nately, appearances eca e secondary to alifi- cations

ason a rese o M 10 and Andrea ean M 10 sho ld e appla ded for oinin a lon list of c lt ral pioneers that ris ed ridic le and discri ination to advance a worthwhile ca se that has co e a lon way, t clearly has a lon way to o

Bernie Lambrese
Bri o

W

I was quite pleased to see that an article on the preparation of edical st dents for care of the elderly had landed in the all 200 iss e of *Brown Medicine* With o r r eonin elderly pop lation it is i perative that f t re doctors have a fir rasp on care at the end of life

est we for et, we are ortal, as are o r patients A in is not a disease process it is a process of life at its end et daily I enco nter physicians who cannot or will not sit with their patients and or their fa ilies and tal a o t care at the end of life At so e point it is not in the est interest of o r eld- erly patients to reco end the latest treat- ent or once a ain sh ffle aro nd their any edications As a profession we need to e a le to distin ish when ality of life is the priority rather than p rs in other f tile treat ents

A far ore practical approach wo ld e a re ired cler ship within hospice or a n rs- in facility I contin e to arvel that we are re ired to spend twelve wee s on an o yn rotation even tho h any of s will never o on to deliver a sin le a y et each and every one of s will have to rapple with the death of a patient in o r career, any ti es witho t the enefit of clinical preparation Until edical ed cation chooses to re edy this larin deficit in o r trainin we can expect o r f t re edical professionals to e woef lly nprepared for what s ahead

Leslie Foote MD'86
o ice Medic irec or
Mon ere i orni

The sidebar of that article addresses the critically important topic of palliative care and the all 2002 issue of *ro n Medicine* dedicated a feature story to it titled How We Die. Copies of the article are available on request.

THE BEAT

W A W A WA A A

INSIDE T E EAT

hat s the atte with ids oday

ew st dy will follow s b ects f om bi th to twenty one.

Big problems Steve B a notes, call for i science

ealth statistics reveal so e a or challen es for A erica s ids ver the past three decades, the o esity rate in the United States has ore than do led for preschool children a ed two to five and has ore than tripled for children a ed six to eleven hildren are et-

BI MONE

tin asth a at ore than twice the rate they were st twenty years a o Unintentional in ries re ain the i est iller of children a ed fo rteen and nder These health pro le s alon with a tis , schi ophrenia, and dia etes cost A erica 42 illion each year

nter the ational hildren s St dy, the lar est lon -ter st dy of children s health and develop ent ever cond cted Brown is now one of twenty-two new st dy centers ta in part in this land ar research pro ect, the ational Instit te of hild ealth and an evelop ent anno nced in cto er n ca p s, the news was delivered at a standin -roo -only press conference in Al nae all, where ean li Adashi and Rhode Island Governor onald arcieri hailed the five-year, 14 1 illion contract awarded to Brown and lead partner Wo en Infants ospital of Rhode Island

This is viewed nationally as a si nat re award, accordin to Adashi It really is one of those awards that yo cannot do witho t if yo want to e at the leadin ed e

And the st dy is, indeed, ro nd rea in ational hildren s St dy centers will enroll a representative sa ple of 100,000 infants and follow the fro efore irth to a e twenty-one In Rhode Island, investiators will enroll 1,000 children in Providence o nty The researchers, led y B a, a professor in the epart ent of o nity ealth and the director of the enter for Pop lation ealth and linical pide iolo y, will collect iolo ical sa ples fro children and their parents, as well as air, water, soil, and d st fro the child s environ ent Additional infor ation fro details of a child s diet to his or her access to par s will also e athered

The ai is to identify the root ca ses of diseases s ch as asth a and dia etes, as well as to ain a etter nderstandin of in ries, irth defects, and learnin , ehavioral, and

ealth **problems such as asthma** autism schi o hrenia and dia etes **cost 2 billion a year**.

Steve Buka

ental health disorders indin s will provide the asis for new prevention strate ies, health and safety idelines, and potential treat ents and c res for disease

We ve seen another a or initiative of this type with the an Geno e Pro ect, which so ht to se ence the entire h an eno e, B a said at the press conference This has led to a or scientific, edical, and econo ic advances The ational hildren s St dy see s to answer estions of a si ilar scale, t foc ses on how the environ ent i pacts on children s health, disease, and well ein It is a critical and val a le next step, with dra atic i plications for disease prevention and health pro otion

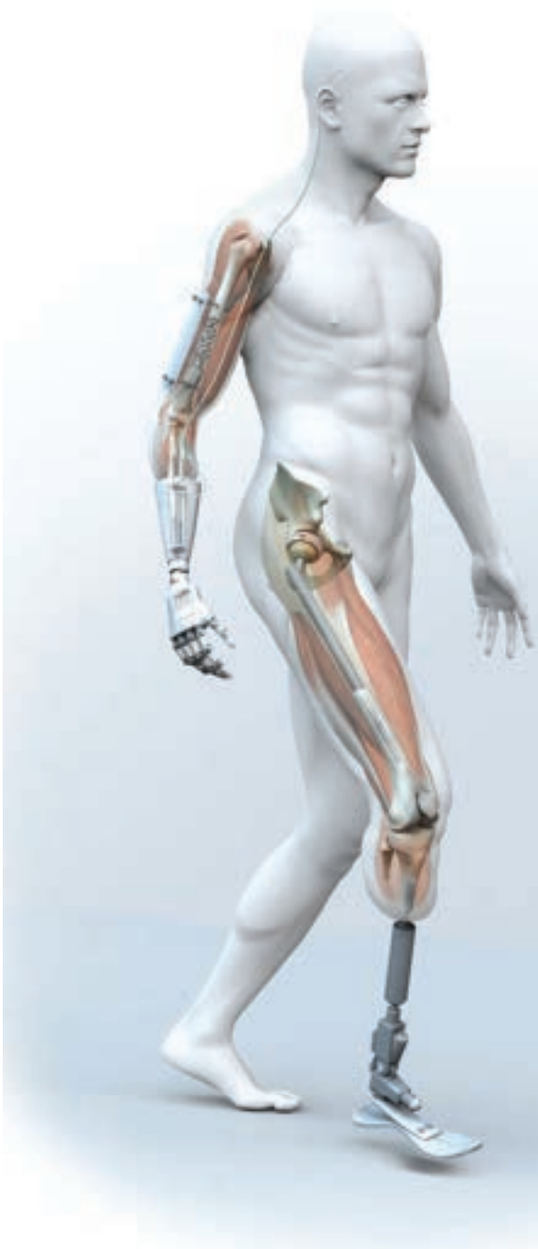
Ma reen Phipps, associate professor of o stetrics and ynecolo y and director of the Brown University Wo en Infants ospital ational enter of xcellence in Wo en s ealth, is co-principal investi ator on the pro ect

ro ehind the press conference podi- , Phipps said res lts fro the st dy will infl ence prenatal care in Rhode Island and the rest of the nation

We can nderstand how diet and wei ht ain d rin pre nancy i ht affect oth a other and her child s ris for o esity after irth, for exa ple, and nderstand how infections in the reprod ctive tract and in other parts of the ody ay increase the ris for havin a preter delivery, Phipps said These new insi hts will i prove the health of children, wo en, and fa ilies

arcieri s ear-to-ear rin ave away an e otional reaction I p here ea in , he said or two reasons ne is for Brown, y al a ater B t I also ea in for the state of Rhode Island — ***endy a ton***

> **indings will provide** the asis or ne revention strategies **health and safety guidelines** and otential **treatments and cures** or disease.



eet iohyb id an

o m e lo es melding of h mans and technology.

If you are in ood health and possess all yo r li s, yo i ht e s rprised to hear yo rself referred to as TAB, or Te porarily A le-Bodied As erry White said in his eynote speech at the ove er 29 for sponsored y the Brown A enter for Restorative and Re enerative Medicine RRM , the ter TAB re inds s of the vicissit des of fate and increases o r conscio sness of disa ility c lt re

The prevalence of those re irin edical attention for li loss is responsi le in part for this rowin conscio sness Tho sands of soldiers have s ffered tra atic a p tations, often at proxi al levels where restoration of f nction is diffic lt They oin ore than 1 illion A ericans c rrently livin with li loss a co on res lt of dia etes and circ latory disease Internationally, illions of ried land ines contin e to e a ca se of li loss for tho sands of civilians every year, any of the children

S MPOSI M

RRM s ission is to restore li f nction after in ry y pioneerin technolo ically advanced approaches in re enerative edicine, ne rotechnolo y, ro otic prosthetics, and reha ilitation This year s for nited nationally and internationally reco ni ed spea ers, incl din White, the co-fo nder and exec tive director of the and ine S rvivors etwor and co-recipient of the 199 o el Peace Pri e

ther spea ers incl ded RRM investigator and Brain Science Pro ra irector ohn ono h e, who disc ssed achievements in decodin ne ral activity to ena le individ als with otor loss to control rehailitative devices, incl din prosthetic li s MIT professor h err, who explained the principles involved in constr ctin the world s first powered io- i etic lower extre ity prosthesis see *Brown Medicine*, all 200 Willia Warren, chair of o nitive and in istic Sciences, who descri ed how virt al reality and otion trac in co ld e sed to assess li disa ility and treat ent and effrey Mor an of the epart ent of Molec lar Phar acolo y, Physiolo y, and Biotechnolo y, who explained how osseointe rated perc taneo s devices offer a novel ethod of attachin prosthetic li s directly to one

Biohybridity aims to transcend the limitations o iological tissue or **prosthetic materials alone**.

These advances have o vio s ilitary applications Ro an ayda, M , chief of orthopedic tra a at Broo e Ar y Medical enter, disc ssed therape tic challen es faced y soldiers in Ira and Af hanistan r Richard M Satava, special assistant in advanced s r ical technolo ies at the U S Ar y Medical Research and Material o and, pdated the a dience on c rrent and potential advances in ro otic edicine As RRM irector Roy Aaron noted, contin in research in iohy ridity co ld lti ately ena le s to envision sol tions that transcend the li itations of io- lo ical tiss e or prosthetic aterials alone

—Mar aret ase

OVER HEARD

Calling the lack of action a genocide Lewis said we are in a race against time to stop AIDS from breaking out of the circles in which it is currently contained.

enowned c i i nd or er ni ed ion o ici **STEPHEN LEWIS**
on c in ece er o r e den o re re e nd e o i e o eir ro i e o i in e nde ic in r n ric

Left to right Louise Ramm of the NIH Dean Eli Adashi overnor Donald Carcieri Dr. Chen Dr. Michael Ehrlich Rep. James Langevin Lifespan CEO eorge Vecchione Rep. Patrick Kennedy Sen. Jack Reed and Mayor David Cicilline

OINT E ORT

PARTNERSHIP

Last October o icials rom Bro n s med ical school and i es an oined la makers and elected o icials to cele rate a ive ear . million grant to esta lish the enter o Biomedical esearch cellence B or keletal ealth and e air at hode sland os ital and create a multidisci linar team o scientists ith the Medical chool. he grant ill ocus on cartilage and oint health disease mechanisms and re air strategies according to center director and rinci al investigator ian hen the Michael . hrlich M ro essor in rtho aedic esearch.

he aging o the a oom generation and soaring o esit rates mean e can e ect to see a shar increase in the num er o atients ith osteoarthritis and other oint diseases said hen hose multidisci linar team includes researchers rom ortho aedics emergenc medicine ediatrics medicine and ioengineering.

he s a em

t dent sta ts a og am to hel ee s hel ee s.

ST DENT

At age fifteen pro pted y the ol ine school shootin s and the threat of violence, s stance a se, s icide, low self-estee , and other ehavioral iss es faced y peers, essica Marrero o M 11 wrote a rant proposal that received 100,000 to start a co nity- ased pro ra ai ed at red cin school violence and s stance a se a on st dents in her Gainesville, , co nity What e er ed was Partners in Adolescent ifestyle S pport PA S , a school- and hospital-ased pro ra that provides peer s p-port and therape tic intervention to tro - led st dents and enhances leadership s ills for teens

Marrero recently represented PA S in receivin the 100,000 Sapphire Award fro the Bl e o ndation for a ealthy lorida, the philanthropic ar of Bl e ross Bl e Shield of lorida This is the first ti e a st dent-sponsored pro ra has won the award

— san e

blic ealth aste ed

o ng og am acc edited once again.

OOD NEWS

In October 200 Brown s Master of P lic ealth Pro ra received a seven-year reaccreditation y the o ncil on d cation for P lic ealth P

In the seven short years since its creation, in 2000, o r MP pro ra has rown fro one st dent to sixty, with a road array of co rse options, says Associate ean of Medicine for P lic ealth and P lic Policy Terrie ox Wetle r excellent st dents and the hi h ality of o r applicant pool are si ns of the pro ra s national rep tation

These are excitin ti es for p lic health ed cation at Brown, which now offers two five-year co ined de ree pro ra s an AB MP pro ra for nder rad ates, and an M MP pro ra for edical st dents

We received extre ely positive feed ac on the MP pro ra , says its director, Patric M ivier, Ph M 9 In less than a decade the MP at Brown has rown fro an idea to an esta lished, well-respected ed cational pro ra that is contri tin to the p - lic s health in Rhode Island and eyond

— et ndstrom

Bill Rakowski teaches a course in the MPH program.

to the iolence

o batte e inte ention og ams get to the oot of the oblem

Over the past twenty years awareness of inti ate partner violence IP has increased, in part d e to so e hi h profile and tra ic cases

ELEVATOR PITCH

Who can for et the so nds of icole Brown Si pson s 911 calls or i a es of her r ised face Society responded with andatory arrest laws for atterers and sentences that incl de participation in atterer intervention pro ra s These were a or steps forward, t how well are they wor in

ast s er Associate Professor of Psychiatry and an Behavior Gre ory St art, Ph , and collea es eff R Te ple, Ph , and Todd Moore, Ph , oth for er postdoctoral research fellows at Brown, s ested eans for i provin atterer intervention pro ra s in a o entary piece in the *o rn o e eric n Medic oci ion* After years of st dyin the i pact of s stance se and a se on fa ily violence, St art elieves one reason atterer intervention pro ra s are not ore s ccessf l is eca se they fail to ade ately address a a or contri tor to violence addictions

Brown Medicine as ed St art, who is director of fa ily violence research at B tler ospital, for his tho hts on why chan e is needed

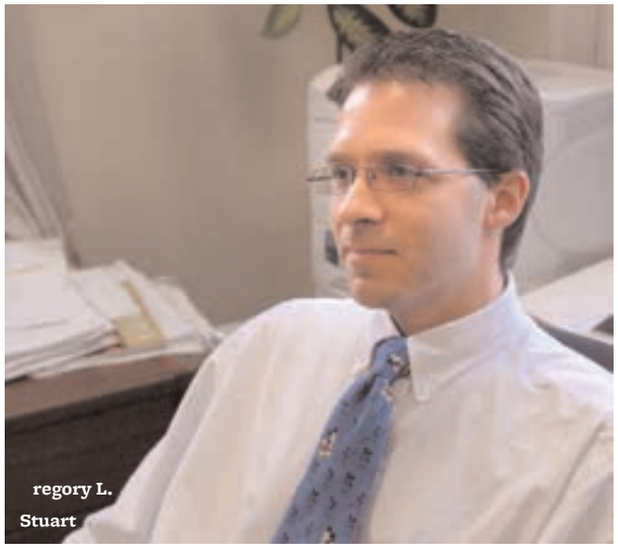
The Centers for Disease Control and Prevention says . million women are abused annually in the .S. How accurate is that statistic

I elieve that statistic dra atically nderesti ates the incidence of inti ate partner violence in the eneral pop lation A fair esti ate of prevalence is perhaps 20 percent of wo en and en have een victi i ed y an act of violence in the last year IP is a a or concern, even if it is not severe a ression, eca se violence has the potential to escalate I sho ld ention that psycholo ical a se, which is also detri ental to wo en s health, occ rs at an even ore alar in rate

> ver **two thirds of the men** in atterer intervention rograms **have alcohol or drug issues** and a out hal o the omen.

How do addictions and family violence interface

S stance a se ediates the relationship etween i p lsivity and psycholo ical a se, which in t rn predicts physical a se



regory L. Stuart

That said, there are plenty of people who perpetrate violence who have never to ched a drop of alcohol, and people who have s stance a se iss es who have never perpetrated any fa ily violence ven tho h there is an extre ely stron relationship etween certain s stances, partic larly alcohol, and violence perpetration and even victi i ation, I don t want to s est that alcohol se is an exc se or stification for violence The perpetrator is always responsi le for his or her actions B t we certainly now that so e s stances increase the ris Part of y research plan is to a e people aware of the connection

On what aspect of the problem does your research focus

We started y doin a st dy to see what happened to violence in ter s of fre ency, prevalence, and severity when one partner ca e to B tler ospital for s stance a se treat ent IP is overrepresented in s stance a sers of oth enders relative to the eneral pop lation r st dy showed that over ti e, there tends to e a decrease in violence after either partner ets treated for an addiction We also co pared fol s whose alcohol pro le relapsed to those who re itted People whose alcohol pro le s were in re ission had lower levels of perpetration and victi i ation than those who relapsed ot s rprisin , t an i portant findin eca se it shows that if there is physical violence oin on it i ht e a eliorated if the person o tains s stance a se treat ent

Do court ordered batterer intervention programs decrease violence

Batterers are typically co rt-referred to this intervention They are oin to these pro- ra s to avoid ein incarcerated So, they often ay lac the otivation to chan e If yo forced a s stance a ser, for instance, into treat ent when they have little otivation to stop, or their only otivation is a han - p with the police, it s do t- f l that they will a e a chan e With that said, so e people certainly do enefit considera ly fro atterer intervention pro- ra s owever, as hi hli hted in the *M* article, we elieve that there are so e thin s that the pro ra s can do to increase their effectiveness

And how many people in these programs have substance abuse issues

S stance se is extre ely co on a on en and wo en who are co rt-referred to atterer intervention pro ra s ver two-thirds of the en have alcohol or dr iss es and a o t half of the wo en Altho h atterer intervention pro ra s often dedicate one session to s stance is se, one of the potential reasons these pro ra s are not as efficacio s as they co ld e is that there s a lot of ntreated s stance se that we co ld address or any in these pro ra s, ore intensive addiction treat ent co ld e helpf l

What is the physician s role in stopping family violence

Inti ate partner violence is prevalent and it directly i pacts physical and ental health An i portant essa e for clinicians is that it is a sol tely happenin in their practices relatively fre ently st eca se a physician doesn t as a o t it doesn t ean it is not happenin Research has shown that wo en are not othered a o t ein screened for partner violence and are enerally forthco in when as ed a o t it I wo ld li e to see physicians directly as in a o t relationship a ression alon with the other ro tine screenin s that they cond ct and for the to have pa phlets availa le in their offices with local reso rce infor ation — ***ris am ra***

o in o i e e nte ene

og am hel s teens d i e safe .

Researchers at Rhode Island ospital s In ry Prevention enter have reported i pressive res lts fro a pro ra called Red cin o thf l an ero s rivin R , earnin the selves a 2 illion rant renewal fro the ational Institutes of ealth R is a co rt- andated, three-wee otivational intervention pro ra followed y twelve

VALIDATION onths of onitorin for teen traffic offenders In the state with the second-hi hest percenta e of alcohol-related traffic fatalities in the U S , o r pro ra has shown excellent pro ise in helpin local teens identify their ris y actions and a e s se ent chan es in their drivin ehavior, says Ted iren er , Ph , director of R and associate professor of psychiatry and h an ehavior research This new f ndin will help s refine what strate ies wor est, with the intent of R eco in a national odel to red ce ris y teen drivin —

STAT SHEET

DO T E NU ERS

. . med school en ollment on the ise.

According to the Association of A erican Medical olle es, the n er of st dents enterin edical school in Septe er 200 was the lar est in U S history This is ood news, iven the prediction that f t re de and for physicians will o tstrip s pply in the co in years The 200 applicant pool also had the hi hest Medical olle e Ad ission Test scores and c lative rade point avera es on record, as well as ore experience on avera e in pre edical activities than applicants of the past five years

Below are so e of the salient fi res

licants	. ercent over
irst ear enrollees	. ercent over
Black male a licants and is anic male a licants	. ercent
Black males acce ted and enrolled	. ercent
Medical schools hose irst ear class si e has increased more than ercent	o

Rob Trachtenberg left and Art razzano work to improve primary care in RI.

ee the ood o

ima y ca e initiati e gets the go ahead.

The Rhode Island Area ealth d cation enters etwor riA will e a le to contin e i provin pri ary care for the state s ost v lnera le residents, than s to a recent 3 2 illion **MORE MONE** rant fro the ealth Reso rce Service Ad inistration of the U S epart ent of ealth and an Services ed y Arth r A ra ano, associate dean of edicine for clinical fac lty and riA s director, the pro ra s ission is to foster acade ic, trainin , and co ni- ty colla orations that will i prove the ality, c lt ral sensitivity, and availa ility of health care services in every co nity in the state

RiA e an in 2004 with a three-year 2 illion rant to esta lish three co nity- ased offices in Rhode Island Since then, entral riA has developed R A T RI, which ives hi h school st dents hands-on experience in hospitals, pri ary care offices, and co nity health centers that serve diverse pop la- tions It also leads the Interdisciplinary rric l evelop ent Pro ect, which inte rates health professions c rric la across the state s acade ic health professions trainin pro ra s So thern riA wor s with the ewport o sin o ission to co at childhood asth a tri ers in the ho e, s ch as s o in and the existence of standin water and old it recently received two PA rants totalin 13 ,000 to assess and wor toward the a elioration of these health ha ards in ewport orthern riA s pports the co nity- ased trainin of pri ary care health professionals in edically nderserved areas, and as s ch, it is one of the lead ad in- istrators of the ational ealth Service orps S AR St dent xperiences and Rotations in o nity ealth Pro ra , which identifies and places st dents of all health disciplines in edically nderserved areas

> **The program s mission** is to oster colla orations that ill **improve health care services throughout the state.**

Accordin to Associate irector Ro ert Trachten er , as riA oves into its fo rth year, it will foc s on fine-t nin its any on oin initiatives, incl din the develop ent of a co prehensive eo-spatial appin of Rhode Island s pri ary care landscape —

HOSPITAL

eally ig ose s

og am s s ccess is meas ed in losses.

One birthday celebration that li ely did not incl de ca e and ice crea was that of The Miria ospital s Wei ht Mana e ent Pro ra , which last fall ar ed its twentieth anniversary o nded and directed y linical Assistant Professor of Medicine incent Pera, the pro ra has helped approxi ately 10,000 people over the years, with patients ro tinely achievin wei ht loss in the ran e of 100, 1 0, even 200 po nds With patients losin an avera e of at least fifty po nds apiece, Pera says, we re confident that in twenty years we ve lost 00,000 po nds

The ey, says Pera, is a coordinated approach that co ines wei ht loss, ehavior odification therapy, n trition, exercise, and ro p s pport in a c sto i ed pro ra tailored to individ al needs ed y specially trained psycholo ists, ro ps eet once a wee for one-ho r sessions in either twenty- or twenty-ei ht-wee pro ra s, where patients learn to identify tri ers that ca se overeatin , and to practice ehavioral strate- ies to ana e stress witho t eatin and handle everyday sit ations li e resta rants, social atherin s, and holidays Participants spend another ho r nder oin a wei h-in, lood press re chec , and edical oni- torin y a physician The wei ht loss re i- en typically involves one of three versions of a li id diet, tied to how ch an indi- vid al needs to lose The didactic co ponent of the pro ra covers wee ly topics of n tri- tion, edical factors, and lifestyle iss es, and an on-site y provides opport nities to wor with exercise physiolo ists

The s ccess of the pro ra also depends on its nderstandin of o esity as a chronic

or the ninth annual eremon o ommitment to Medicine hich took lace on cto er riends amil and acult illed the irst nitarian hurch to a laud the M lass o a ove as the received their hite coats. tudent s eaker il . essie M told the class Medicine is hierarchical. M short hite coat gave me a lace on the totem ole al eit at the ver ottom ut at least as on it.

MILESTONE

— *isa Ro ley*

disease that, li e dia etes, for instance, re ires life-lon treat ent osin wei ht is a ch easier proposition, Pera says, than s ccessf l lon -ter wei ht ainte-nance To aid in that, Pera s tea also offers a aster s pro ra , a year-lon nderta in for individ als who have co pleted the wei ht loss pro ra that offers on oin ro p s pport, with the foc s on relapse prevention, n trition, and exercise t with a ore self-directed approach

espite acco plish ents that n er in the tens of tho sands of people helped to half- illion po nds lost , what Pera is ost pro d of is his exceptional staff is tea , he says, has first-rate clinical s ills, and wor s hard and well to ether and with their ni e clientele esity is a diffic lt illness, Pera explains, eca se of its associat-ed iases and sti a is tea is extre ely caref l to create an environ ent where patients are co forta le and a place they loo forward to co in to each wee

— *R*

he team **creates a place** atients **look forward to coming to each week**.

ld ews

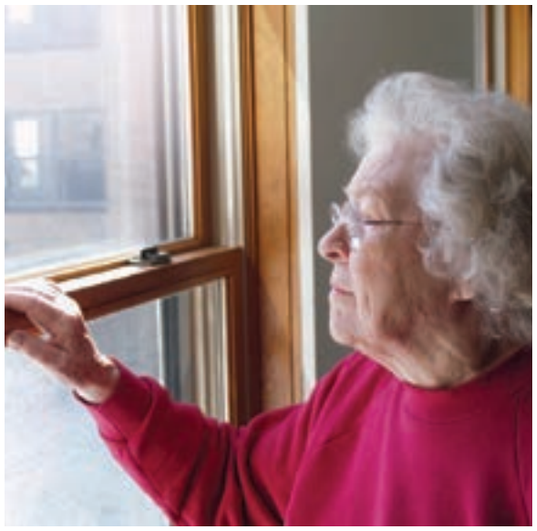
own ecei es million to st dy ca e fo elde s.

Last October the ational Instit te on A in awarded Brown a a or rant to create the first research data ase ai ed at i prov-in the nation s lon -ter care syste and the lives of the elderly who rely on that sys-te to eat, ta e edications, and carry o t other tas s of daily livin incent Mor, chair of the epart-ent of o nity ealth and a e er of the enter for Gerontolo y and ealth are Research, is principal investi ator on the five-year, 10 illion rant

RONTIER

Mor and his tea will co ine existin federal data on Medicare rei rse ent clai s, patient hospitali ation rates, and other data with new infor ation the tea will collect on the health stat s of residents, rei rse ent rates for lon -ter care services, the or ani ation of those services, and other topics fro a rando sa ple of 2, 00 n rsin ho es across the co ntry The oal is to trace a clear relationship a on state policies, local ar et forces, and the ality of lon -ter care The infor-ation can e sed to craft state and local idelines that pro ote hi h- ality, cost-effective, e ita le care for older A ericans

—



AR IE GIR EET GI OE

The Barbie doll and the microchip de uted in . Both ould go on to revolutioni e their res ective industries. Both ould make a e ri les in arol el ico s li e too.

el ico the ice o dmission s resident so t are s ecialist orks closel ith om uter and n ormation ervices to ensure students can manage the a lication and inancial aid rocesses online ith minimal s chic in ur . he is also res onsi le or testing u grades to make s stems run etter. ere in articular she e cels she s art o the team that received the niversit s cellence ard or nnovation.

el ico has al a s een a or ard thinker. hile some o her childhood la mates a andoned Bar ie el ico care ull reserved all o her dolls. oda she s an avid collector and o ns more than mint condition Bar ie dolls o ever era and edition.

got m irst doll in she sa s. remem er standing in ront o the ig glass dis la case at ears. M arents ould let me ick one doll and one out it. Bar ie retailed or ust . ack then these da s earl editions are orth thousands.

WHO KNEW el ico egan her collection a ter attending a doll convention i teen ears ago. loved the camaraderie among the collectors the sense o nostalgia she sa s. hough once a regular on the convention circuit toda el ico does most o her Bar ie u ing and selling and general ogling on eBa .

Bar ie isn t the onl industr icon living under el ico s roo . er hus and te hen collects . . oe action igures. e al a s sa s dragged him to all those doll sho s el ico e lains. e had to do *something*. o he got into the act. — ***moke Akinrola***

Carol Del Pico with some of her collection

TEENS IN PAIN

Intentionally cutting or burning oneself and other for s of non-s icidal self-in ry SSI are act ally ore prevalent a on hi h school st dents than once tho ht, accordin to a new st dy in the A st 200 iss e of *c o o ic Medicine* f 33 hi h school st dents s rveyed, nearly 4 percent reported intentionally in rin the selves in the past year on ltiple occasions f those, o percent en a ed in oderate severe for s of SSI, which ay e predictive of ore serio s o t- co es s ch ass icide The findin s are essentially a wa e- p call to ta e etter notice of these ehaviors in the co nity and learn how to help teens ana e stress witho t har in the - selves, says lead a thor li a eth loyd-Richardson, Ph , assistant professor of psychiatry and h an ehavior Understandin the specific otivations ehind an adolescent s ehavior allows for the develop ent of an individ al treat ent plan that co ld help prevent f t re episodes, she says

INK

PETRI IN D

Brown scientists have ta en the Petri dish to a new di ension literally In the Septe er iss e of *i e n ineerin* , Associate Professor of Medical Science effrey Mor an and Anthony apolitano, Ph candidate in io edical en ineerin , descri e their 3- Petri dish, an innovative desi n that allows cells to c l- t re into its of three-di ensional icrotiss e apolitano spent two years perfectin the desi n and received a 1 ,000 award fro the ational olle iate Inventors and Innovators Alliance to develop the patent-pendin technolo y Their Petri dish differs fro a traditional one in that it contains 20 tiny recesses or wells in the a arose elly When cells are added to the dish a o t one illion at a ti e ro hly 1,000 sin to the otto of each well and for a pile These piles allow cells to for the nat ral cell-to-cell connections re ired for tiss e develop ent

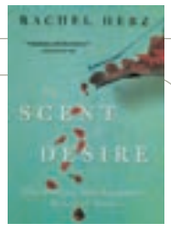
Accordin to Mor an, these icrotiss es can e sed to test new cancer co po nds and other dr s And they can e transplanted into the ody to re enerate tiss e, s ch as pancreatic cells for dia etics r 3- technolo y is fast, easy, and inexpensive

DON T ORR EAT APP

ood news for dieters overeatin at a holiday party or two won t affect lon -ter wei ht loss Accordin to a st dy p - lished in the cto er 200 iss e of *e i* , dieters who have the tendency to eat in response to external factors, s ch as festive cel- e rations, have fewer pro le s losin wei ht over ti e than those who tend to eat in response to internal e otions In contrast, e otional overeatin , or internal disinhi ition, was a stron and ore acc rate predictor of wei ht chan e than other psycholo ical iss es s ch as depression, in e eatin , and per-

OUND

ecent fac lty titles.



THE SCENT O DESIRE Discovering Our Enigmatic Sense of Smell

B c e er | WILLIAM MORROW, 2007 | $24.95

DISABILIT IN TWENTIETH CENT R ERMAN C LT RE

B ro oore | UNIVERSITY OF MICHIGAN PRESS, 2007 | $70.00

ceived stress ed y Assistant Professor of Psychiatry and an Behavior Research eather ie eier, of The Miria ospital s Wei ht ontrol ia etes Research enter, the researchers fo nd that the hi her the level of internal disinhi i-tion, the less wei ht an individ al lost over ti e

r res lts s est that we need to pay ore attention to eatin tri ered y e otions or tho hts, as they clearly play a si nificant role in wei ht loss, says ie eier

ARD TO STO AC

A recent study led y Associate Professor of Psychiatry and an Behavior Mar i er an and p lished in cto er in the *o rn o inic c i r* fo nd that pre-operative psychiatric eval ations can relia ly spot patients who are not ready for ariatric s r ery S r ery candidates are screened eca se they st e co itted to drastic, life-lon chan es in lifestyle In the st dy, al ost 20 percent of the oo candidates did not pass the initial eval ation any of the eca se of e otional eatin , in e eatin , or ncontrolled depression Those who did not pass were referred for treat ent In a f t re st dy, i er an plans to trac how any are lti ately cleared for s r ery

OVE OVER P OSP OR ATION

Scientists have long considered phosphorylation, an a ino acid- odifyin process in proteins, to e the a or player in si nal transd ction, the process where y cells receive and respond to che ical essa es ot so, says a tea of cell iolo ists led y ene hin, associate professor of s r ery research and a staff researcher at Rhode Island ospital In the cto er 4 iss e of e , hin and his tea identified yet another critical re ire ent for si nal transd ction acetylation, another che ical process that odifies a ino acids The researchers fo nd that acetyla-tion plays a central role in activatin interferon receptors

The discovery ar s a ilestone in the st dy of si nal trans-d ction Many diseases, s ch as dia etes, cancer, and heart dis-ease, occ r when si nal transd ction oes awry hin s findin s ay explain why so e dr s that tar et phosphorylation do not wor for everyone The wor provides an i portant new tar et for therapies for cancer and other diseases

C U T E IV TEST

Brown led researchers have found that teens are otivated differently than ad lts are when it co es to ettin tested for I The st dy, in the ece er iss e of the *o rn o do e cen e* , is the first to ta e a prospective loo at the factors associ-ated with I testin a on adolescents ead y Marina Tolo -Sha s, assistant professor of psychiatry and h an ehavior research , the tea fo nd that teens were ore li ely to see an I test if they had already een tested efore These findin s were a it s rprisin , since we tho ht teens wo ld e ore li ely to et an I test if they en a ed in ris y ehaviors or attended an I prevention wor shop, says senior a thor arry Brown of the Bradley as ro hildren s Research enter and a professor of psychiatry and h an ehavior The a thors s est that i ple entin testin thro ho t vario s nontraditional ado-lescent ven es, s ch as schools and co nity settin s e , Boys and Girls l s, M A co ld increase f t re testin there-y red cin f t re I trans ission a on yo th

DROSOP I A DO EN

Brown biologists have made a ma or contri tion to a ro nd-rea in eno e se encin pro ect sin le-handedly asse -lin the itochondrial A se ences of seven species of fr it fly The wor , which appeared in *re* in ove er, is part of the international rosophila 12 Geno es onsorti , a ro p of a o t1 o scientists who ca e to ether to se ence the eno es of twelve different species of *ro o i* avid Rand, a professor in the epart ent of colo y and vol tionary Biolo y, alon with postdoctoral research associate risti Montooth and la ora-tory technician awn A t, were the only scientists in the consor-ti to asse le itochondrial A, or t A, se ences

The potential i pact of their findin s is far-reachin Says Montooth, t A can teach s a o t eta olic perfor ance and how it can e disr pted thro h tation, ivin insi ht into possi le echanis s for itochondrial diseases and conditions s ch as dia etes, deafness, and nerve da a e that can res lt in vision loss or de entia ***and***

MOMENT M A A A A

NIG T TO RE E ER

ew ofesso shi hono s cance ionee .

Ad inistrators, fac lty, friends, and fa ily athered on cto er 30 to cele rate the dedication of the Pa l ala resi, M , Professorship in ncolo y Peter esen erry, M , director of he atolo y oncolo y at Rhode Island ospital and The Miria ospital and professor of edicine, is the ina ral inc ent

ean li Adashi presided over the cere onies, which honored ala resi s le acy as oth an early l inary at Brown s edical school and a rilliant researcher and clinician who contri ted to the develop ent of the first treat ents for cancer e eca e internationally renowned as a leader in the develop ent and testin of anti-cancer a ents and esta lished what was li ely the first edical school- ased division of edical oncolo y in the U S , at ale At Brown, he was chair of the epart ent of Medicine and started the interdisciplinary ancer enter, of which he served as director for twenty years e died in 2003

Boldly | BROWN |

In his c rrent role, Peter esen erry oversees the cancer pro ra at oth hospitals as well as within Brown s Medical School fellowship pro ra in he atolo y and oncolo y With ore than fo r decades of dedication to cancer treat ent and research, esen erry is nationally renowned for his research on ste cells, and has also aintained a foc s on entorin nior investi ators thro ho t his career e is the a thor of ore than 2 0 articles in peer-reviewed o rnals and other p lications and is the a thor of nearly 100 00 s or 00 chapters with a foc s on cancer, che otherapy, one arrow transplant, and ste cell research

ala resi s widow, elia, and his three children were in attendance is son, Peter A ala resi M , an associate professor of ne rolo y and director of the M ltiple Sclerosis enter at ohns op ins, offered re ar s d rin the cere ony e presented Brown with a ift a ea tif l portrait of his father and noted that his father wo ld have een thrilled to see how Brown has rown and that constr ction of a edical ed cation ildin was slated for the near f t re

— ris am ra

A

Ann al nd s pporter ran Scott o, P M , 9, GP o M 09, 09M 13, died ove er 13 Scott was the father of Medical School al n s Mar Scott M , and randfather of c rrent Pro ra in i eral Medical d cation st dents, Mar Scott II o M 09 and ana Scott 09 M 13

e was a re istered landscape architect and was involved in ildin and developin n ero s residential and co er-cial properties thro ho t Rhode Island, Massach setts, and onnectic t e served thirty years as chair of the ranston School B ildin s o ittee, overseein the develop ent, expansion, and i prove ent of p lic schools in that city

Gifts in his e ory can e ade to the Brown Medical Ann al nd, The Warren Alpert Medical School of Brown University, Box 1 93, Providence, RI, 02912 —

A GI T IT VISION

n est icted gi ing bolste s am aign total.

A li e a holiday ift card yo can se it for anythin yo wo ld li e, e it a pressin necessity or a special treat Brown s edical school received a enero s ift card fro Ban of A erica 100,000 for nrestricted p rposes

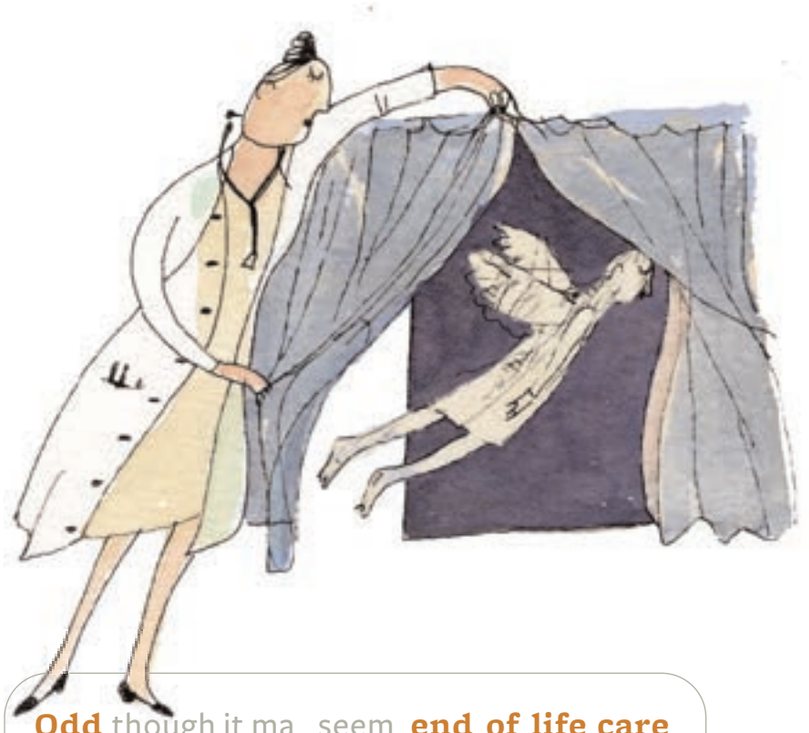
S ch ifts are the cornerstone of the a pai n for Acade ic nrich ent, which places an n s ally hi h percenta e of its 1 4 illion oal on s ch c rrent- sef ndin President Si ons often descri es nrestricted s pport as ey to the a pai n ss ccess It provides s p-port for operatin expenses, offsettin the day-to-day costs of everythin fro fac lty salaries to new electronic o rnals for the li rary, fro stipends for st dent travel to professional conferences And it a es possi le so e of the new initiatives fac lty-inspired c r-ric l innovations or new research pro ects that are part of the Plan for Acade ic nrich ent t not yet part of the School s d et

The Ban of A erica ift represents a a or vote of confidence in Alpert Medical School fro one of the re ion s ost i portant corporate entities Ban of A erica has a lon history of philanthropic ivin , incl din previo s s pport of the Medical School ro 2001 to 200 its o nity ellows pro ra offset the ed cational loans of forty-two edical al ni wor in in nderserved co - nities The Ban s latest ift spea s to its n s al vision in offerin operatin s pport to what it calls anchor instit tions the local arts ro ps, niversities, and hospitals that as econo ic drivers and catalysts of rowth help develop the intellect al, h an, and physical capital that a e healthy and vi rant co nities This contri-tion also reflects the Ban s co it ent to the ission of the Medical School and the way it has chan ed the health care environ-ent in Rhode Island and so thern ew n land —

RESIDENTE PERT

eath ecomes e

A docto finds he g eatest st ength at he atients da est ho .



octor, are yo s re Is there no chance at all eavin the roo , the wo an t rned ac for a o ent to catch y eye, pleadin one last ti e for a sliver of hope, for a way o t of this ni ht are I co ldn t ive it to her o, there is no chance, I said This is the ri ht thin to do

As physicians we are ta ht to heal and ive hope et so eti es healin re ires s to ta e that hope away, to re ove any last do ts and allow fa ilies to ove on This wo an s h s and the father of her three children had st s ffered a assive heart attac and cardiac arrest The lac of oxy en illed ost of his rain only the part that controlled heart rate, lood press re, and reath- in re ained is idneys, liver, and heart were da a ed, pro a ly eyond repair If we re oved life s pport he i ht contin e to reathe, t he wo ld never e the father, h s- and, rother, and teacher he had een st forty-ei ht ho rs efore ertain he wo ld never want to live on life s pport, his wife and children as ed s to re ove the ventilator and eep hi co - forta le They re ained at his side ntil he died a few ho rs later

I have cared for any e ora le patients d rin y trainin or one reason or another their stories have stayed with e, eco - in part of y edical estalt So e stories are intensely positive the stro e reversed with clot- stin edicines, the heart attac a orted with alloons and stents, the pne onia held at ay with powerf l anti iotics

S rprisin ly, other stories stay with e eca se they revolve aro nd death, dyin , and rief and their potential connections with healin dd tho h it ay see , end-of-life care provides a deep satisfaction I have yet to experience elsewhere in edicine While at other clinical nct res one s dia nostic and therape tic expertise rei n s pre e, when death is i inent the h anistic s ills atter ost A ind voice, clear explanations, an ac nowled ent of s f- ferin , and a s pportive sho lder transfor a sterile, senseless tra edy into a shared h an experience that contains the seeds of eanin and healin The a ility and desire to effect this chan e a es the difference etween a ood clinician and a reat physician

I did not always feel this way As an intern, I shied away fro end- of-life disc ssions The re isite pro nostication felt aw ward and so ehow dishonest Who nows for s re whether, when, and how a person will die Medicine is i precise, and death is so very final To e wron is to ro wee s, onths, or years fro a patient s life verly fearf l of stealin life, I presented clinical facts and treat- ent options t offered little real idance As I cared for ore and ore patients, I e an to accept clinical ncertainty as an navoid- a le evil and to appreciate the critical role of physician as co nselor

In this era of patient a tono y, I was trained to ini i e the wei ht of y personality and eliefs lest I overwhel the patient s tr e desires Indeed, in o r increasin ly cons er-driven health care syste , physicians have eco e p rveyors of evidence- ased choices rather than advisors on co plex iopsychosocial decisions The intentional n llification of physicians personality, eliefs, and experiences li its o r a ility to provide e pathic, eanin f l id- ance at an incredi ly v lnera le ti e

Altho h y experiences ay yet e ea er and y personality stron , I wo ld rather perfor a diffic lt alancin act than ne lect s ch a val a le asset So I have intentionally inserted yself ac into the e ation, sharin y past experiences, f t re predictions, and c rrent reco endations, always with a soft voice and leenex ox in hand

Odd though it ma seem **end of life care provides** a dee **satisfaction** have et to e erience **elsewhere in medicine**.

---

i re iden in Brown ener in ern edicine re idenc ro r

ZOOM

A A W A

B J MOKE AKINROLAB

THE ACTIVIST S A ENDA

A sta t st says no to esea ch.

Once a run down building the Hakili mind community center was repaired by MHOP.

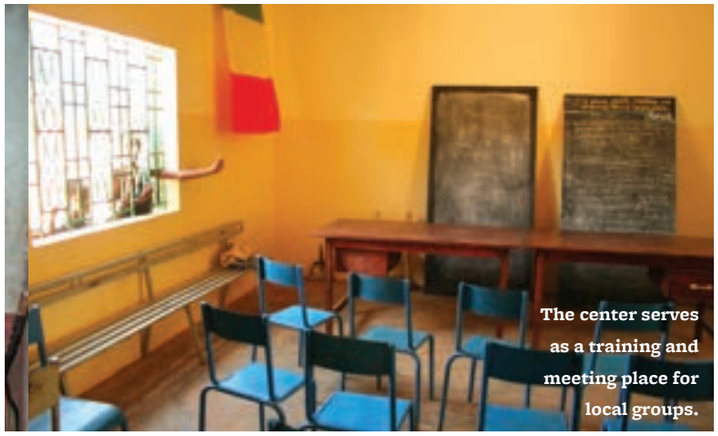
Caitlin Cohen in her Providence apartment

At the start of the summer of 200 , aitlin ohen o M 12, a recipient of a presti io s Royce ellowship, left the co forts of ca p s to cond ct AI S vaccine research in Ba a o, Mali She arrived ea er to wor , t soon ca e to so ethin of an epiphany She wasn t that into research

I st don t en oy it I thin there s a ton of research in this world and not a lot of action co in o t of it, she explains Ulti ately, I was ch ore interested in doin so ethin ot to say that research is a ad thin t p lic health research witho t the action co ponent is a waste

By 200 , ohen had t rned what was s pposed to e a s er vacation into an extended leave of a sence fro Brown er efforts c l inated in the fo ndin of the Mali ealth r ani in Pro ect M P , an initiative ai ed at addressin the ost critical health iss es in Mali s densely pop lated sl areas avin decided on early retire ent fro research, the develop ent st dies concentrator traded in her s rvey instr ents for 01 c tax for s, rant proposals, and all the rea cratic hoo-haa that oes into startin a non-profit or ani ation fro the ro nd p

M P is head artered in Si oro, Mali, a town of 0,000 where citi ens have li ited access to drin in water and electricity,where 90 percent of the pop lation lives on less than two dollars a day, and



The center serves as a training and meeting place for local groups.

ot that AI S is not i portant, she says Malians I spo e with said it didn t concern the eca se their children were dyin of alaria, starvation, or other iss es It s ineffective to address AI S excl sively if yo re not addressin the fact that people don t have eno h food to eat

M P s si nat re pro ect, Si ida eneyali Ba ara for ealth in r o es , is si ilar to any h anitarian initiatives in its e phasis on i provin infrastr ct re and health care access The definin difference etween Si ida and other pro ra s is its approach very pro ra is i ple ented in a three-way partnership with the town and the overn ent to pstart t al invest ent in the health infrastr ct re of sl s Rather than wor in fro an external a enda, Si ida pro ects are prioriti ed y those ost nowled ea le a o t how they i ht e effective the Malian people ohen s view is that if yo want to now how to tria e African hardships, then yo d etter as the Africans

Malians have a lot to say a o t what they want to do with the develop ent aid that co es into the co ntry, t they don t et to do ch of it, she says So addressin the priorities of the co nity in the order they want the addressed was very i portant to e

Si ida is r n y a co ittee of local citi ens char ed with plannin pro ects that foc s on ed cation and reso rce ac isition to enefit p lic health and infrastr ct re In st a year, the co ittee has la nched a networ of health advocacy pro ra s in which lifesavin edical practices are shared ohen, now ac in the U S , is c rrently or ani in a f ndraisin ca pai n for Si ida to cataly e the constr ction of a clinic for 2 ,000 people and a adly needed trash disposal syste

ohen s lon -ter plan is to adapt the M P odel to enefit other African pop lations livin in si ilar conditions A si ple idea li e Si ida can e radically redrawn as appropriate for the co nity in estion, she says

> t s ine ective to address e clusivel i ou re not addressing the act that eo le don t have enough ood to eat.

where nearly one- arter of the children will die of alaria or aln trition efore reachin a e five

Accordin to ohen, these are the statistics with which Malians are ost concerned and are the reason why M P has eschewed an expressly AI S- ased activist a enda

Hawa Cohen s host mother prepares for a wedding.

or ore in or ion on i id ene i i i www i e or

Cohen s address in Sikoro is Pig Corner ask for the white girl.

A

Ana and ia A e ot o iends

he nte net o es to be fe tile g o nd fo sites that omote eating diso de s.

Anorexia nervosa ills This co on eating disorder, lar ely affectin fe ales fro twelve to twenty-five, often poses a ortal threat nowin this, how co ld anyone pro ote anorexia

An nder ro nd ove ent doin precisely this lives and thrives on the Internet A ery for anorexia on pop lar search en ines pro ptly yields any pro-disordered-eatin we sites Pro-anorexia pro-ana redefines, s ally s tly, anorexia as a lifestyle choice rather than as a disease re irin treat ent Many of these sites are interactive for s where extre e wei ht loss is appla ded, starvation is e ated with willpower, and fe ale perfection is ased on ody appearance A edia-savvy appeal to the doctrine of free speech ay e lin ed to a essa e that Ana, a fe ale na e, is a e er of a persec ted , is nderstood inority ro p A parallel pro- li ia pro- Mia networ exists

As any as percent of twelve- to seventeen-year-olds now have a ho e Internet connection More than 400 pro-ana we sites existed in 2003, so e clai in ore than 3 0,000 visits A 200 Stanford University s rvey indicated that 40 percent of adolescent irls with eatin disorders had visited pro-disorder eatin sites yet al ost half of parents were naware of these sites The n er of sites chan es daily, as so e are re oved y free service providers while others are re-started nder new na es or ove nder ro nd into private chat roo s, lo s, password-protected sites or hidden ro p e- ails

These sites proclai that s ccessf l, extre e wei ht loss helps control one s ody and life, de onstrates stren th and transfor s fat and ly to thin and ea tif l Many offer the three T s Thinspiration, tips, and tric s on losin wei ht and concealin it the Thinspiration photo allery exalts cachectic odels We site viewers are iven tips on wei ht-loss strate ies, incl din dietin and p r in techni es They also provide tric s to conceal wei ht loss, wear a y clothes and drin a art of water and don t rinate efore doctor s visits Messa e oards and interactive chat roo s typically feat re inspirational essa es s ch as othin tastes as ood as thin feels

Many wonder why anyone wo ld s pport this philosophy Proponents clai that these sites provide a for for diver ent views that otherwise i ht e isolatin or sti ati in So e elieve that these sites provide a d ent-free co nity where e ers, feelin re ected y the health syste or not ready for treat ent, ay express the selves in the anony o s, disinhi itin settin created y the Internet Moreover, sin s ch na es as Ana or Mia avoids the i personal or edical connotation associated with the ter s anorexia or li ia These fe ale na es personali e the ideolo y, as if it were a friend rather than a philosophy or or id lifestyle A chat roo postin i ht e, Are there any Anas in leveland for e to write to

As it s rvives online and increasin ly nder ro nd, this ove- ent poses serio s p lic health challen es As any as o percent of adolescent irls see health infor ation online f adolescent

> s man as **o percent of adolescent girls seek health information** online. adolescent girls vie ing ro ana sites ercent re orted learning **new weight loss or purging** techni ues.

irls viewin pro-ana sites, 9 percent reported learnin new wei ht loss or p r in techni es 9 percent of these viewers reported sin these wei ht-red ction strate ies

This philosophy s tly endorses a rel ctance to see or tr st o tside s pport, th s f rther isolatin potentially anorectic adolescents Re ection of perceived edical paternalis artf lly connects the to the le iti ate ainstrea , patient-centered care ove- ent e iti i in deceit y providin tric s to conceal dan ero s

ehaviors fro parents, peers, teachers, and health professionals is dan ero s The pro-ana ove ent thrives, as p lic criticis intensifies

onse ently, so e pro-ana we site creators have developed strate ies to escape detection and cens re, y i ratin fro one free we site to another avoidin free portals s ch as ahoo and MS that ay actively censor sites re irin passwords to enter or to escape s rveillance enco ra in

Brown s community health clerkship has roduced a am hlet on dangers of the pro anore ia movement or ediatric roviders schools and arents.

text essa in , instant essa in and private, ndetecta le e- ail-in or ani in private chatroo s and social networ in sites sin disclai ers and ini -a e warnin s to circ vent site re oval or ac in p pro-ana sites on hard drives so they ay e relocated rapidly

What can e done Interventions are challen in eca se of the accessi ility and anony ity of the Internet or so e, censorship is a le iti ate approach o on search en ines s ch as MS and ahoo that host free sites have specific ter s and conditions to which all we sites sin their services st adhere These portals and or ani ations s ch as Anorexia ervosa and Associated isorders A A actively scr tini e pro-ana sites to find any reach of ter s and conditions, in order to le iti ately close sites This enforce ent process is la orio s

Another strate y involves electronic sec rity and filterin syste s that can e installed on co p ters to onitor or loc access to specific we sites or content ata indicate that as few as o percent of parents have installed filters on their children s co p ters Parents sho ld consider esta lishin r les for Internet se, chec - in which sites their children visit, and havin ho e co p ters in open fa ily spaces Media literacy pro ra s ay help e ip teena ers to critically assess edia content vidence indicates that interactive, school- ased efforts ay red ce internali ation of pervasive edia essa es a o t ody i a e and wei ht concerns The co nity health cler ship at Brown s edical school has prod ced a pa phlet on dan ers of the pro-anorexia ove ent for pediatric providers, schools, and parents

A pro-anorexia ove ent exists and thrives on the Internet These we sites co only advocate nhealthy practices with potentially devastatin conse ences

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i n in ern in edi ric o e er on ni er i in i de i c inic ro e or o edicine nd co direc or o e co ni e c er i er Medic c oo nd ro e or o edi ric er Medic c oo nd direc or o do e cen edicine ro i dren o i co or ed on i r ic e e r ic e ir e red in e
Providence o rnal

A

t s im le eally

A atient sti s ainf l memo ies.

5

ven efore I entered Mr s roo , I new what to expect Mr was a lon - ter alcoholic in end-sta e liver fail re, layin all his hopes on a transplant that he wo ld al ost certainly never receive e was here to r le o t spontaneo s acteri- al peritonitis, an infection of the fl id that had een ildin in his elly over the past fo r years as his liver ave o t The case was told to e riefly, with even ore than the s al dose of hospital cynicis As I wo ld co e to learn, Mr was an archetype of sorts liver fail re patients were far fro a rare occ rrence here As I heard the details I co ld already pict re hi , the a ndiced s in sprin led with rst capillaries, the swollen elly risin li e a perfect half do e eneath the sheets, and the sad, watery, yellowed eyes e wo ld loo st li e y father did the last ti e I saw hi

see ed to his doctors id they view hi as the rilliant acade ic, the oo a thor and international historian that he tried always to present to the o tside world r wo ld they ta e one loo at his edical history, see the chart la eled with cirrhosis and chronic pancreatitis, and write hi off as one ore of those patients I wonder if he reco nted for the the fictionali ed acco nts of his children s lives that he sp n for friends, the details of irthday parties he d never attended, the reports of school and friends he d heard third hand e was nothin if not a storyteller, and he see ed to elieve, or at least hope, that he co ld rewrite his own history in the tellin

As a child, I rew p elievin in his words It was easier to ass e he eant it when he told e how ch he loved e, to tr st hi when he called to say he was sic a ain and wo ldn t e co in that wee - end ven as I ot older and it eca e clear that words and actions were not two thin s that went hand in hand for ad, I still rew hopef l every ti e he pro ised he wo ld call or show p I caref lly s etched o t plans for the edroo he said wo ld e all ine in his new apart ent, told y friends a o t the swi in pool we wo ld se, and then sat and waited as the onths tic ed y ears later, at one of o r iann al dinners, I stood and loo ed o t the windows of the extra roo ad sed as a st dy at the l e waters of the pool that see ed iles away

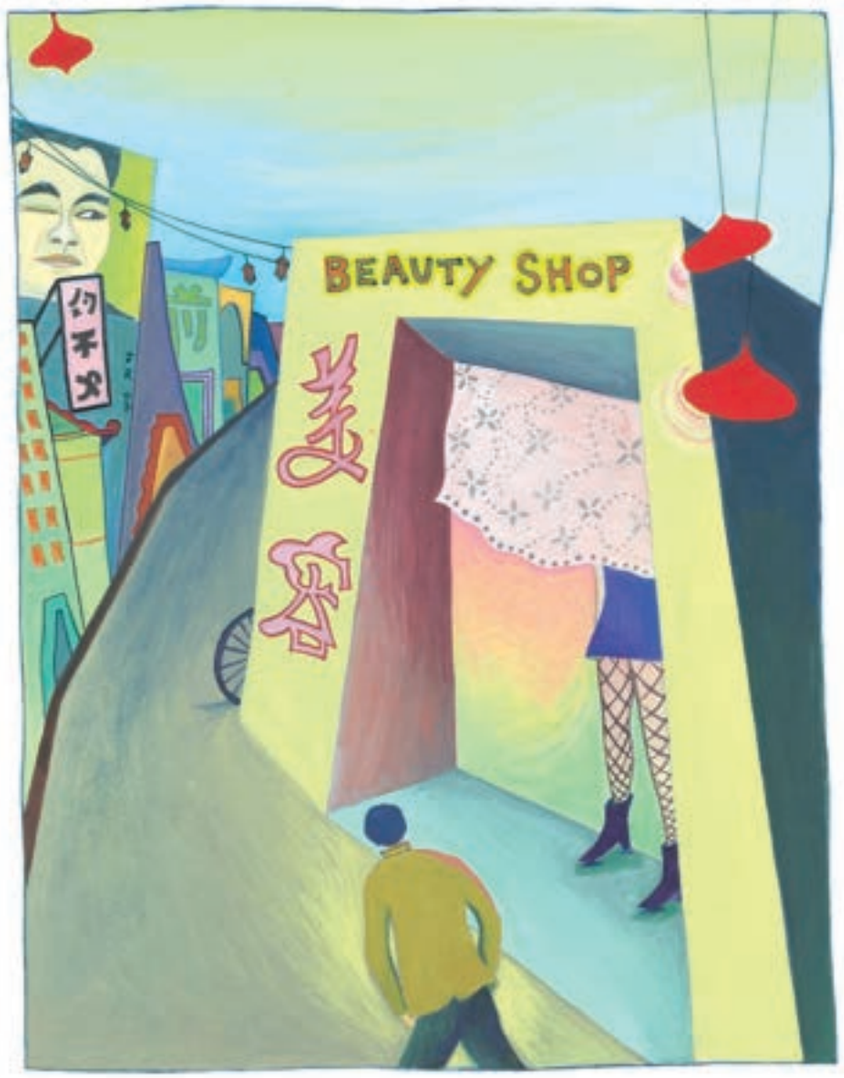
W and issin front teeth, Mr loo ed nothin li e y profes- sorial father, clad always in l e tton- downs et as I d envisioned, the sti ata were all the sa e The stories also had co on threads the wife who finally had eno h and left, the son and da hter he clai ed he saw every wee end As he flipped open his wallet to show e their school photos, I flashed on the fra ed photos in ad s office and wondered if he had ept photos of s with hi d rin those final hospital stays

Mr told e he relapsed five days efore his ad ission After three years so er and finally ettin on the liver transplant list, with one swallow he threw it all away I wanted to nderstand why, I ess that s always een y pro le I as ed hi if he d een depressed recently or if so ethin awf l had happened e loo ed e in the eye and said, It s si ple, really I st pic ed p t in the hallway, I told y resident Mr see ed li e a nice y They all do, she said

In ro nds, I presented Mr s case orty-ei ht-year-old ale with a history of cirrhosis d e to alcohol a se, hypertension, and depression who presents with a do inal pain stat s post a paracen- tesis showin 212 n cleated cells and any acteria Technically Mr didn t eet the criteria for spontaneo s acterial peritonitis, and we de ated whether we sho ld start treat ent The cons ltin GI doctor advised a ainst treat ent If there s still a hope he i ht re ain on the transplant list ein la eled with SBP i ht eop- ardi e his spot Besides, it will ean he has to et wee ly prophylax- is ntil The ti eline h n in the air Until he dies is what the doctor eant We contin ed to disc ss ac and forth ntil the senior resident as ed the standard ethical estion eant to re ind callo s edical professionals of the h anity of o r patients

ow wo ld yo treat hi if he were yo r father he as ed I t rned away

W *i in er ird e r o edic c oo*



IELDNOTES

hanghai nde wo ld

t dents add social and olitical awa eness to thei biological nde standing of an e idemic.

has experienced tre endo s econo ic rowth and social pheaval Tens of illions of people fro the co ntryside have oved to lar e cities, s ch as Shan hai, in search of e ploy ent So e of this internal i ration is ille al, as it can e diffic lt to o tain official r an residency per its A portion of v lnera le i rants ay e recr ited into an nder ro nd society do inated y or ani ed cri inal an s and have little access to re lar social services and health care ven worse, yo n i rant wo en are often per- s aded, if not forced, into sex wor

In the s er efore o r second year of edical school, we spent ten wee s in Shan hai st dyin s ch i rant wo en wor ers and their sex al- ehavioral ris factors we wor ed with epide iolo ists and local doctors fro the Shan hai enter for isease ontrol and the hinese Acade y of Sciences Shan hai has the hi hest incidence of sex ally trans itted infections in hina, with a pop lation even lar er than Bei in In p lished s rveys, to 10 percent of hinese en ad itted to havin had a prostit tion experience at so e ti e in their lives This is alar in

We therefore or ani ed this pro ect with the hypothesis that i rant wo en in Shan hai are at very hi h ris for ac irin and trans ittin I as well as other infec- tions This ar inali ed pop lation has een little st died in hina eca se of their ille al stat s and traditional discri ination a ainst their occ pation, as well as wide- spread denial of the extent of co ercial sex wor and I The pro ect wo ld also allow s havin st co pleted the first year of edical school to p t o r newly ac ired edical nowled e and inter- viewin s ills to se in o r childhood ho e- land we were oth orn in hina and raised in antonese-spea in fa ilies here in the U S We wo ld e a le to hone o r Mandarin-spea in s ills as we interviewed ore than oo wo en sin oral s rveys with the help of local doctors

Altho h the hinese overn ent has declared I a national p lic health pro- le , sex ally trans itted infections re ain a ta oo topic even for any health care professionals n o r site visits to co nity health centers, any local health wor ers stron ly insisted that I was not a local p lic health threat any insisted that ho osex- ality, teen pre nancy, and dr a se did not exist in their co - nities ne explained that while the overn ent had written policy directives s pportin action to prevent an I epide ic, these

> lthough the **Chinese** government has **declared HIV** a national u lic health ro lem se uall transmitted in ections **remain taboo even for many health care** ro essionals.

policies did not el cidate specific interventions If yo do nothin , yo cannot o wron eca se yo are not associated with it, she said

We fo nd little consistency a on the strate ies e ployed y different p lic health districts We were told that district health chair en are typically appointed y the o nist Party and have considera le a tono y They will approve or re ect a pro ect on the asis of personal connections and their relationship with the pro ect s pri ary investi ators, as well as the i pression of their districts they wish to ive their political osses And it was nat ral to want to ive the i pression to the entral Govern ent that p lic health in their districts was excellent

or this reason, or ani in and cond ctin o r research was ch harder than we had anticipated We discovered that for in personal connections with local colla orators was cr cial to o tainin official s pport for o r st dy ort nately, r Allon A itai, a teachin fellow in e er ency edicine, helped s tre endo sly with this networ in process

Born in Africa, r A itai earned a de ree in Asian st dies fro Ber eley, attended edical school at Tel Aviv University in Israel, and is now a fellow in international edicine at Rhode Island ospital epart ent of er ency Medicine e is fl ent in hinese and nowled ea le a o t the history of its any dynasties id we ention that he also spea s e rew, Spanish, and rench e has i pressed not only his hinese-A erican st dents t also o r colla orators in hina rin a preli inary winter visit to Shan hai, r A itai ac ired a powerf l local ally for o r pro ect, a People s i eration Ar y General with an interest in epide iolo y and any contacts with local researchers In t rn, d rin o r ti e in Shan hai, we were a le to eet with li eral and dedicated epide i-olo ists as well as co nity physicians, all of who were interested in learnin A erican approaches to I research and prevention

with the idance of r A itai, we were a le to define a co prehensive plan for o r pro ect It involved hir-in co nity o treach wor ers and doctors to facilitate o r s rveyin i rant wo en in a ran e of occ pations and their an-a ers We wo ld collect de o raphic data a e, ed cation, place of ori in, fa ily stat s , I STI nowled e, and infor ation a o t access to health care We were especially concerned a o t wo en s ental health, a topic nder-addressed y conte porary p lic health specialists in hina More than 9 percent of o r st dy pop lation co es fro econo ically nder-developed parts of r ral hina, where hi her ed cation is navaila le Arrivin in the i r an settin of Shan hai, these wo en virt ally do not now anyone, and wor twelve to fifteen ho rs at their salons and assa e places servin c sto ers either with or witho t clothes , s ally six to seven days per wee They therefore did not have opport nities to p rs e nor al social activities with the o tside world, nor did they possess additional professional s ills for a career chan e

We arrived in Shan hai in ne, and r A itai was with s for several wee s to help s et started We ased o rselves in an ind strial, wor in -class district on the north side of town, near Shan hai s ports, which is ho e to any i rant wor ers, sailors, and prostit tes With an esti ated pop lation of 1 2 illion, ore than all of Rhode Island, the district was the perfect location for o r st dy We rented a cheap apart ent near the steel factories At ni ht, ost of the local hair salons lit p red li hts and transfor ed into rothels

When we e an o r s rvey, we were s rprised y how enth siastically the i rant wo en and their ana ers welco ed s to their places of siness We visited typical sites of e ploy ent resta rants, factories, hair salons, assa e parlors, and sa nas, and fo nd a o to o percent willin ness to co plete o r s rveys Many wo en were especially happy that visitin researchers were ta in an interest in their well ein They were ratef l that we offered the advice and condo s So e critici ed the free condo s iven o t y previo s co nity health wor ers as ein too thic and r ery ne i ht thin this silly, t now we nderstand that condo se rate i ht easily e i proved if we si ply i prove the ality of condo s So e co nity doctors ave o t their personal cell phone n ers so that the i rant wor ers co ld call the to disc ss their health needs privately

W A

W o servations sex wor ers s ally are e ployed in cover sinesses, s ch as hair salons or foot as-sa e centers ne line of o r s rvey as ed respondents to define the nat re of their place of wor So e weren t even s re what type of siness they were pretendin to e e ployed in r s rvey also as ed whether respondents fo nd their o s and daily activities to e eanin f l While this was a validated co ponent of the -12 ental health screen, sex wor ers occasionally co ented that it see ed odd to e as ed those estions Still, we were lad we had as ed data analysis showed 4 percent of respondents were at ris for depression, ore than do le the rate of the eneral pop lation in hina t re st dies sho ld cond ct ore detailed ental health screens for depression, s icidal ideation, ipolar disorder, and schi ophrenia in this pop lation In addition to the stress of havin to provide sex al services to stran ers, there are any other

> hen asked to **define the nature** o their lace o ork some res ondents **weren t even sure what type of business** the ere retending to e em lo ed in.

reasons why this ro p of wo en ay develop psychiatric illnesses, s ch as lac of self-estee , pessi istic view of the f t re, and potential for s stance a se

rin o r s rveys, siness went on as s al sto ers wal ed in and interacted with o r s ects witho t appearin to ind or even notice o r presence Typically, they wo ld enter, point at a wo an, then disappear with her into the ac of the hair salon, witho t o vio s price ne otiation n one occasion, a c sto er was told that the wo an he had re ested was not ein ar eted, t wo ld he care for so eone else e accepted the alternative offer Another ti e a nervo s-appearin an in his fifties was ref sed service y a very yo n -loo in twenty-year-old

Police occasionally wal into hair salons to chec licenses and arrest s spicio s-loo in wo en Given the nearly i i-to s presence of rothels in Shan hai, we s spect so e district police receive protection pay ents Police s ppression efforts in eneral appeared to s to e sporadic and ineffect al and s pport y the local p lic health wor ers for the police presence lac in ne epide iolo ist entioned that in a st dy of several onths when police actively s ppressed co ercial sex wor in a near y district, the rates of sex al assa lt and rape went p

n one occasion, ily was inspected and photo raphed y the police, who too her for a prostit te She was initially horrified er first tho ht was I a not li e one of the She was e arrassed y this reaction and reali ed, for the first ti e, how ch pre dice she also held a ainst the Sharin in the prostit tes experience of police h iliation, if only riefly, let her nderstand the sti ati a-tion these wo en have to face every day and why they do not tr st others After she recovered fro her initial shoc , she too o t her ca era and tried to photo raph the police and their inspection They were a o t to arrest her when one of o r co nity doctors appeared and identified her as a edical st dent ne re ar ed to the co nity doctor, We are tryin to et rid of the , why are yo wor in a ainst s There was certainly no cooperation etween p lic health wor ers and police officers to persec te sex wor ers

While we are still in the process of finali in o r data analyses at the ti e of writin this article, we have already discovered so e sef l infor ation a o t sex wor ers in Shan hai ew of the have for al ed cation eyond nior hi h school, t any financially s pport their h s ands, parents, si lin s, and children in their ho e villa es They tended to e very yo n altho h so e were older than twenty-five, any were nder the a e of twenty-two, which s ests to s that there is a hi h t rnover rate Indeed, ost said they planned to have a career chan e as phrased in o r s rvey in less than a year They ca e fro all over hina, and ore than half said that they planned to ret rn to their ho e villa es after savin eno h oney Their nowled e a o t I was enerally low, and 40 percent of the cons ed so e alcohol, in a o nts varyin fro daily to wee ly Most appeared to e receivin inade ate preventive edical care less than 10 percent of the had ever een tested for I

In eneral, we fo nd that the A erican idea of perfor in o t-reach efforts to ar inali ed co nities was novel, if not stran e, to the hinese p lic health co nity r A itai ave a lect re on the A erican peer-ed cation odel of recr itin e ers of ar-inali ed pop lations s ch as ays, sex wor ers, and intraveno s

> haring in the **prostitutes e perience** o olice humiliation i onl rie l **let Lily understand** the stigmati ation **these women have to face** ever da .

dr sers to train to e health wor ers This see ed n s al to the hinese, and they wondered if it wo ld even e le al to hire and train people en a ed in ille al activities owever, d rin the co rse of o r s rvey, one district did e in to recr it co ercial sex wor ers for a peer-ed cation pro ra , and ic ly fo nd the -selves with a s rpl s of enth siastic vol nteers

xplorin the terrain of international edicine d rin o r ti e in Shan hai was excitin We approached this research pro ect as a reat opport nity to fa iliari e o rselves with conte porary hinese society and to ain a practical experience in hina s p lic health policies and challen es We were saddened y the co ercial sex wor ers stories, t at the sa e ti e inspired to contin e to wor toward i provin p lic health, e it in hina or elsewhere

ere on ca p s, we arvel at the details of viral protein synthesis and the P4 o cytochro e syste in Shan hai, we learned that in addition to the iolo ical echanis s, effective control of an epi-de ic necessitates addressin its social, political, and c lt ral aspects ealth care sho ld e the ri ht of everyone in the world, incl din the ar inali ed, sti ati ed, and oppressed avin finished over o s rveys incl din a second one, on Shan hai s ale ay co nity with help fro o r hinese colla orators, we ca e ho e this Septe er with proof that it is possi le to ild international partnerships for p lic health research and o treach

Today, we are actively see in interested nder rad ates and edical st dents for f t re pro ects Thro h o r newly ade con-tacts, we can help o r st dents enerate pro ects that can e acco -plished in a s er ptions incl de assessin I and STI ris s with ar inali ed pop lations as we descri ed a ove, as well as wor in areas s ch as otor-vehicle-accident tra a and olec lar dia-etes research We also plan to se a portion of o r clinical elective ti e for ore wor a road in this area, in order to satisfy o r Scholarly oncentration re ire ents in Wo en s Reprod ctive ealth, reedo , and Ri hts and Glo al ealth

Brown sophomore Ruhan Nagra in her dormatory room on campus

Milli n a e

ancer s r i ors are a ro in reed

t at is life really like after cancer

A A

A A WA

Three years a o, R han a ra 10 M 14 was a typical, hard-char in hi h school nior with her si hts set on ettin into a ood colle e When she e an experiencin fl -li e aches and fati e, she dis issed the as stress, and even a relentless, rac in co h and shortness of reath co ld not

stop her Then one day, while st dyin , a ra reached p to scratch her nec and fo nd a l p She loo ed at it in a irror, and to her horror, the ass was clearly visi le nder the s in

ear that the l p was rowin rapidly set off a s ccession of doctor visits, a attery of tests, and a iopsy In two days, she had a dia nosis sta e 3 od in ly pho a

a ra e an an a ressive treat ent re i en of che otherapy and then radiation tar eted at the 14-centi eter t or After six onths, she eca e one of the 10 il-lion cancer s rvivors livin in the U S today

ancer s rvivors have achieved near-ythic stat s in o r c lt re, idoli ed as s perh ans who have eaten everyone s worst fear and one on to win the To r de rance seven ti es or pitch the winnin a e of the World Series B t eneath the papara i s flashin ca eras and headlines hailin the as heroes are real people who have end red a life-alterin event

We cele rate s rvival, t do we tr ly nderstand what oes down in the str le and the scars that are left ehind

LATE EFFE T

s rvivors has tripled over the past thirty years, and the A erican ancer Society predicts that the fi re will contin e to rise as the pop lation a es and etter treat ents are developed The special needs of cancer s rvivors are st e innin to e nderstood, and in fact were the s ect of a report released y the Instit te of Medicine in 200 , ro ancer Patient to ancer S rvivor ost in Tran-sition The co ittee char ed with inves-ti atin the iss e fo nd n ero s shortfalls in the care provided to cancer s rvivors, and reco ended that a s rvivorship care plan e p t in place for each cancer patient

The report ac nowled ed, however, that the lac of clear evidence for what consti-t tes est practices contri tes to a wide variation in care

Most of what is nown a o t the physical conse ences of cancer treat ent has een learned thro h the hildhood ancer S rvivor St dy SS , a retrospective cohort st dy of children dia nosed with cancer etween 19 0 and 19 The st dy ses the patients si lin s as controls ast year, researchers p lished an article in the *ew n nd o rn o Medicine* analy in the incidence and severity of chronic health conditions in the ad lt s rvivors of child-hood cancer Astonishin ly, nearly two-thirds had at least one chronic condition, and a on thirty-year s rvivors, the inci-dence was 3 percent

Professor of Pediatrics indy Schwart M 9 is director of e atolo y ncolo y at as ro hildren s ospital and a e er of the SS Scientific Advisory Board She has spent ch of her career ildin and shapin the st dy of cancer s rvivorship and esta lishin so e of the first hospital- ased s rvivorship clinics in the co ntry, incl d-in the one at ohns op ins ne year a o, she e an wor on as ro s clinic

verall, anyone who has s rvived cancer is considered a s rvivor fro the day they are dia nosed B t for ost of the for al st dies that we ve done we se the five-year ar as the start of lon -ter s rvivorship That doesn t ean yo don t thin a o t ris s efore five years, t at that point yo re no lon er worryin that the disease is oin to co e ac , Schwart says

or yo n s rvivors, those who will live for decades after treat ent, fi rin o t what after-effects they i ht experience is especially i portant The world of ad lt oncolo y has een slower to thin a o t and address late effects the side effects of che otherapy, s r ery, and radiation that only eco e apparent with lon -ter on-itorin of the patient over a period of years Schwart thin s that i ht e eca se so e of the ris s involved, s ch as infertility and cardiac or l n disease, et ixed p as part of nor al a in , whereas when a child has a cardiac pro le , it s not s pposed to e In addition, therapy affects the rowth and develop ent that ar s childhood Pedia-tricians eca e att ned to late effects ch earlier

At the as ros rvivorship clinic, Schwart and ne B erre aard, a n rse practitioner, first review each patient s treat ent history, to nderstand exactly what types of thera-pe tics the person was exposed to They cal-c late the patient s ris s and then interact with whatever specialties he or she needs e ropsycholo ists are availa le eca se people who have had radiation to the rain or certain che otherapies have to e onitored for school f nctionin or learnin disa ilities An endocrinolo ist is availa le to help with thyroid or fertility co plications, and a social wor er to address psychosocial iss es

early t o t irds of c ild ood cancer s r i ors a e at least one c ronic condition

Cindy Schwartz in Hasbro Children s Hospital s oncology clinic.

that one of the after-effects that has received the ost press is the hi h rate of reast cancer in od in disease s rvivors It can e as hi h as 20 to 30 percent in wo en after twenty to thirty years

Before she e an treat ent, R han a ra s doctors did disc ss the potential side effects, t she doesn t elieve they wo ld have had the disc ssion if her father, an anesthesiolo ist, hadn t as ed While od in s is one of the ost c ra le cancers, with a 93 percent c re rate, the SS showed that its s rvivors have the hi hest ris of second cancers and heart disease

I a ore prone to le e ia eca se of che o I a ore prone to reast cancer eca se of the radiation I have to start ettin a o ra s when I twenty-five instead of forty That s very co pared to thirty-five or forty ray previo sly It s not as clear that the ris of reast cancer is that si nificant when yo et down to the doses we re doin now, she explains

That s why s rvivorship clinics are learnin experiences on oth ends physicians learn fro patients what the effects are and then ad st the treat ents accordin ly And it s a alancin act or every dr they stop sin or for which they decrease the dose, they need to find an alternative that can achieve the sa e s ccess

ate effects feed ac into what yo do p front, Schwart says It s fine to c re the disease t yo have to c re the person We now try to plan treat ents that will eradicate the cancer with ini al ris of lon -ter in ry

What s also eco e clear is the need for s rvivors of childhood or yo n ad lt cancers to e followed closely y physicians who nderstand late effects and now what types of co plications to loo for in the f t re While the s rvivorship clinics can provide so e of that follow-thro h, it ay not e feasi le for every s rvivor to e seen in s ch a clinic st yet Patients also need to now the co plete history of their treat ent Sayin I was treated for cancer is not eno h, since the specific dr s and doses can res lt in very different co plications

The transition fro pediatric care to ad lt internal edicine can e tric y for s rvivors, too ven when the transfer of edical records and history is done well, patients can fall thro h the crac s Schwart says, The opti al people to follow these childhood cancer s rvivors will e fa ily practitioners or physicians trained in oth internal edicine and pediatrics That contin ity of care can ens re that s rvivors are followed appropriately across the lifespan

t s fine to c re t e disease t yo a e to c re t e erson e no try to lan treatments t at ill eradicate t e cancer it minimal risk of lon term in ry

The effects of treat ent depend on the t or, how it was treated, and the a e at treat ent ne a or concern of the s rvivors, Schwart says, are secondary ali nancies We now radiation therapy can increase the ris of t ors in any area that s irradiated he otherapy can ca se secondary le e ias

An expert in od in disease and chair of the od in isease o ittee for the hildren s ncolo y Gro p, Schwart says alar in , a ra says Still, she tries not to worry too ch Treat ents are always advancin and who nows what will e availa le very year thin s are chan in in the edical field I try to e lo ical a o t it

Schwart is ic to point o t that treatents have chan ed radically over the past twenty years doses of che otherapy and radiation have een ratcheted down

ro 19 on children ot twenty to twenty-five ray nits of a sor ed radiation

N IN AN

providers and cancer s rvivors the selves are lo yin for a tr e

whole person approach to treat ent Another I M report, st released in ove er, tac led the psychosocial health care needs of cancer patients Brown s Associate ean for P lic ealth Terrie ox Wetle served on that panel

espite evidence that carin for patients psychosocial health clearly red ces their s fferin , helps the adhere to treat ent, and facilitates their ret rn to health, the panel concl ded that attention to patients psychosocial health needs is the exception rather than the r le in cancer care today

linical Associate Professor of a ily Medicine Mar aret S Wool, Ph , is a clinical social wor er who speciali es in psychosocial oncolo y, co nselin s rvivors and their loved ones

er patients, she says, have a wide ran e of experiences oth d rin and after treatment ne an is concerned a o t co nication with and a on all of his doctors Another is copin with total i potence after prostatecto y Many are dealin with scarcities of oney, ins rance, transportation all of the classic arriers to care

I ve had to sit with yo n people who

Margaret Wool in the radiation therapy practice where she provides counseling to patients.

are dyin of cancer and help the decide who is oin to have c stody of their children followin a contentio s divorce when they elieve the other parent is nfit, Wool says These are pro le s that are o tside the scope of edical concerns so physicians ay not et involved in the , and practitioners don t always now what to loo for

All the other pro le s of life don t stop st eca se yo have cancer In addition to the e otional strain of cancer, so eti es there are other thin s, too People et divorced, people have other iss es

a ilies can feel very lost and conf sed a o t cancer treat ents and their aftereffects Wool descri es a yo n an in his early thirties who started havin cardiovasc lar and astrointestinal pro le s d e to cancer treat ent he had received as a five- or six-year-old It soon eca e clear that nothin co ld e done to resolve the co plications, and he died

It helped hi and his wife to e a le to tal a o t the process with e even tho h we co ldn t chan e it, Wool says Providin the s pport was very val a le We addressed iss es that were very ean- in f l for acceptin his decline, and confrontin her ereave ent and f t re without ilt

In fact, she says, the role of s pport and contact is so stren thenin that people can do thin s they wo ldn t have tho ht they co ld do

I have seen positive o tco es, where wo en who have een in nsatisfyin and even a sive arria es say I ot thro h cancer treat ent and I stron er than I new, and I not p ttin p with that anyore

or the ost part, people e er e fro cancer as ch the sa e person they were efore Wool says so e do reeval ate their lives, and ta e on a don t sweat the s all st ff attit de, as if now that they ve s rvived a a or illness every other o stacle in life is trivial Typically that chan e is fleetin If yo re a cran efore, yo re oin to e a cran after If yo are opti istic and nice efore, yo still will e o r asic character doesn t chan e

There s also so e expectation p t pon people in cancer treat ent that the reatest factor affectin their s rvival is their own state of ind, that re ainin positive and p eat res lts in faster and f ller recovery

a ra de n s that yth People always tal a o t yo r ood attit de, and that that will help yo And that s not tr e I et a lot of people who had a horri le attit de a o t it, t that was st their way of dealin with it So e people with horri le attit des are oin to e c red And so e people with ood attit des are oin to pass away and so e are oin to e c red It s all l c of the draw It s nothin yo have control over, she says

That lac of control can anifest itself in different ways, dependin on each individal s c lt ral and reli io s eliefs Wool says she s ost str c y patients who elieve their cancer is a p nish ent fro God

They say thin s li e, What did I do to deserve this or Why did God do this to e I elieve it s a way to have the ill sion of control It s not that yo are at fa lt, t it s the tho ht that yo co ld ve done so ethin different and so in the f t re yo can do thin s that will protect yo It co ats the helplessness of ein str c y a olt of li htnin and that helplessness is ch scarier, she says

So e patients do experience si nificant anxiety and depression, and re ire ore concentrated attention Wool wor s with a radiation therapy practice and any of its patients are referred to her She elieves, however, that she is not seein all of the patients that co ld se professional co nselin , and one reason is so e re ain ti htlipped a o t their e otional stat s She hopes to e in sin a screenin instr ent with all patients in the practice to help identify those at ris for severe e otional strain

And, she says, there are certain o ective thin s that doctors o ht to loo o t for, even when a patient won t ad it they are havin diffic lty Bein the parent of a yo n child, or havin anyone dependent on yo , s ch as an elderly parent, is one Recent ereave ent, other chronic illnesses, and any history of psychiatric illness a history of depression a es one ore v lnera le to depression in response to cancer These are the people who sho ld e referred for psycholo ical services

There s ore distance to o in havin a clear profile of the people that need help, t we now what so e of the psychosocial characteristics are and we can p t echanis s in place to reach o t to the

ome eo le it orri le attit des are oin to e c red And some eo le it ood attit des are oin to ass a ay t s all l ck of t e dra t s not in yo a e control o er

LI E TR NG

are partic larly devastatin for yo n ad lts dealin with cancer, people who in eneral elieve they are i ortal, who have their first taste of

freedo fro their parents and feel they have their whole lives in front of the

o Ul an 99 was nineteen years old and st a o t to start his sopho ore year at Brown when he was dia nosed with chondrosarco a, a t or rowin on the cartila e of his ri ca e

eavin the hospital after s r ery, he and his fa ily were iven pa phlets and roch res a o t s pport services, t none were for people his a e When they contacted the or ani ations, so e even said o n ad lts don t et cancer We new the iss es yo n ad lts were facin were different than they were for children and older ad lts, Ul an says

o n ad lts have a sense of invinci ility It s an aw ward ti e *wi o* havin cancer and then yo add cancer in and it eco es a very co plex a e of physical, psychosocial, and e otional iss es Then yo add in life ins rance, re lar health ins rance, fertility, datin , social life it s not yo r typical colle e experience

Part of the pro le is that the edical esta lish ent is not set p to treat adolescents and yo n ad lts ospitals are eared ore toward the very yo n or to ad lts, and that can a e it aw ward for teens and twenty- or thirty-so ethin s

I wasn t treated at a pediatric facility I was treated at the ad lt facility, says a ra There were periods when the hardest thin was loo in aro nd and seein all these iddle-a ed and older people who were really sic And I was li e, Wow, I seventeen years old and I have this illness that all these old people have What s wron with e I felt so o t of place I st wanted to e nor al a ain

To fill the ap in s pport services, Ul an and his fa ily esta lished the Ul an ancer nd for o n Ad lts They offer a patient navi ator pro ra to help yo n ad lts a e their way thro h the health care system, a pro ra that atches s rvivors with so eone else who has the sa e dia nosis, and s pport ro ps in several cities Since cancer treat ent leaves any yo n ad lts in de t or an r pt, the nd offers a hi her ed cation scholarship pro ra for those who cannot afford colle e or trade technical school as a res lt of their health care ills

By day Ul an is president of the ance Ar stron o ndation The A is sin larly foc sed on helpin people s rvive cancer, facin the reality that it is nli ely cancer will ever e c red, t etter treat ents and ways to detect it early will yield ore and ore cancer s rvivors in the f t re

We reali ed that ance, for the rest of his life, will e a s rvivor, Ul an explains When he won the To r de rance, people started to for et his s rvivorship story, and it s a very powerf l one e had to an sper so he d e a le to have ids, he was dropped y his cyclin tea which eant he had no ins rance, he wasn t re he d e a le to o ac to his o a ain

All these psychosocial and practical iss es, so eti es they et lost and people see hi standin on the ha ps- lys es and they thin , h, he s l c y, he s a fa o s person, t he went thro h all these s rvivorship iss es hi self And that s one of the reasons we decided to foc s on it

m se enteen years old and a e t is illness t at all t ese old eo le a e felt so o t of lace st anted to e normal a ain

LARGER THAN LIFE

W calls people li e o , who ret rned to the soccer field after his cancer s r ery to help Brown to three Ivy ea e ha pionships in fo r years and has since participated in a do en arathons, incl din a 100- ile race in the i alayan Mo ntains, s pers rvivors B t, she says, she nderstands that while any are inspired, other s rvivors resent that eca se it i plies if yo re not achievin o tstandin physical or personal acco plish ents that so ehow yo re not really doin it well

So e, li e R han a ra, prefer not to e called a s rvivor at all

P eo le see ance Armstron and t ey t ink e s l cky e s famo s t e ent t ro s r i ors i iss es imself

I ta e so ch iss e with the word s rvivor, she says The se of war etaphors to descri e any illness, incl din cancer, does s ch a disservice What does that say a o t the people who didn t live It s not a o t co ra e It s a o t people doin what they need to do to et well And we all want to e healthy

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at the ance rmstrong oundation ere sitting around the o ice one da hen the stum led across a distur ing statistic uried in a ational ancer nstitute re ort. ver the ast thirt ears survival rates or oung adults ith cancer have not increased at all. ou are thirt ears old toda and diagnosed ith cancer no matter hat t e o cancer our chances o surviving are less than hat the ere in .

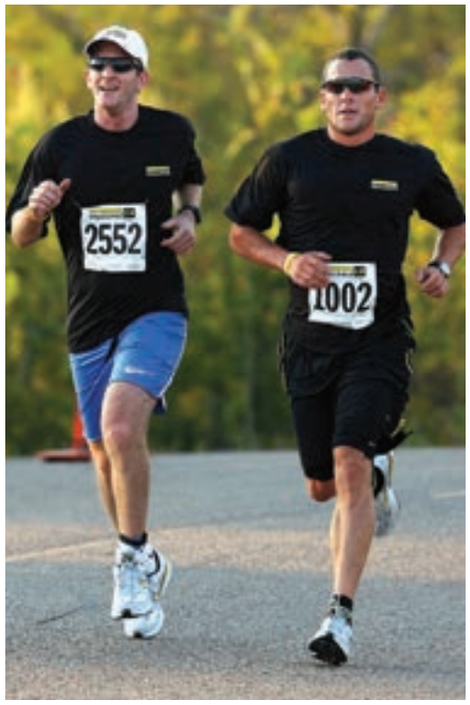
lman icked u the hone and called the director o the . he conversation led to a rogress revie grou or on oung adult oncolog to ind out h there as this lack o survival. s are considered the gold standard or scienti ic strategic lanning at the ederal level and in the ast had onl een done or individual cancer sites like reast rostate and colon.

he ance rmstrong oundation ut u a uarter o a million dollars or the and as matched rom the . t as the irst ever rivate u lic artnershi o this t e sa s lman.

he indings revealed a er ect storm o actors rom the scienti ic to the s chosocial io logical di erences in the cancers that mani est in adolescents and oung adults a dearth o research on oung adult cancers dela ed diagnosis too e oung adults enrolled in clinical trials lack o s chosocial su ort and lack o health insurance.

he resulted in ive rec ommendations ith the goals o increasing oung adult survivor shi im roving ualit o li e ro viding advocac and su ort and im roving health care deliver across the continuum rom earlier diagnosis to etter end o li e care. ith the s recommen dations as a guide the oung dult lliance as esta lished ringing together non ro it organi ations and medical institutions and in late the lliance issued its strategic lan. e elieve i e can im lement these strategies e can change the curve sa s lman.

Any ody o is dia nosed it cancer s o ld a e t e o ort nity to li e and li e ell



Doug lman left runs the LIVESTRON Challenge K with Lance Armstrong in 200 .

evertheless the experience was life-chan in for her Before cancer she had envisioned a career in international rela-tions She enrolled in the Pro ra in i eral Medical d cation instead, eca se ein sic ade her reali e she co ld help others ore directly

I sed to thin , Those are other people s pro le s It s li e yo re hearin so eone else s story, t then it s yo r own and yo reali e that and it chan es everythin The one lastin thin cancer ave e was direction in y life and a sense of p rpose It ave e passion for this

While she says it feels pretentio s to say she nows what ind of edicine she wants to practice, as she is only a sopho ore, a ra feels that as an oncolo ist, she will e a le to relate to patients in a way other doc-tors cannot Tho h it will not always e appropriate to reveal to patients that she, too, had cancer, she elieves she can convey that e pathy witho t sayin a word

It s an nspo en nderstandin And patients can sense that, it doesn t need to e ver ali ed It will help e connect with the etter and they wo ld also feel that connection

ven the s pers rvivors li e Ul an and ance Ar stron elieve each person has to live his or her own version of s rvival

Ul an has this ta e on it ancer sho ld not control so eone s life Any ody who is dia nosed with cancer sho ld have the opport nity to live and live well To o ac to wor and to see their ids rad ate fro school and to e aro nd their fa ily and to do all the thin s, if not ore, that they had planned on prior to havin cancer

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Richard Siravo with a photograph of his son Matty

atthew Siravo died on May 11, 2003 The ca se cardiac arrest and assive rain da a e ind ced y a rand al epileptic sei re lastin ninety in tes two days earlier Matty s death certificate was si ned on Mother s ay e was five

Within a onth, Matty s parents, Richard and e ra Siravo, had parlayed their rief into the first of what wo ld eco e a trio of ann al f ndraisin events a olf to rna ent, a road race, and a winter all all intended to increase epilepsy awareness, s pport fa ilies copin with the dia nosis, ed cate physicians and school personnel, and f nd asic research To date, the fa ily s Matthew Siravo Me orial o ndation, ased in Wa efield, Rhode Island, has raised ore than 00,000, esta lished a visitin professorship in pediatric ne rolo y at as ro hildren s ospital, and awarded 0,000 to s pport a pilot st dy of the ioche ical pathways affected y anti-sei re edications

In late ove er 200 , the fo ndation hosted a sy posi for Brown physician-scientists as part of an effort to c ltivate local scholarship on epilepsy and expedite the search for a c re When Matty was first dia nosed, we felt as tho h here in Rhode Island there were very li ited reso rces for parents and fa ilies str lin with epilepsy, says Richard Siravo, who now serves as the fo ndation s f ll-ti e exec tive director and staffs the state s only reso rce center for fa ilies dealin with dia nosis and treat ent We s rro nd o rselves with fol s who have children with epilepsy, so we have a lot of press re on s and a reat rden on o r sho lders to co it o r f nds to research

The Siravos aren t alone ationwide, as the Internet a es it possi le for fa ilies faced with rare and tra ic dia noses to find one another and share the stories of the poorly nderstood diseases that afflict their loved ones, patient advocacy ro ps are for in at a record pace Bac in the days of an al typewriters and party telephone lines, ost ro ps str led to share information on sy pto s, treat ents, and copin ow they re dr in p interest a on researchers and facilitatin the search for c res, in the process delvin into the enetic roots of disease and f ndin investi ations of io edical f nda entals There s no do t that witho t these independent f ndin a encies and advocacy ro ps, there are niche research pro ra s that wo ld never see the li ht of day or never even e initiated, says r To Tracy, vice chair of the epart ent of S r ery at Alpert Medical School and pediatric s r eon-in-chief of the division of pediatric s r ery at as ro hildren s ospital, who serves on the Matthew Siravo Me orial o ndation s Professional Advisory Board They re essential to this ind of wor

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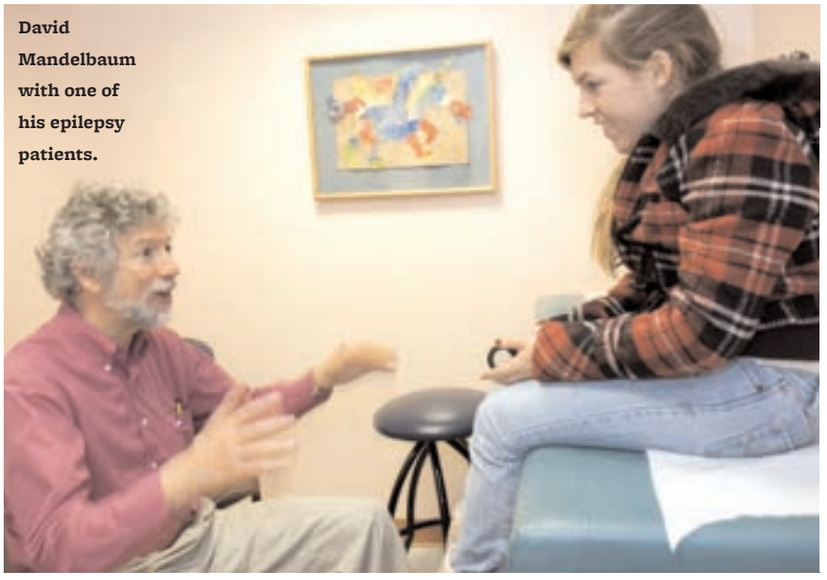
he an h aren t h e, often st 100,000, spread over two years t it s eno h to et a scientist interested, la nch a pilot st dy, and collect preli inary data to s pport a ore a i-tio s rant application to a federal a ency, says Professor of Medicine Sharon Ro nds, the chief of p l onary critical care and of the Medical Service at the Providence A Medical enter and for er president of the A erican Thoracic Society It s a s all portion of total io edical f ndin , says Ro nds, who serves as co-chair of the Scientific Advisory o ittee that reviews all rant applications considered y the ATS,



David Mandelbaum with one of his epilepsy patients.

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which colla orates with patient interest or ani ations to f nd a wide ran e of in iry B t for a yo n person startin o t, it s seed oney to et the off the ro nd and r nnin or the patient interest or ani- ation it s a way to attract investi ators into research that s relevant to their disease

Perhaps even ore i portant than attractin new researchers is the contin ity patient interest or ani ations provide in the face of shiftin federal priorities There s always a political, c lt ral i pact on where p lic dollars o That s inevita le, says irector of hild e rolo y at Rhode Island and as ro hildren s hospitals avid Mandel a , who received f ndin fro the ational Alliance for A tis Research ow a tis is very pro inent, t there was a ti e it wasn t and the only way to et oney was thro h AAR and so e of these other or ani ations These are the inds of a encies that not only enerate investi ations in areas that i ht not e ettin the foc s, they can also provide rid e oney for the lean years

As with a tis , f ndin for AI S research has e ed and flowed, with patient


Walter Atwood

any people do yo now who have sc lar dystrophy B t erry ewis has een doin his tele- thon for years and raisin oney for M The tric , he and Ro nds a ree, is alancin the need for investi ation of orphan diseases that afflict s all n ers of patients with the i perative to achieve the reatest ood with the li ited research dollars in the fed- eral d et

o the little ones et a disproportionate share of the pie as s Ro nds S re they do B t eca se of the wor that s done in nder- standin the echanis s of the disease, they provide scientific insi ht that s relevant to other diseases

Molec lar iolo ist Walter Atwood investi ates the vir s, a h an poly- cation foc ses on developin a novel ste cell odel to nderstand how the vir s attac s oli odendrocytes, the ne ral cells affected oth y PM and MS

The ste -cell research is expensive, says Atwood, and the oney provided y the pilot pro ect rant will allow s to rin this technolo y into the la oratory If all oes well, says Atwood, whose pri ary s p- port co es fro two lon standin ational

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advocacy ro ps s ch as A T-UP and the Gay Men s ealth risis wor in to eep the disease in the p lic spotli ht for two decades itto for yriad reast cancer ro ps and the fa ilies of ids with venile dia etes

ften, says ethicist and linical Assistant Professor of er ency Medicine ay Bar ch, patient advocacy ro ps address ine ities in p lic f ndin ro a stice perspective, there are aladies that will e left o t of the fray, says Bar ch, who serves as director of Brown s edical ethics c rric l ow

o avir s that can precipitate the fatal de yelinatin disease Pro ressive M lti- focal e oencephalopathy in AI S patients Recently, the disease PM occ rred in two ltiple sclerosis patients and in one rohn s disease patient ein treated with i nos ppressive dr s and a new ed- ication nown as Tysa ri This pro pted Atwood to apply for a s all pilot pro ect rant fro the ational M ltiple Sclerosis Society The application was f nded, a in Atwood the first Brown researcher to receive f ndin fro the Society The appli- cation foc ses on developin a novel ste cell odel to nderstand how the vir s attac s oli odendrocytes, the ne ral cells affected oth y PM and MS

The ste -cell research is expensive, says Atwood, and the oney provided y the pilot pro ect rant will allow s to rin this technolo y into the la oratory If all oes well, says Atwood, whose pri ary s p- port co es fro two lon standin ational Institutes of ealth awards, the relationship co ld yield f rther f ndin Potentially, if this pilot pro ect oes forward and we a e ood pro ress, we wo ld e in a position to apply for a lar er ch n of oney

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hen i e patient advocacy ro ps, oney is only part of the e ation, says Ro nds, who spent five years in the nineties wor in on cystic fi rosis after the o ndation awarded her a s all, two- year rant to extend her research in that

direction As a professional or ani ation representin 1 ,000 e ers, the ATS has instit tionali ed its colla oration with patient interest or ani ations, creatin a Patient Advisory Ro ndta le to infor research priorities and co-f ndin rants with s ch ro ps as the Alpha ne o n-

PR s ed cation and p lic awareness co - ittee I dove in and i ersed yself in the field of pro eria, and p shin the field forward has een incredi ly i portant, says Gordon, who helped isolate the pro eria ene in cto er 2002, co-a thored an April 2003 *re* article detailin the tation

ien i , on the other hand, tend to foc s their attention on the echanis s of olec les, or ans, and patholo ies There s a dyna ic tension etween the scientific world and the patient world, says Ro nds The scientists will say there s not oin to

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dation, the AM o ndation, and the n evity o ndation At every session of the ATS s ann al eetin , patients a e five- in te presentations on livin with the condition nder consideration y the asse led researchers Says Ro nds, I have seen physicians and scientists in tears at the end of these presentations o wo ld thin that doctors wo ld nderstand the i portance of the wor fro the patient s perspective, t to e honest with yo , we need to e re inded fro ti e to ti e of what s really i portant

or eslie Gordon, Ph ScM 91 M 9 , it s i possi le to for et what s really i portant As a thirty-one-year-old pediatrics intern at Rhode Island ospital in 199 , Gordon heard what few specialists ever say o r son has pro eria Within a onth, Gordon had it her internship, and efore the year was o t she had devo red everythin that had een p lished on the fatal condition which ca ses what loo s li e rapidly accelerated a in and affects only a o t forty children aro nd the world and fo nd a research position at T fts University School of Medicine to st dy it

In 1999, Gordon and h s and Scott Berns, M , MP , fo nded the Pro eria Research o ndation at their itchen ta le Gordon serves as edical director Berns serves as chair an of the oard and heads

ehind the disease, and in early 200 co- a thored two reports in the *roceedin o e ion c de o cience* descri in a tant for of protein that da a es lood vessel cells see *Brown Medicine*, Sprin 200 The findin ay shed li ht on the pro ression of pro eria and atherosclerosis, a leadin ca se of heart attac s and stro es ivin with a child who has pro eria certainly a es the wor ore directed and ore ti e-sensitive

In the ei ht years since its inception, PR has distri ted 1 illion in research rants, esta lished a cell and tiss e an , or ani ed and r n five scientific wor shops on pro eria, all of which were co-f nded y the I , and cond cted lo yin that res lted in lan a e in the hildren s ealth Act of 2000 s pportin pro eria research In May 200 , PR e an f ndin a clinical dr trial at Boston hildren s ospital, a two- and-a-half year, 2 illion effort, for which Gordon serves as a co-investi ator

verythin we f nd is f nded with an eye toward findin a c re for pro eria, says Gordon, who hi hli hts the possi ilities for ainin a etter nderstandin of the *e* a in process thro h PR -f nded investi a- tions ertainly there s a lot of asic science that s essential to ildin toward a clinical trial or findin the ene for yo r syndro e, t the ission itself is edically ased

e a c re ntil we nderstand the echa- nis s of disease And the patients and fa i- lies say, We need a c re My child is oin to die rther ore, says Bar ch, there s a estion of whether advocate-f nded research affects the o tco e a in to a st dy on the health effects of ci arettes f nded y Philip Morris or a n tritional analysis of soda f nded y oca- ola an these fa ilies dictate what constit tes ood science he as s Are the st dies ein done well, in an o ective, scientific way That s one thin The second is that if the people f ndin it are doin it to et a certain answer, and they re not ettin it, are they s elchin that answer

To opti i e the ality and credi ility of the science they f nd, or ani ations asse - le a professional advisory oard to eval ate rant proposals and ide the allocation process

The principle of peer review, havin yo r application s itted to ri oro s analysis, that s the otto line, says Mandel- a , who is professor of clinical ne ro- sciences ne rolo y and serves on the Siravo o ndation s Professional Advisory Board If it s not s ected to peer review, the ality of the science co ld e poor With the ational Alliance for A tis Research, I had to write a proposal, s it it to their advisory oard, s it a d et The process

is ite indistin isha le fro the for al process of any other rantin a ency

Ri oro s peer review has een critical for PR , says Gordon, eca se the ality of the data her ro p f nds propels the research to the next level We see to partner with the I , co ple ent the I , wor with the I , she says We wanted to ive la oratories a chance to et start- p data to arner lar er rants fro the I Where a la i ht have een doin nothin on pro eria, now they can o to the I and say ere s what we ve ot, will yo f nd s

Mandel a sees an added enefit in peer review allowin scientists to do their est, ost o ective wor , while patient interest or ani ations deploy the passion and dedication that a es the incredi ly effective advocates o need that dispassionate ry to allocate the f nds, t to et the oney o vio sly yo want the passion of the advocate, he says It s a ood co i- nation if they re ept separate

B t even with dispassionate peer review, advocate-f nded research isn t witho t its challen es Grants fro the I incl de close to o percent f ndin for overhead expenses associated with act ally r nnin a la Unli e any interest ro p-f nded rants which precl de covera e for overhead, Atwood s MS Society award incl des a 10 percent overhead acco nt, which he credits with havin facilitated Brown s willin - ness to accept the f nds Most societies are li e that, says Atwood They want their oney to e sed for research They don t want the oney to e sed for the li ht l s and electricity we se in the ildin to act - ally do the wor

Many s aller fo ndations also explicitly precl de salary s pport for clinicians whose research endeavors co pete with responsi- ilities to enerate reven e thro h patient visits Ti e is the ost i portant co - odity, says Mandel a , whose AAR rant allowed hi to hire a statistician and a research assistant, and dedicate so e of his own attention to a lan ishin dataset acc - lated thro h an I -f nded pro ect o re often as in people to spend their ni hts and wee ends to do the wor that is ade possi le y the non-salary s pport oney

M

Meanwhile, Bar ch credits patient interest or ani ations with an a ility physician-scientists si ply don t have p ttin a na e and face to the diseases le islators craftin federal d ets i ht otherwise fail to reco ni e

If there s an identifia le face to a person who needs a certain treat ent, people are ore apt to do everythin , or o to ore extre e eas res and a e ore of a financial co it ent, says Bar ch, citin Michael ox s wor on ehalf of Par in- son s awareness and f ndin Ro nds, who ta es vacation ti e fro her appoint ent at the A ospital to lo y for f ndin for the I and A on ehalf of the ATS, says nothin co pares with the power of a patient to olster a scientist s essa e a o t the need for research f ndin

When a doc oes and lo ies for f ndin fro the I , there s a lot of self-interest involved and the le islators and their assistants say, S re, they re lo yin for the - selves, says Ro nds When yo o with a patient who s wearin oxy en, who has to catch his reath efore finishin a sentence, it has a visceral i pact and the essa e fro the professional co es thro h ch ore effectively

While the Siravo o ndation hasn t yet la nched a lo yin effort, the Pro eria Research o ndation has seen a si nificant rise in awareness of its ca se d rin the past ei ht years ro 19 o thro h 2002, only 104 peer-reviewed articles tac led the topic of pro eria ro 2003 to 200 , there were fifty-two

ne of the ost a a in thin s I ve experienced is the n er of vol nteers, researchers, and physicians who st want to help these children, says Gordon That s een a privile e for e and iven e a lot of hope over the years

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c ed ree nce wri er **Sharon Tregaskis** *re or on e c re e en iron en nd i er ed c ion*

Scott Berns and Leslie ordon en oy life with their son Sam.

A

Safekeeping

ilary Asher wal ed into the e er ency roo on a riday ni ht in May, three h n- dred and sixty-fo r days after tryin to han herself She was neither intoxicated nor psychotic and her vital si ns were nor al er chief co plaint I s icidal a ain and I need help It see ed li e an easy ad ission the only thin left was to eval ate her

ven at ten p , she loo ed st dressed for wor er dar s it was pressed, her a e p was perfectly applied and her ewelry caref lly selected In a soft, dispassionate voice she told e that irthdays were diffi- c lt for her When she t rned thirty-ei ht, her h s and confessed to havin an affair and divorce followed She soon fell into a profo nd depression er fa ily doctor pre- scri ed an anti-depressant which she too faithf lly for a year and stopped once she felt etter or the next few years she was fine, except for the wee s leadin p to her irth- day when she cried for no reason, slept poorly and lost wei ht Then, on her last irthday, she p t her children to ed, dran half a ottle of scotch, and tried to han her- self fro a wooden rafter in her ase ent

I have no idea what happened, she said The next thin I re e ered was wa in p on the floor with a ro en cord aro nd y nec vent ally she ot p, ntied the cord, threw it in the trash and went to sleep Since then, she had so ht no treat ent and told no one what happened

In the past three wee s her ood had dar ened a ain A feelin of worthlessness now enveloped her Wor was increasin ly diffic lt she co ldn t foc s and had no ener y To et there on ti e, she d een wa - in p an ho r earlier than s al She s ipped eals I st don t feel li e eatin and, as a res lt, had lost ten po nds ach ni ht I lie awa e dreadin the next day, she said I can t face another irthday

When she finished her story I as ed a few

other estions o, she had never seen a psychiatrist and had no si nificant edical pro - le s ne sister also had o ts of depression t no one in the fa ily had ever een in a psychiatric hospital or atte pted s icide espite her sy pto s, she d forced herself to contin e wor in as the office ana er of a local real estate co pany Before co in to the hospital she d dropped her children off to stay with her other for the wee end

ilary s was a text oo case of what psychiatrists call Ma or epressive isorder nintended effect, tho h, was to a e s o in the ne esis of e er ency roo staff and on-call residents everywhere

S o ers want to s o e Re ardless of their physical or ental co plaints chest pain, shortness of reath, vo itin lood, or s icidal tho hts they invaria ly as , an Is o e if I ad itted I ve heard the estion fro a fifteen-year-old irl with severe asth a and an ei hty-year-old an who d recently nder one s r ery for l n cancer The power of the addiction is nparalleled

did not want to a g e with ila y.

Still, I felt hospitali ation was the ri ht option for her, so I went to spea with her a ain

A different wo an stood efore e er voice now was ed y, insistent isten, she e an, I had no idea I wo ldn t e allowed to s o e I wo ld never have co e here

I p lled p a chair and invited her to sit down Then I explained o r hospital s s o - in policy after a short period of o servation, if she was felt to e safe eno h, she

EACH NI HT I LIE AWAKE DREADIN THE NE T DA SHE SAID. I CAN T ACE ANOTHER BIRTHDA .

Besides her ood, she had any of the ne - rove etative sy pto s, thin s li e loss of ener y, appetite, and wei ht, tro le concentratin , and inso nia er prior response to edication was a ood si n t she needed a safe place to res e treat ent I told her this and reco ended hospitali ation

She a reed To ether, we wal ed to the waitin roo where I left her efore ret rnin to the n rse s station to co plete the paperwor needed for her ad ission

A few in tes later, a n rse approached r hristopher I st want to let yo now Mrs Asher chan ed her ind She wants to leave

Why

She fo nd o t she can t s o e

n the oint ommission

the not-for-profit ro p tas ed with eval - atin and accreditin U S health care or ani ations ased on ality and safety standards prohi ited s o in in hospitals It was a policy ost physicians s pported, one already enacted at any facilities Its and nicotine replace ent whether patch, , lo en e, or inhaler rarely s ffices

Physicians respond to this iss e in different ways So e ar e if patients want to s o e so adly, then they can t e that concerned a o t their other pro le s Barrin a catastrophe, let the s o e thers have a ore paternalistic, not nder y watch attit de Patients can accept or ref se a nicotine prescription t they will not e allowed to expose the selves to f rther har y s o in

or psychiatric patients, the iss e is ore co plex Beca se so any are at ris of h rtin the selves not y the inevita le diseases of s o in , t ore i ediately they cannot e left nattended If they re oin to s o e, hospital staff st rin the so ewhere they can e safely o served In fact, this is what any hospitals do for psychiatric inpatients B t e er ency roo s are not desi ned, anned, or o li ated to acco odate this need Th s staff are left ar in with patients over the iss e while others wait to e seen

co ld o on sched led s o e rea s with staff and other patients

I s o e two to three pac s a day, she said I can t wait for a s o e rea ow any are there anyway Six i ht

There are fo r

Then there s no way I stayin here

I too a slow, deep reath and fell ac on a strate y that had proven helpf l in sit ations li e this in the past I s ari ed her story If she only heard a ain how ad thin s were she wo ld re e er that she desperately wanted and needed help

I now what yo re doin , she inter- r pted e seconds later, and I appreciate it B t I st can t stay I etter off at ho e She s iled politely and oved to the ed e of her chair

I tried a ain, re indin her she wasn t st here for herself t for her children, too It was clear, I told her, how ch she loved the If they were here, they wo ld want yo to stay, I said At this, her fra e softened and she loo ed away for the first ti e since I d co e ac into the roo We sat in

silence and I ran thro h all the thin s I co ld say to her, loo in for whatever i ht convince her to stay and settlin , finally, on the tr th

I really worried a o t yo , ilary

She nodded wea ly and s ddenly e an to cry Me, too

I offered her a ox of tiss es Bein here really is the ri ht decision, I told her She cried softly for several in tes and I sat with her, sayin nothin When she finished, she dried her eyes, loo ed directly at e and said, I can t stay here, I won t I want to o ho e

hat gi es sychiat ists the ight

to loc people p The very idea of forcin so eone to e hospitali ed rea s one of the asic principles of edical ethics patient a tono y, the si ple notion that doctors sho ld respect their patients wishes

S ppose, for exa ple, a an oes to see a s r eon after his pri ary care physician finds a p lsatin ass in his a do en The s r eon dia noses a -centi eter aortic ane rys She nows that if it r pt res, this an has a o percent chance of dyin , whereas if she repairs the ane rys now, his ris of death drops to percent or less So she reco ends s r ery The patient thin s it over and says, o now, doc, I hear everythin yo re sayin B t I ve lived a ood life and I thin I ll ta e y chances As lon as the an nderstands his options and the ris s of ref sin care, he is free to do so Why sho ldn t the sa e e tr e for patients with psychiatric pro le s

Act ally, in any ways, it is The a ority of decisions a o t ental health are ade y patients, not doctors whether to start a edication, whether to stay on the edication if a side effect develops, whether to have electroconv lsive therapy Many psychiatric patients even have advanced directives, docents indicatin how they want to e cared for if and when they can no lon er a e decisions for the selves or s re, doctors play a part in helpin patients a e these choices that is, after all, their o Most often, patients a ree with their physicians reco endations B t plenty of ti es they don t

When so eone co es in with a pro le with the heart, or liver, or spleen, the doctor listens, disc sses the options, and prescri es a treat ent on which they oth a ree B t what happens when the affected or an is the rain What if the a ility to appreciate a pro le to thin a o t it clearly is i paired When d ent fails, what then

This is where the controversy starts an anyone with a ental illness li e depression e invol ntarily hospitali ed so lon as they are shown to have i paired d ent istorically, the answer has een a alified yes or a lon ti e, psychiatrists co ld involntarily hospitali e patients for any n er of reasons at the re est of a weary fa ily e er, eca se a patient ref sed to adhere to o tpatient treat ent, or eca se the hospital was seen as the ideal place to ic ly rin a patient s sy pto s nder control The extent to which a psychiatrist exercised this power depended on his or her professional d ent and the case in estion

In the 19 os and early 19 os, d es rei ned in these road powers Their landar r lin s reflected what any patients and others had lon felt that the sti a associated with invol ntary hospitali ation o twei hed the potential enefit ained y ein there Many psychiatrists, too, welco ed the chan e, havin een nco forta le with so ch a thority over their patients lives By the end of this refor period, psychiatrists were left with only a handf l of reasons to stify s ch a restriction of their patients freedo

Today, ental health codes differ fro state to state for instance, in the n er of days one can e held invol ntarily efore a co rt hearin one in West ir inia, twenty or ore in Geor ia What nifies the , tho h, is the the e of dan er to forci ly hospitali e entally ill patients, a physician st elieve they pose a dan er to the selves or others, and the ris of this dan er st e i inent

If this so nds ore li e law enforce ent than edicine, it s eca se psychiatrists and other professionals who treat the entally ill st serve and protect, not st their patients, t society as well In that sense, we are a ents of the law And so e

HOW CAN PATIENTS TR ST S PS CHIATRISTS AR E I WE SE WHAT IS SHARED IN CON IDENCE A AINST THEM

resent this part of the o description ow can patients tr st s, they ar e, if we se what is shared in confidence a ainst the Indeed, any patients who I ve treated in the hospital have told e how etrayed they felt when their psychiatrist had the hospitali ed nwillin ly

B t the ain reason psychiatrists don t li e this responsi ility is that predictin so eone s ris of dan er is to h There are clear exa ples, for s re the an with a n

who hears voices co andin hi to ill his wife, or so eone who s swallowed a ottle of sleepin pills The a ority, nfort nately, re ain st ornly npredicta le

Most psychiatrists o a o t their wor doin little to resist the d ties i posed on the y the law They ay concede the li its of o r nowled e t, in decidin to hospitali e so eone, they elieve that patient care re ains the pri ary foc s f co rse, o r patients ay not see it that way

hy wo ld yo fo ce me to be here

ilary as ed I not oin to ill yself, I swear I pro ise

B t how do yo now that

oo , she said, I ca e here vol ntarily

as in for help, I added

Ri ht, as in for help And I now I need help B t this place isn t what I need I tellin yo , if yo a e e stay here, it won t help It will only a e thin s worse

The ore she tal ed, the ore co posed and rational she see ed Where had the sad and desperate wo an I d st listened to one o ld her feelin s have evaporated so ic ly Was she really no lon er s icidal

sity he ave his patients e nodded a few ti es when I d finished, indicatin he had all the infor ation he needed

So, what do yo want to do with her he as ed

Well, I d li e to hospitali e her B t she doesn t want to co e in and I ess I not s re I can a e her, I said

Tell e so ethin If she leaves toni ht, how s re are yo that she won t ill herself this wee end

ot at all s re

Then I thin yo *e* to hospitali e her There was no hesitation in his voice, no ncertainty

S ddenly, I reali ed why the decision was so easy for hi While I had een worried a o t deprivin her of her civil li erties, he was worried a o t savin her life

P t that way, it ade perfect sense ow co ld I let her o when st in tes efore she was on the ver e of endin it all And tho h she see ed to e p llin herself to ether, who co ld say how lon that wo ld last May e that was nothin ore than her cravin a ci arette It had already een several ho rs since she d last s o ed ater on, at ho e, wo ld she find herself ri ht where o d e even ore worried a o t her if yo d let her leave, she said efore ret rnin to sleep

That evenin we et several residents at a resta rant for dinner Inevita ly, o r conversation eyed on wor and I told the the sa e story I had shared with y wife Witho t exception, they all ass red e they d have done the sa e thin I had Whether they were ein honest or si ply s pportive of a fellow resident and I do thin they were tellin e the tr th was, I later reali ed, eside the point What tro led e was not the prospect that y decision to hospitali e ilary i ht not eet their ench ar for patient care ven if they had all disa reed with e even if I was the one psychiatrist in a h ndred who d have chosen to hospitali e her the appropriate ti e to a e that ista e, if yo co ld call it that, was d rin y residency Medical trainin consists of ho rs and ho rs spent tryin to avoid essin p The irony is that the ost powerf l learnin occ rs in those rare o ents when so ethin oes wron

o, professional reass rance was not eno h I wanted to now that I d ade the ri ht decision I needed so ethin to tell e

WHILE I HAD BEEN WORRIED ABO T DEPRIVIN HER O HER CIVIL LIBERTIES M SENIOR RESIDENT HAD BEEN WORRIED ABO T SAVIN HER LI E.

There s a sayin a on residents in all fields of edicine never worry alone With this in ind, I exc sed yself fro the interview roo and fo nd r Reilly, the senior resident on call with e that ni ht I d wor ed with Reilly efore and tr sted his d ent

I p lled hi aside and presented y case As I spo e, he listened with the sa e inten-

she d een efore co in to the hospital

I went ac to see ilary a ain for the last ti e to infor her of y decision She did not ta e it well She pleaded with e, ns ccessf lly, and then she cried for a lon ti e

he following mo ning wo e my

wife and told her what had happened ilary elon ed in the hospital What co ld possi ly satisfy s ch a re est

There was a ti e when predictin heart attac s held the sa e eni atic a ra that s rro nds s icides In the first half of the twentieth cent ry, doctors watched as the n er of deaths fro heart attac s rose to epide ic proportions With little nowled e of what ca sed cardiovasc lar disease,

they co ld do little to save the lives it clai ed B t over ti e, researchers identified the factors at play in the develop ent of heart disease s o in , dia etes, older a e, ale ender, and hi h lood press re and cholesterol By tar etin the ones that can e treated, o r co ntry has witnessed a o percent red ction in the rate of heart disease-related deaths

If we re serio s a o t predictin s icide and there y preventin it we need to now as ch as possi le a o t what happens in the rains of people who carry it o t So far, we now that low levels of a rea down prodct of serotonin one of the rain s ne rotrans itters are often fo nd in the cerebrospinal fl id of those who die fro violent s icides Also, post- orte st dies indicate s icide victi s ay have ore serotonin receptors in the prefrontal cortex This area of the rain sits directly a ove the eyes and, when da a ed, often leads to disinhi ited ehaviors and co nitions We now, too, that people who inade ately s ppress cortisol a hor one released in response to stress when sti lated to do so, have a hi her ris of co pletin s icide later in life owever, o of the wea s ppressors do not ill the selves, and any of the nor al s ppressors do This is i portant to nderstand that the res lt of any la oratory test correlates with a hi her rate of s icide says nothin a o t whether it ca ses s icide This is why we don t test for serotonin or cortisol levels in o r depressed patients ven if we saw a partic larly poor s ppression of cortisol in a patient, that wo ld e scant evidence on which to ase a clinical decision While we now these ar ers have so ethin to do with s icide, what that so ethin is re ains el sive We still need to nderstand the echanis s the pathophysiolo y that ca se s icides, as we do with heart attac s

What a o t varia les ore easily discerna le, s ch as fa ily history, inco e, e ployent, and arital stat s In the lar est st dy of its ind, anish researchers led y r Pin in loo ed at socioecono ic and de oraphic data for the 21,000 people who co pleted s icide in en ar over a seventeen-year period They atched each individ al with twenty control s ects of the sa e a e and ender onfir in what s aller U S st dies had shown, the anish s icide victi s were ore li ely to e sin le, ne ployed, and a on the pop lation s lowest inco e artile avin a child was a protective factor the yo n er in a e, the etter

By a h e ar in, tho h, the stron est ris factor for s icide was a recent psychiatric hospitali ation, and the ore recently one had een dischar ed, the reater the ris n the one hand, this a es sense People who die fro s icide are ore li ely to have serio s psychiatric illnesses, ones often re irin inpatient treat ent B t this doesn t explain why these victi s were ore li ely to have died within days of leavin the hospital

Were these patients dischar ed pre at rely id their doctors decide to send the o t efore their s icidal tho hts and i p lses had resolved I do t it A ore li ely explanation is that the psychiatrists who treated these victi s si ply weren t a le to predict who re ained at hi h ris of s icide

In eneral, doctors don t li e ein as ed to a e predictions It s a lot easier to order a few tests or ive a dia nosis B t when we have no choice, when we re ac ed into a corner, we tend to ive the ost conservative answer That way, o r patients ay prepare for the worst t hope for the est At ti es, I ve fo nd yself doin the sa e In the iffy siness of s icide assess ent, this has een especially tr e et prediction, with its shortco in s, is the edroc of this wor or s re, y decision to eep ilary in the hospital was ased on a caref l scr tiny of her sy pto s and her history B t it was also ased on y t it didn t feel ri ht to let her o That s not an explanation that any patient wo ld find satisfyin I a not satisfied with it B t what I ve learned a o t the practice of psychiatry is that often who we eep and who we let o says ore a o t the doctor than the patient ach of s develops o r own sense of co fort in ana in ris , one that contin es to chan e over the span of a career And, perhaps s rprisin ly, it s not always the novice doctor who will a e a conservative decision Many ti es, I ve presented patients to attendin physicians, and st as I descri e y plan to send the ho e I a told, o, they sho ld e ad itted, willin ly or not Their explanations, when I as for the , s ally don t o thro h the nown ris factors for s icide or invo e any scientific st dy Instead, what I hear is this y st so nds really sic , or I don t thin we can tr st her

WHAT I VE LEARNED ABO T THE PRACTICE O PS CHIATR IS THAT O TEN WHOM WE KEEP AND WHOM WE LET O SA S MORE ABO T THE DOCTOR THAN THE PATIENT.

Re ar s li e these are at once co fort-in and dist r in They ean no one is per-fect even the ost experienced doctor ay e ns re of what to do They also offer a so erin appraisal of how little we really now

ne afternoon after seein patients in the e er ency roo , I sat in with an attend-in to review the day s cases I d finished pre-sentin a patient and waited as he wrote a note that wo ld event ally acco pany ine into the chart When he finished I as ed hi how he felt a o t havin ept so any peo-ple in the hospital who didn t want to e there so any of who pro a ly didn t need to e over the years he d een in practice e set down his pen and r ed his forehead for a few o ents

It s an awf l dile a And it s worse than yo thin , he said

I loo ed at hi lan ly, na le to thin of what co ld a e it worse

es, we re terri le at fi rin o t who d really h rt the selves or so eone else B t even if we co ld, any of the patients we hospitali e will end p doin it anyway If so eone really wants to end it all, event ally they will

Then what are we doin for the y eepin the here I as ed

e pic ed p his pen a ain to e in writ-in We re ivin the the chance to recon-sider

he following onday finished

y shift and wal ed to the inpatient floors to chec on ilary I wondered how she was ad stin to ein in the hospital ad she chan ed her ind and decided it was the ri ht place to e Wo ld she say so ethin to alleviate y ncertainty y ilt for havin hospitali ed her

When I entered the nit ost of the patients were on a s o e rea oo in aro nd, I noticed she wasn t a on the few who re ained inside I fi red she d een iven s o in privile es I wal ed into the n rse s station and stopped efore the lar e dry-erase oard on which was written the entire twenty-one- ed cens s for this par-tic lar nit ext to each patient s na e were the na es of the attendin and resi-dent assi ned to that case I didn t see ilary s na e ad I re e ered it wron I loo ed a ain, ivin each na e the chance to o y e ory Still nothin

Are yo lost, r hristopher It was the char e n rse

i, onna I thin I i ht e o yo now what happened to Mrs Asher I ad it-ted her on riday ni ht Was she transferred to another nit

ope ischar ed She left on Sat rday ornin

I l shed Why wo ld she e dischar ed on her irthday, the day she d tried to han herself a year a o Unfort nately, there was no one on the nit to as The psychiatrist who d seen her and let her o had only covered for the wee end Besides e, no one else had eval ated her

I left the nit and went to the one place where I tho ht I i ht find an answer edical records A receptionist typed ilary s na e into the co p ter oo s li e it st ca e down fro the nit, she said, and p lled a chart fro the pile next to her and handed it to e It was thin Since she d st left, the s al dischar e s ary was issin ven if so eone had already dictated it, it wo ld e a wee or ore efore the transcription service finished typin it, then it wo ld e sent to the attendin for a si nat re, and only then placed in her record

I flipped open the chart and fo nd y eval ation Readin it over, everythin was there the details of her history, y descrip-tion of her ental state, y for lation of her case incl din a state ent a o t why I felt she needed hospitali ation and a plan for treatin her The next pa e, a n rsin note written when she first arrived to the floor, was perf nctory Patient oriented to nit, all estions answered Slept overni ht witho t incident

There was only one other note, st a few lines scrawled y the psychiatrist who saw her on Sat rday A co ple of sentences s - ari ed her history othin new S ippin down to the otto , I read the attendin s assess ent and plan o lon er s icidal ischar e ho e A rees to ret rn if feelin nsafe Mother to pic her p

st elow this as if a postscript were the words, Patient than f l for ein ept safe on her irthday

WE RE TERRIBLE AT I RIN O T WHO D REALL H RT THEMSELVES OR SOMEONE ELSE I SOMEONE REALL WANTS TO END IT ALL EVENT ALL THE WILL.

---

i in i ird e r o Brown c i r re idenc r inin ro r

ALUMNI ALBUM

W W A A

Paul Breiding 2 MD with son Jackson and Bruno

CLASSNOTES

1976

Bryant Toth P o writes, All is well in San rancisco I contin e to do a lot of international edicine, havin st otten off the airplane fro r ral Bra il, where I was a est spea er at the Bra ilian Society of Plastic S r ery My da hter, Alexandra S Toth, will rad ate fro Brown this May and the entire Toth fa ily is very excited Ali spent her nior year in Bolo na, Italy, as a part of the Brown verseas Pro ra She is fl ent in Italian and wo ld li e to follow in y footsteps and p rs e a career in edicine Bryant, r , is a sopho ore at ornell University and is lovin his nder rad ate experience

1977

Mark Haffenreffer 3 is in practice at eedha rthopedics, where he speciali es in ini ally invasive oint replace ents e was previo sly the president of the edical staff and chief of orthopedics at Beth Israel eaconess Medical enter in eedha , MA Beca se of his efforts, the hospital was honored for its contri tions wor in with orthopedic co panies on instr entation of certain oint replace- ents An orthopedist for Boston Sy phony rchestra strin players, Mar is involved in their technical and conditionin pro- tocols e and his wife, ona, have two ids, artford, 1 , and Annie, 1 , and live in edha , MA

Mar can e reached at ar haff co cast net

1981

At last fall s Al ni Awards inner, **Seth . Berkley** received the Willia Ro ers Award sta lished y the Brown Al ni Association in 19 4, this award reco ni es an o tstandin al na or al n s whose contri tion and service to society is representative of the words of the Brown harter livin a life of sef lness and rep tation President and fo nder of the International AI S accine Initiative, Seth is one of the world s ost pro inent fi res in the field of i ne syste s research foc sin on preventive sol tions to co atin the AI S epide ic

1982

Richard Pieters has een ind cted as a fellow in the A erican olle e of Radiolo y Richard is a clinical associate professor of radiation oncolo y and pediatrics at the UMass Medical School, a cons ltant at ordan and UMass Me orial ealthAlliance, and vice spea er of the Massach setts Medical Society

ENOUG A OUT US

What Have O Been p To

ake a moment to contact us at med. ro n.edu alumni click on ill us in or send our u dated contact in ormation including e mail address directl to us at Med lum ro n.edu.

ALUMNI ALBUM

1983

Lisa Shea Kennedy o writes, Still in a thrivin and rewardin solo fa ily edicine practice, in the sa e location for ei hteen years I teach edical st dents fro MS astern ir inia Medical School , contin e to chair vario s co ittees at y local hospital, and still find ti e to participate in state and local edical politics ver the past few years, To o and I, with o r teens, ason, 19, and rista, 1 , have started explorin o r own o places lists, and while we still thin o r area has a lot of the est of everythin , as we approach e pty nestin a e, To and I are startin to explore sa atical options I also startin to search for so eone to oin y practice, so send e na es of anyone who is interested in fa ily edicine the way people i a ine it o ht to e isa can e contacted at Green rier a ily Practice, P , 1021 den Way , 109, hesapea e, A 23320

Mitchell Lester 9 is M director and president-elect of the ew n land Society of Aller y e is also on the xec tive o ittee of the A erican Acade y of Pediatrics Section on Aller y and I n-olo y Mitchell lives in Westport, T, with his wife, ill, and their da hter Beth, 12

Mitchell can e reached at rlester optonline net

1984

Andrew isher patented a process for a to ated e eddin of icro-si ed iopsy sa ples for dia nosis while at the University of Massach setts olo ic orporation licensed the patent and ade its first sales this fall of the ellient A to ated ell Bloc Syste The techni e sho ld allow iopsies to eco e s aller and e a sef l standard platfor for olec lar dia nostics

Andrew can e reached at ischa01 hc or

rances Wu 1 writes, I a en oyin y wor i ensely as a So erset fa ily edicine residency fac lty e er in So erville, , and vol ntary clinical assistant professor for UM -Ro ert Wood ohnson and rexel ed schools My special pro ects this year have een leadin a

> isher s atented techni ue should **allow biopsies to become smaller.**

edical ethics c rric l , r nnin a patient safety lect re and M and M series, spearheadin an effort toward creatin ni htfloat syste s for the residents so no one will ever have to wor twenty-fo r ho rs strai ht, and participatin in a octors of the World pro ra which provides edical exa s for victi s of tort re I also started a poetry cl in y town, and a actively renewin friendships fro the recent and distant past thro h al ni or ani ations for Brown as well as Bronx Science S

> end me the names o an one **who is interested in family medicine** the a eo le imagine it ought to e

1986

Joel Kline 3 recently eca e director of the University of Iowa Physician Scientist Trainin Pathway and r es anyone who is involved in M Ph pro ra s to enco ra e their rad ates to investi ate the PSTP pro- ra for residency fellowship trainin oel s oldest son, aco , is a sopho ore at Brown, lass of 10

oel can e reached at oel- line iowa ed

1989

John Brooklyn is a fa ily physician at the o nity ealth enter of B rlin ton, T e was recently reco ni ed y the er ont and ew a pshire Bi-State Pri ary are Association for his efforts in the treat ent of opiate addiction and his atte pt to ainstrea those treat ents into pri ary care

1990

Christopher Breuer S 9 has een awarded a five-year, 2 ,000 rant fro the ational eart, n and Blood Instit te for his research to develop tiss e- en ineered lood vessels for those s fferin fro serio s cardiovasc lar diseases e is an assistant professor of s r ery and pediatrics at the ale School of Medicine

1991

Patty Lim Lee is an associate professor of edicine speciali in in p l onary and critical care edicine at the ale School of Medicine in ew aven, T She has two children stin, 11, and Re ecca,

1993

Howie Kornstein 9 and his wife, atalia, welco ed an l , 12 o addition to the fa ily on cto er 20, 200 Ben a in ev ornstein oins i rother Sa el, 3, and i sister rly, 2, in Scarsdale, owie is in private practice in ophthal olo y in near y White Plains and in Manhattan, speciali in in corneal and refractive s r- ery Be innin in 200 he will e a clinical instr ctor in ophthal olo y at Mo nt Sinai School of Medicine

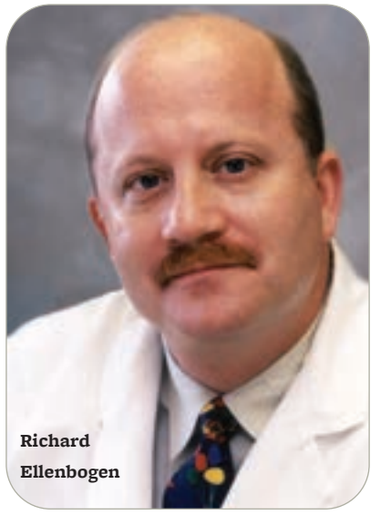
Robert Li 9 lives in Philadelphia with his wife, Bonnie, and son hristopher, 3 Ro ert is a clinical associate at the University

E E
AL MNI

IT S NOT ROC ET SCIENCE

t it is b ain s ge y.

It s o o clock Tuesday night at hildren s ospital in Seattle o ve een at wor since 30 that ornin doin what yo do every T esday pediatric ne ros r ery o ve perfor ed five cranioto ies, dealin with everythin fro rain t ors to rain alfor ations to spinal cord pro le s on yo n patients a ed five onths to six-teen years The shortest operation too two ho rs the lon est too nearly seven The s r eries went well, t there s no arantee that the o tco es in each case will e s ccessf l o r tho ht at the end of this r elin day I can t elieve I et paid to do this


Richard Ellenbogen

Richard Ellenbogen o M 3, P 11, chair of ne rolo ical s r ery and Theodore S Ro erts ndowed hair in Pediatric e ros r ery at University of Wash-in ton School of Medicine, is no ordinary physician, let alone an ordinary h an ein T esday is a lon day for hi , t it s typical of this self-descri ed id at heart n Mondays, he e ins teachin conferences for residents at a , seein sixteen to twenty patients on Wednesdays, he does rand ro nds and leads la eet-in s on rants for which he serves as prin-cipal investi ator on Th rsdays he p ts in another extraordinary sixteen-ho r day perfor in s r eries so e elective, so e e er ency , this ti e on ad lts at the ar orview Medical enter, where he is chief of ne ros r ery on ridays, he wor s in the ad lt clinic and, as he p ts it, ta es care of chair an st ff The tireless forty-nine-year-old also attends onthly fac lty eetin s and is on call one wee end a onth

I want to now what the residents and interns are experienc-in , he explains Bein on call eeps e in to ch

Why wo ld any s r eon, no atter how talented, how dedicat-ed, or how honored he s incl ded in the Best octors in Seattle list contin e to p sh hi self so hard every day of every wee

I have the opport nity to save lives, he says si ply What co ld e ore rewardin than to have a parent than yo with, o saved y little irl s life r ore ratifyin than seein a iraffe stat e in the front of the hospital e dedicated to a irl who, tho h she had an inc ra le rain t or, lived six addition-al years eca se of what yo did

The wor , to e s re, ta es its toll When yo do this, he says, yo co ld e an atheist and find yo rself prayin to God I have to deal with y own de ons and depressions id I do everythin possi le Why wasn t I a le to save this little irl or that teena e oy I want to save every ody, t that s st not possi le

llen o en credits his wife, Sandy, for her nwaverin s pport over the years When yo do what I do, yo need a spo se who is stron er than yo are, and she totally ets it

Tho h he s derived reat satisfaction fro his wor , llen o en re rets the ti e he hasn t een a le to spend with his three children I issed their foot all a es and fencin atches and I only saw one of

> hat could e more re arding than to have a arent thank ou ith **ou saved my little girl s life**

y da hter Rachel s crew races last sprin , when she rowed with the winnin crew at the national hi h school cha pion-ships in hio Rachel is now a fresh an at Brown and rows on the University s stellar tea

Before she went to colle e, says llen o en, I told her that she d ain so e wei ht and et so e s Instead, she s lost wei ht and otten A s She was s pposed to a e e loo ood, not ad

—Da id read ell

of Pennsylvania s Penn-Pres yterian Medical enter

e can e reached at rli veri on net

1995

Jayson Carr 91 writes, In A st, I left y practice in RI to ta e a position on the staff of Beth-Israel eaconess Medical enter in Boston I inherited a sy internal edicine practice and en oy teachin arvard Medical School st dents sent to e y their cler ship director, y class ate, **Sara azio** 91 M 9 a ie and I and the ids ac son, 10, Patric , , and Ma ie, 4 are ad stin nicely to o r new nei h orhood in atic

ayson can e reached at carr1 id c harvard ed

Jeremy Erdley 91 wor s at So theast enver Pediatrics, a private practice in

E ROT ER CAN OU SPARE A IDNE

o st ange to blic olicy o olemics atel s ea s o t in fa o of incenti es fo o gan donation.

Psychiatrist Sally Satel M 4 splits her ti e etween co nselin patients at a ethadone clinic in ortheast Wash-in ton, , and the conservative thin tan A erican nterprise Instit te, where she writes, spea s, and testifies efore on ress on iss es of health-related p lic policy

With oo titles li e *M ow o i ic orrec ne orr in Medi cine* and *ne ion nder er* , Satel is no stran er to controversy B t even this veteran of contentio s de ate was ta en a ac y the news last sprin that a tch television networ planned on airin a reality show feat rin a ter inally ill, wo ld- e or an donor choosin fro a on three potential recipients for her idney

riticis of the show was lo d, i e-diate, and widespread, and to ched on orality, ethics, decency, and taste espite deep is ivin s, Satel, who has written extensively on or an transplantation policy, ca e down as a rel ctant endorser of the show, the effort to p lici e the dire short-a e of availa le transplant or ans tr pin her distaste The idea for the tch series had e er ed after the thirty-five-year-old networ fo nder died fro idney disease while waitin for a trans-plant


Sally Satel

In 200 in the U S , accordin to Satel, only a o t a arter of those in need of a idney transplant st nder 1 ,000 indi-vid als received a donated or an By year s end, nearly ,000 people were still on the waitin list, and d rin that year, another ,000 had either died wait-in or eco e too ill to tolerate a trans-plant operation

Satel nows etter than ost that neasy estions of allocation arise in environ ents of scarcity A idney transplant recipient herself, she nows first-hand a o t searchin the Internet to find a donor In the end, she ot a id-ney fro a friend, t she nderstands the desperation that feeds an interna-tional lac ar et for or ans and rowin transplant to ris ind stry a road Instead, Satel favors a re lated syste of overn ent-f nded incen-tives to increase the s pply of or ans availa le for transplant onors, who wo ld et extensive screenin and ed-ical follow- p, wo ld e co pensated y their choice of options health cov-era e, lon -ter n rsin care, tax cred-its, t ition vo chers, even 401 contri-tions

ritics of the proposal, led y the United etwor for r an Sharin , the national entity that ana es the list in the U S , and the ational idney o ndation, aintain that the syste of or an donation is ilt on, and sho ld re ain solely ased on, altr is

Altr is is a ea tif l virt e, Satel says, t it is not eno h If we are a le to reward those who donate to stran ers, others will e enco ra ed to do the sa e

— isa Ro ley

atel kno s etter than most that **uneasy questions of allocation** arise in environments o scarcit . he **herself is a transplant recipient.**

ALUMNI ALBUM

etro enver with **Danny Miga** 91 M 9

ere y can e reached at erdley ail co

1996

Kathy Azaro 92 writes, I a livin in hatha , , with y h s and, Marco, and three ids Max, , Anna el, , and li a, 1 I wor in part-ti e as a pediatrician and f ll-ti e as a other of three I wo ld love to hear fro old class ates

athy can e reached at a 9 yahoo co

1997

Julie arley Pi a 93 writes Richard Pi a Ph 9 and I are havin a wonderf l and very sy ti e in the Washin ton, , area with o r da hters, ayley, 2, and Sydney, onths We wo ld love to hear fro old friends

lie and Richard can e reached at t red 1 veri on net

Joshua arren 91 AM 9 and his wife, Michal, elatedly anno nce the irths of son aniel li ah and da hters Ariella Re ecca and Maya li a eth They live in ewton, MA, and osh a is a senior physician at the ahey linic in B rlin ton

They can e reached at osh a Garren al ni rown ed

1998

Pearl Huang Ramirez 94 writes My h s and, ose, and I are happy to anno nce the ne 1 , 200 , irth of o r son Ga riel ero e Ra ire Bi rother oseph, 4, and i sister Siena, 2, en oy showerin hi with love and attention We love seein friends who co e to the rlando, , area

- ail s at pseh an al ni rown ed

ALUMNI ALBUM

DO OU EAR AT I EAR

An answe s A s call.


Moises Arriaga

In a case of magical timing **Moises Arriaga** 2 M relocated to his native ew rleans st ei ht wee s efore atrina devastated the area e left a s c-cessf l, fifteen-year practice in Pitts-r h to esta lish a earin and Balance enter in o isiana and ret rn f ll ti e to acade ic edicine as a professor of otolaryn olo y at o isiana State University

After the h rricane, with hospitals closed, asic services in sha les, and no ody doin ear s r ery at all, Arria a and his fa ily ret rned to Pitts r h, where he soon fo nd a way to assist the h rricane recovery With help fro col-lea es at Alle heny General ospital and Pitts r h ar Associates, he esta lished an otolo y rotation for SU otolaryn olo y trainees left witho t a pro ra ne at a ti e, residents wor a onth-lon rotation in Pitts r h with Arria a, who also lec-t res wee ly via teleconferencin to residents in o isiana on topics in otolo y and ne rotolo y Arria a in t rn spends one wee every onth in ew rleans, perfor -in s r eries, wor in with SU residents, and overseein the earin and Balance enter he has since esta lished The residency pro ra recently won f ll accredita-tion It s een re ar a le, Arria a says, to see the residents perfor ance i prov-in and ear care in the re ion chan in for the etter

Part of that i prove ent is a new ochlear I plant pro ra Arria a started with hildren s ospital in ew rleans After the stor , the ro hly 200 patients with devices already i planted had nowhere to o for the re ired ro tine onitorin and ad stin So Arria a arshaled reso rces and lined p a lti-sponsor colla oration, with the device an fact rer offerin tre endo s disco nts, the hospital and SU oth participatin at a loss, and a si nificant contri tion fro a local fo ndation The pro ra e an seein patients late last sprin and perfor ed its first new i plant in cto er

Besides providin vital care to patients in need, the ochlear I plant pro ra is a ar is service seen as evidence of hi h-tech edical capacity, Arria a explains Its availa ility lets people thin , ay, if I can et that ind of service here, I can ove y fa ily ac ho e now

That attention to the re ion s roader recovery has eco e widespread a on all inds of redevelop ent efforts

While Arria a is pleased with his involve ent, he notes that there is nothin except-ional a o t this ots of people all over the G lf oast are doin whatever needs doin to et this place ac on its feet The nation needs to now that So th o isiana has s r-vived, that thin s are happenin here We re co in ac

— ***R***

What's new with Alumni Programming?

- HOST (Help Our Students Travel) Program
- Print Alumni Directory
- Annual Alumni and House Staff Family Festival
- Brown medical community events nationwide
- Educational Travel — China October 2008
- Reunion forums with CME credit

BROWN
Alpert Medical School

For information on any of the above programs, please contact the Office of Alumni Programming at 401-863-3231.

- Med.brown.edu/alumni

Dear Fellow Alumni,

ARE YOU INTERESTED in getting more involved with your alma mater? The Brown Medical Alumni Association Board of Directors is currently recruiting members of the MD Classes of 1978, 1983, 1988, 1993, 1998, and 2003 to help plan Reunion 2008. Being a reunion volunteer is a great way to reconnect with your class.

Thanks to alumni feedback, Reunion Weekend 2007 was more family friendly. With your help, we can make this Reunion even more successful.

Do you wonder where your anatomy lab partner is now? Find out by encouraging your class members to come to Providence for an exciting Reunion weekend! We're also eager to know which faculty members were most important to your class.

If you want to learn more about becoming a reunion volunteer, please feel free to contact me at Med_Alum@brown.edu or Bethany Solomon, director of alumni programs, at Bethany_Solomon@brown.edu or 401-863-1635. We look forward to hearing from you.

Sincerely,
Daniel Medeiros MD'86
President, Brown Medical Alumni Association

ALUMNI ALBUM

Myechia Minter Jordan 94 wrote to say My h s and, awrence ordan r , and I relocated to Boston, where I a now the chief edical officer at i oc o nity ealth enter, one of the lar est health centers in the city We also were lessed with the irth of o r second da hter, Sofia

Myechia can e reached at dr y aol co

1999

Melisa Lai Becker 94 writes, After a year-and-a-half as associate director for the A erican Association of Poison ontrol enters in Washin ton, , I oved ac to Boston to ret rn to clinical edicine f ll

ana **Tchabo has been happily married** to harles desBordes or seventeen months.

ti e I with a rid e ealth Alliance for er ency Medicine, and with the MA RI Poison ontrol enter hildren s ospital Boston and Beth Israel eaconess Medical enter for edical toxicolo y Melisa arried Sean Bec er last April

She can e reached at elisa lai al ni rown ed

Neel andhi was a recipient of the 200 oris e o ndation s linical Scientist evelop ent Award e is an assistant professor of edicine and epide iolo y and pop lation health at Al ert instein olle e of Medicine of eshiva University

2000

Nana Tchabo 9 is c rrently in her second year of ynecolo ic oncolo y fellowship at Roswell Par ancer Instit te in B ffalo, She is loo in forward to another al y winter in B ffalo She has een

E E
AL MNI

Pete and family aboard a *xe om* literally motor hug in Vietnamese.

EVACUATIONS AND PEREGRINATIONS

A family medicine doc goes global with his family.

A fifty three year old man from Lu embourg on assi n ent in Asia s stains in ries in a otor i e accident that re ire orthopedic expertise and hardware not availa le in his host co ntry A local physician reco ni es that the patient s needs s rpass availa le reso rces and that he needs r ent evac ation y air to the nearest well-e ipped edical facility Arran e ents are ade for international aero edical evac ation This was the s ect of a review article p lished in the an ary 1 , 200 , iss e of the *ew n nd o rn o Medicine* The article s lead a thor, **Peter . Teichman** S 9 , a rad ate of Brown s fa ily edicine residency pro ra , is alified to write a o t the practice As a physician wor in in an international health clinic in o hi Minh ity, with a passport that allows access to nations where s ch e er ency transfers ter inate, he has directed and perfor ed a n er of si ilar evac ations

Before oin to ietna , Teich an wor ed as an accident and cas alty doctor in ew ealand, and efore that, his wanderl st had ta en hi on loc tenens assi nents in Alas a, awaii, Ari ona, and A stralia e also spent five years as a fac lty e er of West ir inia University s r ral fa ily edicine residency pro ra , where he served as the director of its astern ivision fa ily edicine cler ship and leader of evidence- ased edicine pro ra s

Teich an s interest in international health e an in edical school at Michi an State, where he co pleted an M MPA Masters in P lic Ad inistration pro ra that e phasi ed international health develop ent is ti e at Brown f rther inspired hi on his o rney fro eneralist to lo alist

Acco panyin Teich an on these advent res are his wife, Anne, a clinical phar acist and so eti e-che istry teacher, and fo r sons, Soleil, 13, est, 11, lan, , and enai, 4 The Teich ans have een livin and wor in in ietna for nearly two years Accordin to the co ple, Bein in a developin co ntry is a ood fit for o r career oals to help an e er in nation expand and enhance its health care pro ra s They also find it an excellent place to raise children ***—Randall Rockney, MD***

Associate Professor of Pediatrics and Family Medicine

ALUMNI ALBUM

happily arried to r harles desBordes for seventeen onths ana wo ld love to hear fro her class ates

She can e reached at ana Tcha o yahoo co

2001

Dorkina Myrick Ph 01 writes I co - pleted a residency in anato ic patholo y at the ational ancer Instit te in Bethesda, M , in ne 200 After residency, I accepted a position with the ancer Trainin Branch of the ational ancer Instit te, where I a c rrently e ployed It s a fantastic oppor- t nity I wo ld not have een a le to o tain this type of career experience anywhere else

or ina can e contacted at or ina Myric yahoo co

2002

Deborah Archer 9 and her h s and, Shane McGre or, anno nce the irth of son ari s Malcol on an ary 20, 200 , who oins his two older sisters, I ani Miria , , and ia Rose, e orah is a pediatrician at Sal d a ily ealth enter in ort ollins,

She can e reached at e orah childoc yahoo co

Terralon Cannon Knight is c rrently a physician with Unity ealth are, Inc , servin as edical director for Good ope Road ealth enter Unity ealth are, Inc is a nonprofit or ani ation dedicated to providin ality health care to the edically nderserved of Washin ton,

Terralon can e reached at terralon ni ht yahoo co

Radhika Varada Kuna 9 is a fellow in cardiolo y at the University of Maryland Medical enter

She can e reached at varadaradhi a yahoo co

Steve Liao 9 is a cardiolo y fellow at the Mo nt Sinai ardiovasc lar Instit te

Steve can e reached at sliao al ni rown ed

Sumayah Taliaferro 9 c rrently wor s at Pre iere er atolo y in Atlanta, GA

S ayah can e reached at s ayah taliaferro sn co

Eric Walsh c rrently wor s for rthopedic Gro p, Inc , a private practice in Pawt c et, RI e lives in Barrin ton, RI, with his wife, aroline, and their ids, ily and than

2004

Amy Boutwell foc ses on health care i prove ent at the Instit te for ealthcare I prove ent in a rid e, MA A y and her partner, hristian, have two children Myles, 3, and incoln, 1

A y can e reached at a o twell ihi or

John Kawaoka 00 and his wife, **Cristina Pacheco** 00 M 04 S o , anno nce the A st 1 irth of Madeleine Mae awao a

2005

Tripler Pell lives in Toronto, where she is a a PG -1 soon to e PG -2 in e r ary, after a six- onth hiat s for aternity leave in fa ily edicine at the University of Toronto Mo nt Sinai ospital She writes, r fa ily has expanded to incl de Marina ope a o d, orn on April 1 , 200 ot

Mark Bear and colleagues have **corrected key symptoms of mental retardation** and autism in mice.

ch other news st very sy and iss- in the RI ocean la es are not the sa e

2006

Daniel Palazuelos 99 wor s at Bri ha and Wo en s ospital, where he speciali es in internal edicine and lo al health e ity e wor s with the Boston- ased G Partners in ealth in hiapas, Mexico aniel and his wife, indsay, live in a aica Plain, MA

aniel can e reached at dpala elos partners or

Sarah Squire 02 writes that she entered an essay contest thrown y dy s Slow- h rned Ice rea explainin why her nei h orhood in Winston-Sale , , deserved an ice crea loc party and she ended p winnin the sweet pri e of ice crea , party s pplies, and invitations for her nei h ors and friends

Sarah can e reached at sarahs ire ail co

HOUSESTAFF

1996

Mary A. Curtis, a dia nostic radiolo ist, recently oined the physicians of Radiolo y Associates P , and Advanced Medical I a in Board certified in n clear edi- cine, Mary is a e er of the A erican olle e of Radiolo y, the Society of clear Medicine, the A erican Association of Wo en Radiolo ists, and the Radiolo ical Society of orth A erica

PHD

1984

Mark Bear P o , director of MIT s Picower Instit te for earnin and Me ory, and col- lea es have corrected ey sy pto s of ental retardation and a tis in ice Their wor , p lished in the ece er 20 iss e of *e ron*, indicates that a certain class of dr s co ld have the sa e effect in h ans These dr s are not yet approved y the A, t will soon e in clinical trials Brown University rad ate st dent G l len was a co-a thor of the paper

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Questions? Contact Bethany Solomon, director of the BMAF, in the Office of Biomedical Advancement at 401 863-1085 or Bethany_Solomon@brown.edu.

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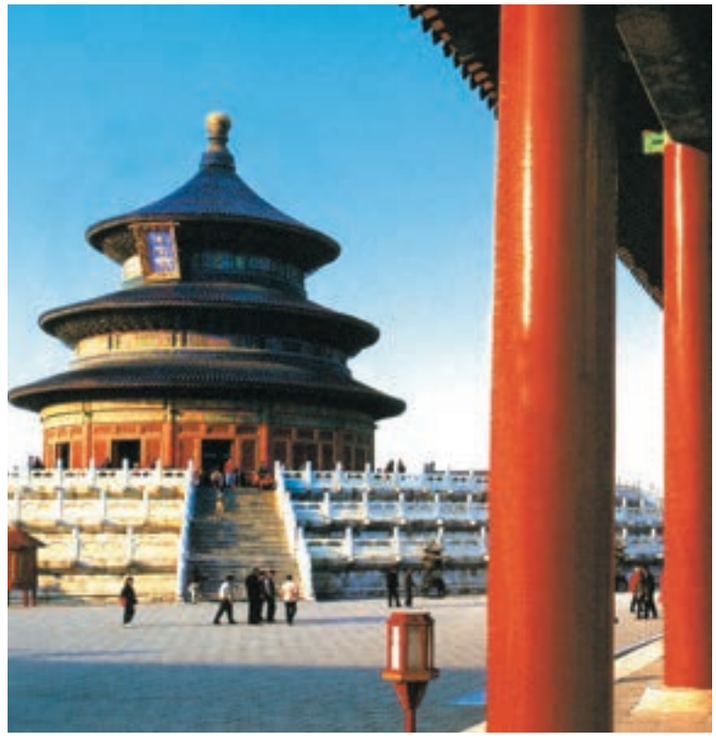

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