

Quarterly

**SPIRIT OF INNOVATION
IN WAR ON CANCER** p. 4

**WHITE COATS AND
STETHOSCOPIES** p. 8

**MEDIC'S 30TH
ANNIVERSARY** p. 22

WMAA LEADERSHIP

TRANSITION

CELEBRATING PETERSON'S
TWO DECADES OF LEADERSHIP
AND WELCOMING ROTHSCHILD
TO EXECUTIVE DIRECTOR ROLE



School of Medicine
and Public Health
UNIVERSITY OF WISCONSIN-MADISON

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QUARTERLY

The Magazine for Alumni, Friends,
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School of Medicine and Public Health

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OCTOBER 2021

Friday, October 29,
and Saturday, October 30

WMAA Board of Directors Meeting,*
Homecoming football game*

Virtual Class Reunions:

Class of 1986:
Thursday, October 21, 7 pm CDT

Class of 1991:
Thursday, October 28, 7 pm CDT

Class of 1996:
Wednesday, October 27, 7 pm CDT

Class of 2006:
Thursday, October 14, 7 pm CDT

Class of 2011:
Thursday, October 28, 7 pm CDT

Class of 2016:
Tuesday, October 26, 7 pm CDT

NOVEMBER 2021

Friday, November 19

Middleton Society Virtual Event

Virtual Class Reunions:

Class of 1976:
Thursday, November 4, 7 pm CDT

Class of 1981:
Wednesday, November 3, 7 pm CDT

Class of 2001:
Tuesday, November 16, 7 pm CST

* Event details are subject to change based on Centers for Disease Control and Prevention guidelines related to COVID-19 in this region.

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CALENDAR

CONTENTS

QUARTERLY • VOLUME 23 • NUMBER 3



Visitors at the Memorial Union Terrace enjoy an unseasonably warm afternoon in late September 2021.

4



Spirit of Innovation

On the 50th anniversary of the National Cancer Act, UW-Madison's role in cancer research builds on history and remains pivotal.

8



White Coats and Stethoscopes

Treasured fall traditions welcome the entering class of medical students.

10



WMAA Leadership Transition

As Karen Peterson retires after 21 years at the helm, Sarah Rothschild becomes the new executive director.

On the Cover

The Wisconsin Medical Alumni Association (WMAA) and University of Wisconsin School of Medicine and Public Health community celebrate two decades of leadership by Karen Peterson (left), who is retiring. Sarah Rothschild (right) will become the new WMAA executive director. See article on page 10.

—Photo by Todd Brown/Media Solutions

- 10 Alumni Notebook
- 16 Goodbye Dear Friends
- 17 Healer's Journey
- 18 Giving Back
- 20 Alumni Profile
- 22 Milestone
- 24 Award
- 28 Student Life
- 30 Spotlight
- 32 Faculty Profile
- 34 Research Advances
- 36 Perspectives

ROBERT N. GOLDEN, MD



Each year, as I view the brilliant fall foliage, I reflect upon all that has happened in the recent summer season and anticipate the excitement of the coming winter. Similarly, the University of Wisconsin School of Medicine and Public Health (SMPH) community is celebrating the careers of long-standing staff and faculty members as we wish them well in their next chapters and welcome new people into our “family.”

For more than two decades, Karen Peterson has provided outstanding leadership for our Wisconsin Medical Alumni Association (WMAA). We applaud her success in building meaningful connections among our medical students, alumni, faculty and staff. This strong foundation helped us recruit her successor, Sarah Rothschild, as our new WMAA executive director.

We also honor the achievements of Dr. Ellen Wald, a national leader in pediatrics who has served with distinction as chair of our Department of Pediatrics for more than 15 years. In October, the SMPH presented her with the prestigious Folkert Belzer Award. Dr. Wald will continue leading this very

important department until the new chair is on board. We thank Ellen for her devotion and wish her the very best.

In the Alumni Profile, we describe another inspiring individual, Dr. Richard Riegelman. A pioneer in the integration of medicine and public health, he is the founding dean of The George Washington University School of Public Health and Health Services in Washington, DC. His story offers insights into the SMPH’s transformation into the nation’s first school of medicine and public health.

We are grateful to those who—30 years ago—created MEDiC, a program that provides health care to our medically underserved neighbors. This system of free clinics is run by UW-Madison health professions students and supervised by SMPH faculty members and other health care professionals.

Another significant milestone, the 50th anniversary of the National Cancer Act, illustrates the broad role our investigators in the UW Carbone Cancer Center have played in shaping the landscape of cancer research and patient care over five decades.

Such successes in our school’s history continue to attract the best trainees. During our August 2021 White Coat Investiture Ceremony, we welcomed incoming medical students.

New administrators also joined the SMPH during the COVID-19 pandemic. In the Perspectives column, you will enjoy Dr. Lynn Schnapp’s account of becoming the chair of the Department of Medicine as the novel coronavirus spread throughout our country. A few weeks later, Dr. Jomol Mathew stepped into her role as the inaugural chief of biomedical informatics at the Institute for Clinical and Translational Research. As you will discover in the Faculty Profile, Dr. Mathew has embraced additional leadership responsibilities since her arrival.

In spring 2021, two remarkable medical students—Kevin Franco Valle and Liana Aubrey Dawson—pursued their heartfelt commitment to advancing social justice and promoting diversity through their fundraising and vigil-organizing efforts.

As the colorful fall foliage drops from the trees outside my office window, I am reminded of the COVID-19-related exhaustion that so many of us feel at times. If only we could safely drop our face masks to the ground and declare that the pandemic is over! But for now, we must continue to call upon our growing understanding of the virus to navigate our families and communities safely into the next season. In the spirit of Halloween (one of my favorite holidays), no matter what “tricks” this dreadful coronavirus and its variants play on us, we must “treat” ourselves and our neighbors to science-driven commitments to protect each other.

Robert N. Golden, MD

*Dean, University of Wisconsin School of Medicine and Public Health
Vice Chancellor for Medical Affairs,
UW-Madison*

KAREN S. PETERSON

Greetings, medical alumni and friends! I hope you are enjoying the fall season. The University of Wisconsin-Madison campus has come alive, and the Wisconsin Medical Alumni Association (WMAA) staff are back in the office at the Health Sciences Learning Center (HSLC). It's great to see our medical students every day and hear the UW Marching Band practice as we leave the building.

Autumn is my favorite time of year. I love the weather, the beautiful fall colors, football season and the anticipation of the holidays. For me, it is also a time of reflection and gratitude. And I feel that now, more than ever before. After 21 fabulous years serving as the executive director of the WMAA, I will be retiring this fall. Thus, I have mixed emotions as I write this message.

I have been truly honored to direct the WMAA. I will remain forever thankful to former SMPH Dean Philip Farrell and former WMAA President Harvey Wichman (MD '65, now deceased), as they gave me this opportunity in fall 2000. I had no idea that I would hold this "dream job" for so long.

Additionally, I have deep gratitude for the constant support Dean Robert N. Golden has extended to me and to the WMAA. He fully embraces the importance of our mission and always welcomes alumni "back home" to their alma mater (figuratively during the COVID-19 pandemic, but in person when it's safe to do so). He considers all of you to be members of a happy, extended family.

All of the WMAA presidents with whom I've worked have played significant roles in moving the association forward—and many past presidents continue to share their dedication. I thank the entire WMAA Board of Directors for your sterling service to our

organization. You are some of our school's most steadfast advocates. I hope you all will stay involved in the association and SMPH well beyond your term as board members!

Class representatives are another key group that is essential to supporting our mission. You have diligently kept your classmates connected, hosted reunions and helped raise funds for scholarships. We have enjoyed numerous vibrant reunions over the years. Please continue to lead in these ways—and more—as your efforts make a huge difference for your classmates and medical students. You'll have opportunities for many successful gatherings, virtual for now and in person as soon as it's safe to gather that way.

Reflecting on my colleagues behind the scenes, I praise the WMAA staff members and our Advancement Team colleagues. This seriously is the "dream team." Together, we have accomplished many great things. I know you will keep up your passion and hard work. Your talents are the reason why the WMAA is a leader among our peers.

Last but not least, I extend an enthusiastic high-five to all alumni for your donations of time, talent and money to our school and its students. Your volunteerism and gifts are the lifeblood of our organization. The WMAA is strong, and each contribution helps maintain that strength.

It is difficult to reflect on 21 memory-filled years in a single column. The SMPH and WMAA community has felt like a family to me. I have had opportunities to meet countless wonderful alumni, faculty, staff and students along the way. Several have become lifelong friends. And for all of this, words don't adequately express my gratitude.



Looking forward, please join me in giving a warm Wisconsin welcome to the new WMAA executive director, Sarah Rothschild, who brings much talent and many new ideas to the table. You will enjoy reading about her in the Alumni Notebook section of this issue of *Quarterly*. I am excited about the WMAA's future under Sarah's leadership!

With that, I say goodbye. I look forward to joining you as a guest at the next in-person WMAA Homecoming Tailgate Party, Scholarship Reception and/or Middleton Society event.

On, Wisconsin!

Karen S. Peterson
Executive director, Wisconsin Medical Alumni Association



Elizabeth C. Miller, PhD (left), and Harold Rusch, MD '33, conduct cancer research in 1947. Their work helped lay the foundation for decades to come.

Spirit of Innovation

HOW UW-MADISON HELPED LAUNCH THE WAR ON CANCER 50 YEARS AGO

In his 1971 State of the Union address—just over 50 years ago—President Richard Nixon called for an unprecedented national approach to fighting one of our country’s greatest enemies: cancer.

“The time has come in America when the same kind of concentrated effort that split the atom and took man to the moon should be turned toward conquering this dread disease,” the 37th U.S. president announced. “Let us make a total national commitment to achieve this goal.”

Less than a year later, on December 23, 1972, Nixon signed the National Cancer Act into law. The landmark piece of legislation would fundamentally reshape the cancer research landscape in America, provide new funding opportunities, and officially kick off what’s now known as the “war on cancer.”

To assist in that fight, the National Cancer Act called for the creation of cancer centers throughout the United States for clinical research, training and demonstration

of advanced diagnostic and treatment methods relating to cancer. These would become known as comprehensive cancer centers, and the University of Wisconsin-Madison—an institution already on the cutting edge of cancer research, drawing on decades of research by investigators such as Elizabeth C. Miller, PhD, and Harold Rusch, MD ’33—saw an opportunity.

Under Rusch’s leadership, UW-Madison submitted a proposal to the National Cancer Institute (NCI) to create a comprehensive cancer center. This led to the creation in 1972 of the UW Clinical Cancer Center, which was awarded comprehensive status a year later by the NCI. At the time, only five other institutions received the NCI’s first “comprehensive” designation—an honor that UW-Madison has maintained ever since.

With the infrastructure taking shape across the United States to fight cancer, the challenge then became: what next? It was uncharted territory, but the newly designated UW Comprehensive Cancer Center played

an outsized role in charting a course.

“UW-Madison researchers were heavily involved in not just the genesis of cancer research, but they were heavily involved in advising the federal government in the early 1970s on what

the war on cancer should be,” says Howard Bailey, MD, director of the UW Carbone Cancer Center—the center’s new name as of 2006, in honor of Paul P. Carbone, MD, who served as the center’s director for nearly 20 years.

Bailey continues, “Our people were able to help shape policy based on what they knew was important and had been studying for decades.”



Howard Bailey, MD

UW-MADISON ARCHIVES

—Continued on next page



UNIVERSITY OF WISCONSIN-MADISON ARCHIVES

McArdle Laboratory faculty and staff, including many historical luminaries, in 1969.

RICH HISTORY

In the 1930s, Frederic E. Mohs, MD '34, a surgeon at UW Hospital and Clinics (now UW Health) and faculty member at the UW Medical School (now the UW School of Medicine and Public Health, or SMPH), developed a procedure—Mohs surgery—to treat patients with skin cancer. Mohs rose to the level of emeritus clinical professor of surgery.

In the 1940s, the McArdle Memorial Laboratory for Cancer Research opened its doors and became the first cancer research center founded by a university in the United States.

In the 1950s, Charles Heidelberger, PhD, SMPH professor of oncology, developed fluorouracil, also known as 5-FU, which would eventually become one of the most widely used chemotherapy drugs in the world.

And in the 1960s, Fritz Bach, MD, a physician-scientist and SMPH professor, developed a compatibility test between tissue donors and recipients, which enabled him to lead one of the world's first successful matched bone marrow transplants in 1968.

When it came to researching and treating cancer, UW-Madison was clearly ahead of the curve.

"There was this collection of forward-thinking researchers here who decided that having some specific plans for dealing with cancer was important," Bailey states. "The

University of Wisconsin has always been on the forefront of wanting to study the maladies that were important to its state residents, and clearly they recognized that cancer was a priority."

But even with decades of experience, the ambitious goal that President Nixon laid out in 1971—to cure cancer—would not be easy.

Richard Burgess, PhD, SMPH emeritus professor of oncology, likens fighting cancer to standing next to a railroad track and being asked to stop an oncoming train with nothing but a wrench in your hand.

"There's no way you're stopping it," he says. "You could throw that wrench at that train a million times and never even come close to stopping it. That's the way our knowledge was back then."

But Burgess notes that if you studied the diagrams and the inner workings of the train, you could potentially build a foundation of basic knowledge necessary to achieve the goal.

"You could recognize that there are certain vulnerable spots in the train where, if you stuck a wrench in where the gears are coming together, you could stop the train," he describes. "And that's exactly what's happened over the last 50 years."

In 1971, Burgess had just arrived in Madison to work in the McArdle Laboratory. Funding from the National Cancer Act helped him establish his lab and dive into

research. Having discovered the first positive transcription factor—a protein that effectively turns genes "on"—Burgess gradually built a research operation dedicated to understanding the ins and outs of the protein machinery of gene regulation, which helped researchers build their knowledge of what cancer is and how it operates.

As Burgess likes to say: "Today's basic research produces tomorrow's new treatments."

FORWARD MOMENTUM

Throughout the years, research advances made at UW-Madison have directly led to new, more effective treatments for cancer. That includes tamoxifen, which became one of the most widely utilized treatments for both preventing and treating breast cancer.

UW-Madison also is the home of TomoTherapy, a specialized form of radiation therapy that targets cancer cells and avoids healthy cells.

Today, that legacy of developing paradigm-shifting cancer therapies continues in new and exciting ways, from creating personalized vaccines made from a patient's own cells to developing more targeted and effective immunotherapies that can be used as first-line treatments.

For instance, the Program for Advanced Cell Therapy was launched in 2016 to develop personalized cell technologies for improving health outcomes in children and adults with unmet medical needs, such as radiation-caused dry mouth, and testing those therapies through first-in-human clinical trials.

UW Carbone also has established itself as a leader in precision medicine; it is home to the Precision Medicine Molecular Tumor Board (PMMTB). Developed as a collaboration among UW Carbone and some of the state's largest oncology practices, the board reviews cancer cases based on patients' specific genetic mutations, and it recommends patient-specific targeted therapies.

Since its inception six years ago, the Tumor Board has reviewed more than 5,500 cases, with the annual number of cases increasing every year.

"We learn a lot from our patients, and it inspires us to try and understand what's going on with individuals or groups of patients who have unusual cases," shares PMMTB co-director Mark Burkard, MD, PhD, SMPH professor of medicine. "But at the end of the day, I think the biggest win is for the patients."

INNOVATIVE SPIRIT

A lot has changed over the past 50 years. There are now more than 50 NCI-designated

comprehensive cancer centers in the United States. Thanks to significant research advances made possible by the National Cancer Act of 1971, cancer is much more preventable and treatable. And more cancer patients survive today than ever before.

What hasn't changed during all this time is UW Carbone's spirit of innovation, a deep commitment to research and patient care, and a desire to make life better for individuals with cancer.

It's what the UW Carbone Cancer Center's namesake would have wanted because it's what he preached. After all, he had a favorite phrase, one that the center still lives by today: "Cancer research has a face: the face of our patients."



UW-MADISON ARCHIVES

Paul P. Carbone, MD

Meet Wisconsin's Mary Lasker

In 1971, before the signing of the National Cancer Act, the federal government's annual budget for cancer control efforts was around \$200 million. That's far from the roughly \$6.5 billion the government now invests each year in the National Cancer Institute (NCI).

The push to make cancer a national priority—along with increased funding for new biomedical research—would not have been possible without one very important Wisconsinite who observed: "If you think research is expensive, try disease!"

Born in Watertown, Wisconsin, in 1900, Mary Woodard Lasker is widely credited as one of the driving forces behind the National Cancer Act. She came from humble roots, but over just a few decades, she emerged front and center with the elite of New York and Washington, DC.

"She was a mover and a shaker at a high level," notes Howard Bailey, MD (PG '91), director of the University of Wisconsin Carbone Cancer Center and a professor of hematology, medical oncology and palliative care at the UW School of Medicine and Public Health. "She knew everybody, including presidents, and really pushed them to act on the causes she cared about. She's really credited with pushing the idea of the NCI, the national cancer centers and the war on cancer."

After creating and selling a successful Depression-era company, Lasker eventually turned her attention toward civic initiatives and causes. Along with her husband, she founded the Albert and Mary Lasker Foundation in 1942, with the intention of encouraging investments in medical research to tackle the major causes of death and disability, including cancer, in the United States at that time.

In that same period, she worked to transform the American Society for the Control of Cancer into the organization now known as the American Cancer Society and initiated its funding of cancer research in the early 1940s.

Throughout her life, Lasker received major honors and recognition for her work, including the Presidential Medal of Freedom in 1969 and the Congressional Gold Medal in 1989. Her image also adorned a postage stamp in 2009.

Today, Lasker's spirit and legacy carry on through her foundation, which presents awards each year to scientists for key advances in basic science and clinical medicine research. Many award winners have gone on to win Nobel Prizes, such as UW-Madison's Howard Temin, PhD, professor, who won a Lasker Award in 1974 before winning the Nobel in 1975.



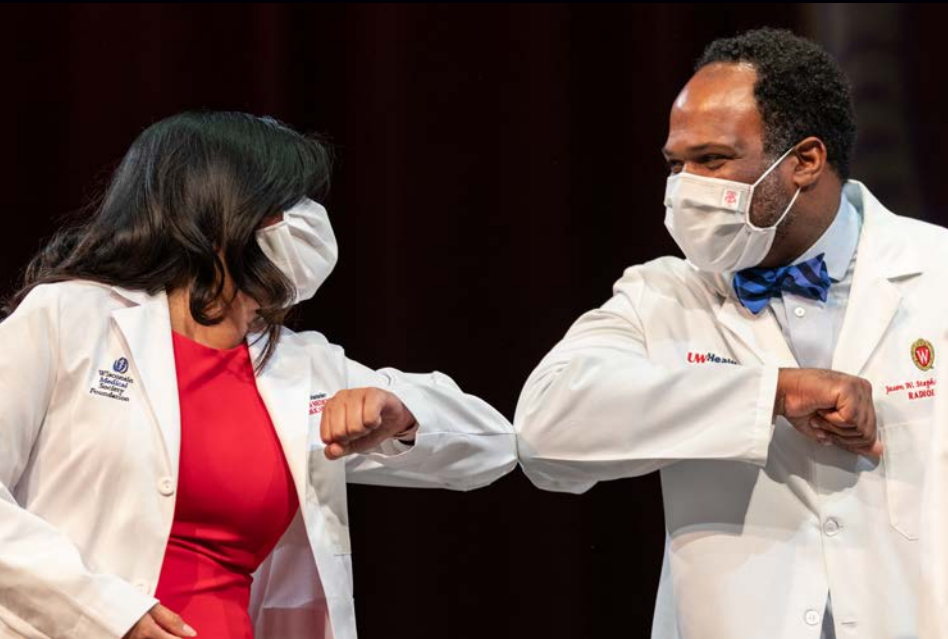
"She was really a woman of the times," recalls Marshall Fordyce, MD, Lasker's great-nephew and a Lasker Foundation board member. "Her focus on the funding of science and research was an incredibly important tool for enabling society to better understand things like cancer that really impacted the daily lives of citizens. Somehow she tapped into that in a very deep way."

While Lasker didn't live to see cancer completely eradicated, Fordyce says that if his great aunt were still alive, she'd be amazed by the progress toward that goal.

"I think she would be thrilled with the fruits of the investment in biomedical research in which she played such a key role," he shares. "Just seeing the new biological medicines that have come forward that really didn't mature until after her death. I mean, really curative therapies for some diseases. I actually think she'd be blown away by what science has been able to achieve."

White Coats and Stethoscopes

FALL TRADITIONS GREET NEW MEDICAL STUDENTS





Opposite page, top row (left to right): First-year medical students approach their White Coat Ceremony. Brady Kerwin shares his Wisconsin pride. Samantha Gallo wears her new stethoscope and white coat. Bottom row: Jason Stephenson, MD (right), congratulates a medical student with an elbow bump. Takwa Salem puts on the symbol of her new profession. Above, top row: Several class members prepare to don their white coats, with faculty members standing by to assist. Bottom row: On the shore of Lake Mendota, Aniekanabasi Ufot, Kaïssa Sylla, Christine Egede, Neema Mbele, Oyindamola Fawole and Terrill Taylor celebrate after the event. Sonam Dolma and Natasha Ignatowski pose in their white coats, which were donated by the Wisconsin Medical Society for all new medical students.

Wearing masks while indoors, new medical students at the University of Wisconsin School of Medicine and Public Health (SMPH) donned their first white coats at the White Coat Investiture Ceremony on Friday, August 20, 2021. This rite of passage emphasizes the importance of

compassionate patient care for trainees who strive to become physicians.

This is the second medical student cohort to begin their training during the COVID-19 pandemic. In 2020, the ceremony was virtual. This year, in-person participation in the ceremony was limited to students and academic leaders; the

event was live-streamed to the school's Facebook page for others to view.

In another time-honored tradition, during the first week of classes, the Wisconsin Medical Alumni Association gave each new medical student a stethoscope that was donated by alumni and other supporters of the SMPH.

Celebrating

Two Decades

of Leadership

**PETERSON
RETIRES FROM
WMAA EXECUTIVE
DIRECTOR POST**

Karen Peterson

by Kris Whitman

Similar to counting candles on a birthday cake, Karen Peterson proudly counts the number of Homecoming Weekends she has celebrated while leading the Wisconsin Medical Alumni Association (WMAA)—21 as of October 2021 and 38 total while working in the health sciences at University of Wisconsin-Madison. This particular Homecoming, however, marks a new type of observance: her retirement.

“I have absolutely loved working for the WMAA and the UW School of Medicine and Public Health (SMPH),” says Peterson, who has served as the association’s executive director and the school’s assistant dean for alumni and external relations since 2000. “I had hoped we would be able to gather in person for the WMAA’s traditional fall class reunions and Homecoming Tailgate Party—as this will be my last before I retire—but due to COVID-19, we need to celebrate reunions virtually. And, unfortunately, it’s hard to hold a tailgate event online.”

Nonetheless, Peterson will be cheering with gusto at the Homecoming football game. Ironically, the UW Badgers will face off against her college alma mater, the University of Iowa Hawkeyes, that day.

A native of the small, rural town of Mt. Pleasant, Iowa, Peterson says her mom was an elementary school teacher, and her dad served in the U.S. Navy during World War II and had a subsequent career in the U.S. Department of Agriculture.

“My parents were products of the Great Depression,” she notes. “They encouraged my two older siblings and me to work hard, save our money and value what we have. Above all, a sense of family was very important, and we all supported each other.”

Peterson recalls many events of the 1960s, including the Civil Rights Movement, and says, “My parents were always willing to talk about current events, and they were dedicated to helping people in need, an attitude that shaped who I am today.”

While earning her business degree with an emphasis in finance at the University

of Iowa, Peterson married Don Peterson, a former high school classmate who grew up on a farm near Mt. Pleasant. A visit to Madison, including the UW Memorial Union Terrace, made a strong impression on the young couple.

“My husband received a job offer in Madison and established his electrical engineering career here at Madison Gas and Electric,” says Peterson, adding that they bought their current home near campus 39 years ago. “We love everything about Madison. It’s been such a great place to raise our two daughters.”

The Petersons’ first daughter, Maddy, earned a nursing degree from UW-Madison and is working as an intensive care nurse on the front lines of the pandemic in Austin, Texas. Their second daughter, Isabelle, is completing a dual degree in elementary and special education at UW-Oshkosh; she will student-teach in the spring.

“When Don and I moved to Madison in spring 1982, my business degree helped me get my first job in the business office of the UW School of Nursing, where I worked with faculty members to help them obtain and manage grants. I later became the director of that school’s research office,” says Peterson.

Recalling another pivotal move into a new alumni relations position at the UW School of Nursing, Peterson describes, “It felt like I found my niche. Among other things, I was proud to establish and run a golf outing to raise money for scholarships.”

In 2000, the opportunity to enter her current role with the WMAA led to two decades of managing the program that fosters close relationships among the school, its medical alumni and medical students, with the goal of promoting alumni participation in and support of the SMPH.

“Drs. Philip Farrell and Harvey Wichman hired me,” says Peterson. “At that time, Dr. Farrell was the SMPH dean, and Dr. Wichman was the WMAA president.”

Dean Emeritus Philip Farrell, MD, PhD (PG ’72), reflects, “I expected good things from Karen, but I have been absolutely

Rothschild Becomes New Executive Director

Sarah Rothschild is the new executive director of the Wisconsin Medical Alumni Association (WMAA) at the University of Wisconsin School of Medicine and Public Health (SMPH), as of October 18, 2021.



TODD BROWN/MEDIA SOLUTIONS

Since 2014, Rothschild has been the director of constituent relations for the University of Virginia’s Medical Alumni Association and Medical School Foundation. There, she developed a program that constantly evolved to engage the school’s alumni, students, trainees and faculty. That evolution took on many forms, from developing virtual content to establishing targeted programming around common interest, identity or purpose.

Earlier, she served as the director for alumni relations at the University of Washington School of Medicine Alumni Association and has held other leadership roles in media relations, public affairs and alumni relations, including for the Association of American Medical Colleges Group on Institutional Advancement.

“I am thrilled to join the outstanding SMPH community and lead the WMAA in engaging alumni and students for a lifetime. I am grateful for the strong traditions of the SMPH and WMAA, and I look forward to creating new ones,” shares Rothschild.

Robert N. Golden, MD, dean of the SMPH, notes, “The WMAA is the cornerstone of our strong and lasting relationships with our medical alumni. Sarah is an outstanding addition to the school and will help foster connections among our wonderful medical alumni and our students and faculty.”

—Continued on page 27



HARRY A. (BUCK) SCHOLTZ IV, MD (PG '17)

I have infectious disease (ID) practices in several places, including McKenzie Willamette Medical Center, a small community hospital in Springfield, Oregon, and Salem Hospital, a large community hospital in Salem, Oregon. In addition, I do telemedicine ID for a critical access hospital in Reedsburg, Wisconsin. I often see common ID problems like cellulitis, diabetic foot infections and Staphylococcal bloodstream infections.

Recently, I saw a case of Q fever, a rare and difficult-to-diagnose infection usually contracted through airborne

particles. It mainly infects farm animals but can cause human infections. My patient lived near a goat farm and had an abdominal aortic graft, which became infected. With antibiotic therapy, she was able to get back to normal.

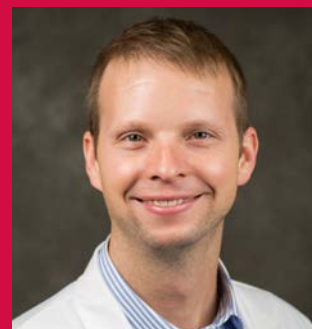
I chose infectious disease for the same reason many others do: a great mentor, Dr. James Peacock, when I was a fourth-year medical student. ID physicians tend to be good diagnosticians with broad medical knowledge. He was a terrific diagnostician, had sound physical exam skills and a warm bedside manner. It fit my

paradigm of what a physician should be, and I never looked back!

Consequently, I completed my residency at Wake Forest Baptist Medical Center in Winston-Salem, North Carolina, where Dr. Peacock taught, followed by my ID fellowship at UW Health.

Nationally, I am a member of the Infectious Disease Society of America, and locally, I belong to the county medical society, as well as a regional group of ID doctors called the Rocky Mountain Pus Club.

Infectious disease is a wonderfully rewarding specialty, in which you can do anything



from bedside medicine to bench research to local epidemiology. It's about listening to people, thinking about problems and finding solutions. If you have insatiable curiosity and a long list of interests, this is a good specialty to consider. The coronavirus pandemic has underscored the importance of the ID field, as future threats will require many more of us.

DEANNA J. FRIEDMAN-KLABANOFF, MD '09

At the University of Maryland School of Medicine, I am an instructor in the Department of Pediatrics, Division of Infectious Diseases and Tropical Pediatrics. I spend about 80 percent of my time doing research and the balance in clinical work. My clinical and translational research centers around natural and vaccine-induced immunity to *Plasmodium falciparum*, the most common and deadly cause of malaria. I also have helped with several COVID-19 projects, including Phase 3 trials of the Moderna and Novavax vaccines. I recently was awarded a K23 career development grant by the

National Institutes of Health (NIH) to investigate use of peptide arrays to better understand natural immunity to *P. falciparum* and identify and test novel vaccine candidates.

We see a wide variety of cases at University of Maryland Medical Center, including osteomyelitis, multi-drug resistant infections and fever of unknown origin. We also have cared for pediatric patients with COVID-19. My favorite consults are fever in returned travelers and tropical infections.

My most memorable patient was a teenage immigrant from Central America who presented with seizures and an enhancing

lesion. She was found to have neurocysticercosis, but access to albendazole was cost-prohibitive. Thankfully, we were able to get her connected with the NIH's free neurocysticercosis clinic.

Having majored in medical microbiology and immunology at UW-Madison, I knew I wanted to go into infectious diseases because I have always been fascinated by interactions between microbes and the human immune system. Great mentors during medical school at the University of Wisconsin School of Medicine and Public Health and during my pediatrics residency at the University of Minnesota enhanced my



interest in global infectious disease research.

Infectious diseases is a great career because we will always have new diseases to learn how to diagnose, manage and prevent. We also have opportunities to develop expertise in areas like infection prevention, antimicrobial stewardship, HIV, global health and tropical medicine.

JENNIFER HSU, MD (PG '08, '10)

I practice in general infectious diseases (ID) at Sanford Health in Sioux Falls, South Dakota, where I also work with our antimicrobial stewardship program. In addition, I am the Charley F. and Elizabeth Gutch Chair in Medicine and assistant dean of medical student education at the University of South Dakota Sanford School of Medicine. In this role, I direct our longitudinal integrated clerkship and assist with curriculum development, assessment and evaluation.

While I care for patients with a large variety of ID problems, my outpatient practice has evolved to include

many living with HIV, cystic fibrosis and non-tuberculous mycobacterial infections.

My most memorable patients are those with whom I have developed long-term relationships, especially patients living with HIV infection. I met a particularly impactful patient who was hospitalized with severe anemia related to HIV therapy. He continued taking his HIV medications prescribed many years earlier, but he had no regular HIV care provider. This is a common problem in rural South Dakota, where access to care can be limited, and where HIV is highly stigmatized. I have

had the honor of caring for this patient for 10 years.

The most important factor in choosing my specialty was having great mentors throughout medical school at the University of Missouri-Columbia School of Medicine and my residency and fellowship at UW Health. My ID rotation as a resident sealed my decision—I worked more hours than ever but still looked forward to the work.

I have had the opportunity to participate in great groups that bridge my clinical and academic work, including the Infectious Diseases Society of America Education Committee and Medical



Education Workgroups. I also have been part of the National Board of Medical Examiners Microbiology and Immunology Test Development Committee. I find ID physicians to be passionate clinicians and teachers, and I look forward to opportunities when I can work with others around the nation. There is always something new to learn in this field!

Class Notes

Compiled by Andrea Larson

We want to hear from you!
med.wisc.edu/shareyournews

Class of 1968

Michael Levin

was honored as a Distinguished Life Fellow of the American Psychiatric Association with the 50-year member award; he had 50 years of membership as of January 1, 2020. This award recognizes members who have demonstrated exceptional loyalty to the association. Levin resides in Lafayette, California, with his wife, Judith. They have three children and three grandchildren. Levin enjoys hiking, cycling and participating in a book club.



and served as the medical director of lung transplantation. As a physician-scientist, he performed basic and translational research in cystic fibrosis (directed the adult CF program), interstitial lung disease (headed the ILD program), lung transplantation, aging and other areas. He maintains an honorary appointment and continues to engage in scholarly endeavors. Meyer has written many short stories about his training and career in medicine and is working on a memoir; he also has written a memoir about his years living in Cyprus when he was attached to the U.S. Embassy in Nicosia. Having been lured into musical theater at age 52 by his daughter, he has performed in numerous theater and opera productions. During retirement, he stays busy with his granddaughters and by helping his wife, Emily Auerbach, PhD, with the UW Odyssey Program, which she directs.

Class of 1984

Steven O'Marro was recently awarded Springfield (Illinois) Clinic's prestigious A. Raymond Eveloff Award for Clinical Excellence. The annual award, established in 1997 in honor of one of Springfield Clinic's founding partners, recognizes a recipient for "going above and beyond the call of duty to ensure the health and well-being of patients and to continually strive for excellence in the delivery of health care." O'Marro, using evidence-based methods and personal experience from previous pandemics, helped inform the clinic's COVID-19 policies, procedures and protocols that have allowed physicians to continue safely seeing patients and providing necessary care.



Keith Meyer, an emeritus professor of medicine at the UW School of Medicine and Public Health, retired on February 1, 2021. A Wisconsin native with roots in the state on both sides of his family dating back 200 years, Meyer served in the U.S. Navy during the Vietnam War and shares that he could have never attended medical school without the help of the GI Bill. Meyer specialized in pulmonary and critical care medicine. He collaborated with thoracic surgeons to set up UW Hospital's (now UW Health) lung transplant program in 1988

Class of 1996

Charles (Chuck) Ryan has been appointed president and chief executive officer of the Prostate Cancer Foundation, the world's leading philanthropic organization dedicated to funding life-saving prostate cancer research. Ryan is recognized internationally as a genitourinary oncologist with expertise in the biology and treatment of advanced prostate cancer.

Class of 2018



Rebecca Kemnitz was elected chief resident for Tulane University's Internal Medicine/Pediatrics Residency Program for the 2021-2022 academic year. After completing her residency in New Orleans, she plans to return to her home state of Wisconsin, where she has accepted an internal medicine and pediatric primary care position with Marshfield Clinic in Minocqua, Wisconsin. Pictured above, left to right, are medical school classmates Natalie Taylor, MD '18, Kemnitz, Katie O'Brien, MD '18, and Becca Warwick, MD '18.

Letter to the Editor:

Going through my memorabilia, I found an article in the May 1952 Phi Chi Quarterly magazine about the Class of 1953's Derby Day, held in 1952.

I have heard several different versions of Derby Day presented by past presidents of the Wisconsin Medical Alumni Association. This article clarifies that a junior class presented the derby to Dean William S. Middleton, and that it was not provided by the dean. My memory of Derby Day is consistent with this article, which I would like to share with readers of the UW School of Medicine and Public Health's Quarterly magazine.

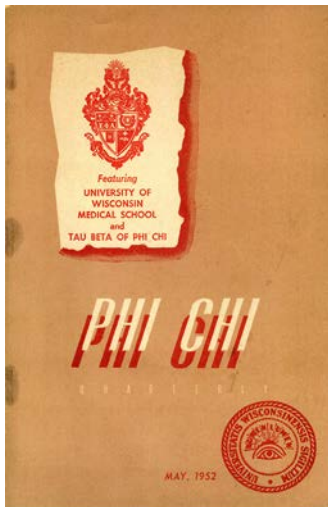
Many thanks,
Edward Pezanoski, MD '54
Class representative for the Class of 1954
Former member of Phi Chi Fraternity

Response:

Phi Chi Quarterly was published by the Phi Chi Fraternity, which was active at the University of Wisconsin Medical School (now UW School of Medicine and Public Health) from 1921 to 1974. The text of the article, "Derby Day: A Skit of the Dean," from the May 1952 Phi Chi Quarterly, follows:

For the past 39 years, there has been an hour set aside by the junior class once each year in which the class presents the Dean,

Dr. William S. Middleton, a brown derby. During this class hour, the members of the class present a skit portraying the various idiosyncrasies and personality traits of the Dean, of which there are many humorous ones. In previous years, skits based on his supposed birth, his "shot-gun" marriage to the class, and his funeral have been used as themes.



This year, the usual 8 am lecture started and proceeded for several minutes when in walked two members of the class appropriately costumed as Satan and St. Peter. Then several members of the class took this man, who regards all surgeons as

Philistines, aside and had him do a surgical scrub while the scene for the skit was set. It was a court room [sic] just outside the gates to Heaven with a judge presiding. There were five prosecuting attorneys and one defense attorney, and the rest of the class acted as the "impartial" jury. A host of witnesses (a vast majority of them for the prosecution!) were present. Doctor Middleton's famous patient—who later at postmortem was found to have only a 26-gram spleen—came from Heaven to condemn him. After the prosecution and defense rested the case, the class in unison proclaimed the verdict and the Dean was thereby condemned to a future of stoking coal. Then came the derby—a lurid red one this year—presented to the Dean by the president of the class.

Each year's derby always comes to each of the Dean's lectures. These lectures are conducted on a quiz program basis. When a member of the class misses a question, he affixes his signature to the top of the hat and wears it until someone else misses a question. At the last lecture of the year, the mad scramble is on to miss every question the Dean asks, for the one who misses the very last question becomes the proud owner of the derby permanently."

—by Melvin L. Griem, TB '53
Phi Chi Quarterly

In Memoriam

Jerome R. Cornfield, MD '51
Chicago, Illinois
August 23, 2021

Ennio C. Rossi, MD '54
(PG '61, '63)
Northbrook, Illinois
September 3, 2021

Michael Pollay, MD '55
Sun City West, Arizona
February 10, 2021

Lon D. Babbitt, MD '61
Carlsbad, New Mexico
August 9, 2021

Clyde Gerhard, MD '61
Boise, Idaho
August 7, 2021

Charles R. Vavrin, MD '62
Arlington, Texas
May 20, 2021

Gene P. Wegner, MD '63
Monona, Wisconsin
July 19, 2021

John D. Sarbacker, MD '64
Fargo, North Dakota
July 20, 2021

Michael J. Ansfield, MD '71
Eagle, Colorado
August 16, 2021

Jacob K. Felix, MD '71
Portland, Oregon
June 19, 2021

William E. Smith, MD '71
San Juan Capistrano, California
August 5, 2021

William L. Giese, MD '84
(PG '88)
Murray, Kentucky
May 24, 2021

Former Faculty Members

Allen W. Clark, PhD '61
Madison, Wisconsin
September 29, 2021

Frank Graziano, MD, PhD (PG '76)
Oregon, Wisconsin
September 22, 2021

Ronald E. Kalil, PhD
Madison, Wisconsin
September 20, 2021

John R. Pellett, MD (PG '59, '61)
Middleton, Wisconsin, and
Sanibel, Florida
September 25, 2021

Goodbye Dear Friends

RONALD E. KALIL, PhD

A pioneer in neuroscience and ophthalmology at the University of Wisconsin



School of Medicine and Public Health (SMPH), Ronald E. Kalil, PhD, died on September 20, 2021, in Madison, Wisconsin. He was 79 years old.

Having earned his doctorate at Massachusetts Institute of Technology, Kalil joined the SMPH faculty in 1973. At the time of his retirement in 2020, he was a professor in the school's Department

of Ophthalmology and Visual Sciences (DOVS) and had affiliate appointments in other UW-Madison units, including the McPherson Eye Research Institute.

In 1975, Kalil established and, for 25 years, directed the Neuroscience Training Program. He also established the Center for Neuroscience—which he directed for a dozen years—and the W.M. Keck Laboratory for Biological Imaging. Further, in 2004, Kalil established the first UW-Madison course focused on stem cell therapeutic applications; and he co-founded, directed and taught in the Neuroscience and Public Policy Program. Broadly, he chaired the planning committee that led to the establishment of the SMPH Department of Neuroscience. Kalil served for 18 years on advisory panels for the

National Institutes of Health and other federal agencies.

“Dr. Kalil was passionate about his research and teaching at UW-Madison. His research ranged from molecular neurobiology to behavioral neuroscience. Seminal work in his lab revealed the remarkable ability of the brain to restore function that has been compromised or lost due to brain injury by replacing cells that have died and rebuilding appropriate neural connections. His impact on learners who benefited from the courses and programs that he developed is immense,” says Terri L. Young, MD, MBA, FARVO, chair of DOVS and the Peter A. Duehr Professor of Ophthalmology, Pediatrics and Medical Genetics.

JOHN R. PELLETT, MD, FACS (PG '59, '61)

John R. Pellett, MD, FACS (PG '59, '61), an emeritus professor of surgery at the University of Wisconsin School of Medicine



and Public Health (SMPH) and esteemed general and thoracic surgeon at UW Health, passed away on September 24, 2021, at age 94. He lived in Middleton, Wisconsin, and Sanibel, Florida.

One of Pellett's former colleagues and lifelong friends, Louis Bernhardt, MD '63 (PG '72)—a retired Madison cardiovascular surgeon who served as the chief surgery resident at UW Health while Pellett was

on the faculty—refers to him as a revered teacher, a precise and exacting surgeon, and a physician who cared deeply about his patients.

“He had an encyclopedic memory, recalling details of each patient, their disease, their relatives, their background and even where they got their hair cut. Sometimes evening rounds took a while, but everyone understood as long as John was teaching and caring,” recalls Bernhardt.

Born in Hamburg, New Jersey, Pellett served in the U.S. Navy and earned his medical degree from the University of Pennsylvania. In 1955, he moved to Madison, Wisconsin, where he completed a general surgery residency and thoracic surgery fellowship at UW Hospital and Clinics (now UW Health). He joined the

SMPH faculty in 1961 and continued his career there until his retirement in 2002. He always loved to keep up on any news from the Department of Surgery.

Pellett played a role in many “firsts” at UW Health, including the first separation of conjoined twins, lung transplant, double-lung transplant and heart-lung transplant. He was involved in research, stayed on top of the medical literature, and served in numerous state and national professional organizations throughout his career.

Bernhardt notes, “John trained hundreds of UW Health surgical residents and fellows, and they cherished the time they spent with him. They received great medical training, as well as an education about deer hunting, farming, history and life, to boot.”

WINNING ENTRY IN THE SEVENTH ANNUAL

Bioethics Essay Contest

As a fourth-year medical student at the University of Wisconsin School of Medicine and Public Health (SMPH), Evalina Bond, MD '21, received the 2021 Dr. Norman Fost Award for the Best Medical Student Bioethics Essay. The contest—sponsored by the SMPH and its Department of Medical History and Bioethics—asked students to choose a topic related to the COVID-19 pandemic's impact on the ethics of conducting vaccine trial research on the American prison population. This essay was edited for publication in *Quarterly*; the unedited essay, including references, is available at med.wisc.edu/bioethics-essay

Vaccine Trials in Prisons? An Unethical Response to High Prison Infection Rates

by Evalina Bond

The incarcerated population in the United States has been disproportionately impacted by the COVID-19 pandemic with infection rates five and a half times higher and mortality rates three times higher than the general population. The explanations behind these statistics are multifactorial, but include the high population density in prisons, high admission and discharge rates, disproportionately high rates of chronic diseases, often inadequate medical supervision, poor sanitation, and the inability for facilities to adequately isolate infected prisoners. Impacts of the high infection and death rates among this population are understandably difficult to quantify and will have lasting impacts on the many



communities that suffer from higher-than-average incarceration rates as a result of systematic racism, the effects of low socioeconomic status, and other upstream determinants. However, some quantifications of these impacts are beginning to be published. One such study by Reinhart et al., published in November 2020, investigated the immediate effects of the high prisoner infection rate on infection trends in the surrounding populations by analyzing Cook County [Illinois] Jail discharges and infection nodes by zip codes in the Chicago area. They found that jail-community cycling was a significant predictor of COVID-19 cases and was able to account for 55 percent of the variance between zip codes. It is no surprise, therefore, that high infection rates of any disease among incarcerated people—especially diseases with similar transmission patterns to COVID-19—are a problem that must be addressed early on to prevent large-scale spread.

Conducting research on the imprisoned population has been restricted following major policy shifts in the 1970s, which barred incarcerated people from participating in vaccine research trials. In light of the pandemic, Wang et al. published an article in *JAMA* in September 2020 re-examining this exclusion. They argued that this population should be allowed to volunteer for Phase 3 vaccine trials because they are so disproportionately impacted by COVID-19 and its repercussions. If proper informed consent can be obtained without coercion, they suggest that it may even be unethical to exclude these people from participation and potential benefits of these trials.

While this proposition may increase the autonomy of the incarcerated population in America, others question how practical it is to assume sufficient informed consent and safety measures can be obtained in an environment that is so often under-resourced.

Specifically, they remain skeptical that sufficient medical personnel can be provided to these facilities to deliver adequate informed consent, monitor symptoms, and provide treatments when side effects occur. Further, some suggest that obtaining consent without coercion in a prison is likely impossible given the significant power dynamics of the environment.

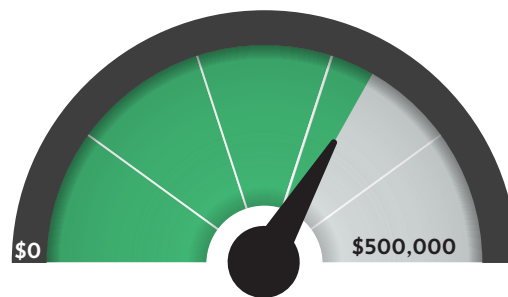
Outside of these concerns, however, it is not clear whether allowing participation in vaccine trials is ethical. While this population is disproportionately affected by COVID-19 and could have theoretically benefited from a vaccine under investigation, these individuals are at increased risk largely because of the environment they have been forced into. Therefore, inviting participation into a study that may protect them from a disease for which the design and resources of their environment is causing them to get at higher rates, instead of changing that environment, does not truly improve autonomy, only the appearance of it. Further, allowing participation is not a neutral act in itself; when the general population is benefiting from the poor environment prisoners live in, we are incentivized to allow the continuation of that environment and inhibit future prison reform.

Overall, while some members of the medical community see the COVID-19 pandemic as an event that may have warranted an exception to the policies protecting incarcerated people from potential abuse caused by participation in some branches of medical research, doing so may not have been practical given the under-resourced status of most prisons, and further, may have had negative impacts on the future of prison reform. It is essential that in future events of similar significance, we maintain the high ethical standards in place to protect underprivileged populations who are at risk for abuse in research studies.



Light from the sunset shines upon the health sciences campus at the west end of UW-Madison, including the Health Sciences Learning Center, Clinical Science Center and Wisconsin Institutes for Medical Research.

Success with WMAA Scholarship Matching Funds



ENDOWMENT THRESHOLD WILL DOUBLE AT BEGINNING OF 2022

by Kris Whitman

In the final quarter of availability for the Wisconsin Medical Alumni Association’s (WMAA) matching funds for need-based, endowed scholarships, many individuals and classes have stepped up to double their donations.

Starting in October 2020, the association began offering a \$12,500 match once that amount in new gifts has been received for a need-based scholarship. Individuals, families or classes can create a new need-based scholarship or contribute to an existing one.

Referring to the chart on the next page, Jill Watson, associate vice president and managing director, Wisconsin Foundation and Alumni Association, notes that some MD classes feel a sense of “friendly competition” with their peers.

“Their shared goal—to help reduce medical student indebtedness—is something that nearly all physicians can relate to, and

graduates from the University of Wisconsin School of Medicine and Public Health (SMPH) are no exception,” she says. “An impressive number of groups are choosing to donate.”

Since the WMAA Matching Fund’s inception, as of October 7, 2021, 27 scholarship funds have been created and endowed or enhanced to the endowment level with the WMAA matching dollars. Also as of that date, \$162,500 of the \$500,000 matching dollars are still available—and more groups are currently working toward reaching the match level than there will be matching funds to go around. Thus, Watson urges anyone interested in taking advantage of the matching funds to act quickly.

Dorothy Barbo, MD ’58, is among those who recognize the need to support medical students by lowering the amount of debt they acquire.

“The cost of medical education today is beyond what many students and families can

handle on their own,” she says. “Assisting students financially helps them focus on their training rather than worrying about how to pay for tuition.”

With this in mind, Barbo established a new need-based, endowed scholarship for medical students at the SMPH. The timing of her donation allowed her to receive matching funds from the WMAA.

Born in River Falls, Wisconsin, and raised in the small village of Hammond in the western part of the state, Barbo did not receive scholarships for college or medical school, but she says it would have helped.

“Very little (scholarship money) was available in those days,” Barbo recalls.



Dorothy Barbo, MD

"I received help from my family, had loans to cover some costs and worked part time."

After she earned her medical degree at the SMPH, Barbo completed an obstetrics and gynecology residency at Milwaukee Hospital, an affiliate of Marquette University, and a fellowship in gynecologic oncology at Marquette University School of Medicine. She established a career in academic medicine, holding faculty positions at Marquette University School of Medicine (now the Medical College of Wisconsin); Christian Medical College of Ludhiana, Punjab, India; Medical College of Pennsylvania (now Drexel University Medical School); and University of New Mexico School of Medicine.

In 1999, she retired from the latter as a professor emerita in the Department of Obstetrics and Gynecology, and she spent the following 10 years teaching in medical missions in Asia and Africa. She continues to serve on non-profit boards.

Barbo had established two previous scholarship funds—one for undergraduate education and the other for medical students where she taught overseas. She appreciates hearing from students who receive the funds.

"My hope is that medical students will someday pass along financial help to others who are coming behind them so they, in turn, focus on becoming good physicians," Barbo notes.

She concludes, "I am grateful that the UW School of Medicine and Public Health cares about students' costs and debts. And I encourage other alumni to help in this effort. That is part of the Wisconsin Idea!"

If you are interested in creating a scholarship fund, please contact Sara Dillivan-Graves at Sara.DillivanGraves@supportuw.org or (608) 280-1124. The WMAA matching funds will be available until December 31, 2021, or until \$500,000 of matching funds has been expended.

The minimum amount to endow a scholarship will increase from \$25,000 to \$50,000 on January 1, 2022.

MD CLASS SCHOLARSHIPS at the University of Wisconsin School of Medicine and Public Health*				
\$500,000+				
		Class of 1980 (\$604,454)		
\$250,000+				
		Class of 1967 (\$480,727)		
\$100,000+				
	Class of 1982 (\$182,628)	Class of 1983 (\$119,690)	Class of 1988 (\$105,073)	
\$50,000+				
Class of 1992 (\$92,198)	Class of 1957 (\$78,750)	Class of 1962 (\$73,130)	Class of 1969 (\$68,800)	Class of 2002 (\$55,900)
\$25,000+				
Class of 1995 (\$39,700)	Class of 1985 (\$37,349)	Class of 1976 (\$35,580)	Class of 1990 (\$29,850)	Class of 1970 (\$27,700)
Half-Century Society (\$27,500)	Class of 2011 (\$26,450)	Toussaint/ Class of 1951 (\$25,000)		
ENDOWED AT \$10,000+ (LEGACY SCHOLARSHIP LEVEL)				
		Class of 2015 (\$10,296)		
ESTABLISHED AND BUILDING TOWARD ENDOWMENT				
Class of 1984 (\$18,900)	Class of 2000 (\$14,000)	Class of 2012 (\$12,600)	Class of 1981 (\$10,850)	Class of 2005 (\$10,700)
Tucker/Class of 1975 (\$9,800)	Class of 2006 (\$9,675)	Class of 1996 (\$6,068)	Class of 1998 (\$5,850)	Class of 2017 (\$5,337)
Class of 1991 (\$5,000)	Class of 2009 (\$5,000)	Class of 2018 (\$4,946)	Class of 2014 (\$4,407)	Class of 2016 (\$2,784)
Class of 2021 (\$2,663)	Class of 2019 (\$1,568)	Class of 2020 (\$1,559)		
<i>*Reflects gifts received as of October 5, 2021</i>				

A Champion for

Public Health

**RICHARD RIEGELMAN,
MD '73, MPH, PhD**

Richard Riegelman, MD '73, MPH, PhD, delivers a speech at a meeting of the Association of Schools and Programs of Public Health.

by Beth Earnest

When people ask Richard Riegelman, MD '73, MPH, PhD, how he found his career path, he tells them about his time in Washington, DC, during medical school. Every day, he walked two miles to the nation's Capitol—and searched in vain for a school of public health. Years later, he decided to do something about that.

Not only did the Whitefish Bay, Wisconsin, native remedy that problem by becoming the founding dean of The George Washington University (GWU) School of Public Health and Health Services in Washington, DC, but he also has produced more than 70 publications on topics including population health, public

health education for undergraduates, and, most recently, the COVID-19 pandemic.

"I see public health and health care as two sides of the same coin," he says. "Both are important in maintaining a healthy population."

A Promising Start

When Riegelman was a young man, it was natural for him to want to attend college at the University of Wisconsin-Madison, about which his father, an alumnus, always spoke highly. The younger Riegelman took a wide range of undergraduate courses and attended law school for his last year as an undergraduate—an option at the time—before deciding to apply for medical school. He was accepted to the UW Medical School (now the UW School of Medicine and

Public Health, or SMPH), where he started taking classes in 1969.

Riegelman experienced three life-changing events as a medical student. First, he met his future wife, Linda, who was pursuing a master's degree in Spanish. Then, he spent a summer in Washington, DC, as an intern for Wisconsin U.S. Senator Gaylord Nelson, who created Earth Day; this experience introduced Riegelman to life in the nation's capital city. Finally, during his fourth year of medical school, he worked for the Wisconsin state government in health and human services, and then for the public health service in Washington, DC.

"My medical school experiences gave me a very good combination of public health and clinical opportunities," he notes.

Riegelman completed a primary care residency at The George Washington University and practiced internal medicine there for the next 20 years. While he enjoyed clinical practice, he realized that his passion was educating others about public health. So, in 1987, he and his colleagues started a public health program at GWU.

A Passion for Public Health

At the time Riegelman and his colleagues started the program, health care professionals considered public health to be the realm of physicians, nurses and physician assistants. With that limited group, the school was an overnight success, starting with 30 students. Over the next 10 years, the group's leaders added components such as epidemiology, health policy and management, environmental health and occupational health to the program. By the mid-1990s, the program's student body had grown to 500, including a wide variety of graduate students.

In 1996, Riegelman and his colleagues developed a proposal to turn their successful program into a separate school combining three programs—the medical school's master of public health program, the business school's health management and policy program, and the education school's exercise science program—into one. The GWU School of Public Health and Health Services (now the Milken Institute School of Public Health) opened in 1997, and Riegelman served as its founding dean for four years.

After he stepped down as dean in 2001, Riegelman began looking outward from GWU to see how he could make a difference in the nation. He wanted to offer public health programs to undergraduates.

"Nobody fully understood what public health was," he says. "It was not a presence at the undergraduate level. People tended to come to public health after they had already obtained their primary degree."

In 2002, the Institute of Medicine published a report on the future of public health education, noting that "all undergraduates should have access to an education in public health." That paved the

way for Riegelman's efforts, which included participation in the Association of American Colleges and Universities' Educated Citizen and Public Health Initiative. This initiative brought together arts, sciences and public health scholars in a 2006 public health education consensus conference, which resulted in exponential growth: The number of U.S. undergraduates who were majoring in public health grew from hundreds in 2005 to 15,000 in 2015. Today, there are approximately 500 undergraduate public health programs in the United States.

"I consider that initiative among the most important things I've done," says Riegelman.

The COVID-19 Pandemic

While public health was gaining importance for undergraduates and graduates, it wasn't at the forefront of most people's minds. At the end of 2019, the general public was focused more on individual health than that of the world. Then, an extremely contagious coronavirus was making its way from Wuhan, China, to every country in the world.

Riegelman has devoted two decades to writing public health textbooks—by 2020, he had written more than 10 books and edited the "Essential Public Health" book series. In March 2020, he saw that students would want materials on COVID-19, so he began developing a series that used simulated case studies to explain aspects of COVID-19. For example, the first case study examines a hypothetical family picnic in which five people contract COVID-19, but they all present differently.

"I love hypothetical simulations," Riegelman exclaims. "They're realistic, but they provide me with all kinds of freedom to illustrate important points."

The series also includes a piece on epidemiology, which provides a close look at the outbreak that occurred on the Diamond Princess cruise ship; one on testing, that looks at South Korea's highly successful contact tracing efforts; one on vaccines; one on treatment; and one on health policy and communications. His seventh entry in the series, *Pandemic 2030*, to be available



Linda Riegelman and Richard Riegelman, MD '73, MPH, PhD

near the end of 2021, examines a simulated epidemic that is controlled before it grows into a pandemic.

These materials are being used in undergraduate programs, nursing schools and medical schools. The case studies are part of a new series, "Population Health: A Primer," for which Riegelman is the editor. This series also describes how climate change and opioids relate to population health.

The Future of Public Health

As Americans continue to battle COVID-19 and its variants, colleges and universities have seen an increase in the number of students who wish to pursue public health as a career. At GWU, for example, applications for epidemiology rose by nearly 50 percent in 2021.

From Riegelman's perspective, the increased interest could have incredible repercussions for public health. He notes that COVID-19 isn't the only current epidemic—citing as an example that 92,000 people died from opioid overdoses in 2020.

"We need public health and clinical medicine to work together to address these problems," he urges.

Riegelman has seen promising signs from his alma mater: The UW Medical School transformed into the UW School of Medicine and Public Health in 2005. It was the first U.S. medical school to combine these important fields into a single school.

"These two pieces fit together," he says. "I guess that seems obvious today, but it wasn't obvious 20 years ago. This is the kind of fundamental change that I hope occurs across the country in the next five years."

MEDiC's 30th Anniversary

STUDENT-RUN FREE CLINIC SYSTEM CELEBRATES IN A YEAR UNLIKE ANY OTHER

by Andrew Hellpap and Kris Whitman

The University of Wisconsin School of Medicine and Public Health's (SMPH) student-run system of free community clinics, MEDiC, was poised to enter its 30th year in 2021 reflecting on its past. Instead, the COVID-19 pandemic forced organizers and students to reimagine its future.

Since opening its first clinic at Grace men's shelter in 1991, MEDiC has continued to grow through the dedication of students, clinician volunteers, administrative support and community partners.

Throughout its history, MEDiC has partnered with various community organizations to expand health care access among medically underserved populations, while also offering a chance for UW-Madison health professions students—who are studying to become doctors, physician assistants, physical therapists, pharmacists and nurses—to put knowledge into practice by working with volunteer clinicians in these fields. The clinics provide a variety of services, including general medical care, physical therapy, dentistry and mental health care. In January 2010, MEDiC officially became a program of the SMPH.



Briannae Theodore volunteers at the MEDiC Southside Clinic at 1102 S. Park St. in Madison.

As of early 2020, MEDiC operated five clinics at various partner-affiliated locations throughout Madison. In March 2020, all the clinic locations were closed temporarily due to shortages of personal protective equipment and national restrictions on health professions students seeing patients early in the pandemic. One of MEDiC's locations needed to shut down permanently because a clinic on the south side of Madison could no longer offer space to MEDiC, according to Meghan Zander, a second-year medical student and MEDiC organizer.

"Due to the pandemic, we had to shut down abruptly and weren't able to be there for the community during a very hard time, but the student and interprofessional team worked to establish telemedicine services, which we were able to offer to patients starting in June 2020," explains Zander. "It was unfortunate to have to shut down, but now we have the infrastructure to serve our patients (remotely) if anything like this happens again."

UW Health stepped in to provide space at its 1102 S. Park St. building. The goal was to help re-establish access to care on the south side of Madison. By March 2021, MEDiC had fully moved into the new space.

"It was a natural fit," notes Peter Newcomer, MD '95, chief clinical officer at UW Health and senior associate dean for clinical affairs at the SMPH, who volunteered with MEDiC during his time as a medical student at the school. "I know from personal experience how important this opportunity is for medical students, and how vital it is to the patients they serve."

The clinic space wasn't the only change in this turbulent 30th year of existence, Zander says. In March 2021, MEDiC students began seeing patients in person again, but only by appointment. Previously, patients came to clinic locations on a drop-in basis.

In-person appointments prove invaluable by allowing MEDiC students to assess a wider range of concerns than they are able to address remotely, and they provide an opportunity for the students to build trust and connections with patients after the pandemic-induced pause in services, shares Zander.

Left to right, Christine Seibert, MD, Meghan Zander and Matthew Goblirsch consult at the MEDiC Southside Clinic.





Christine Seibert, MD (left), talks with Tess Jewell (center) and Brianna Theodore at the MEDiC Southside Clinic.

“It allows us to provide quality care and connect people with primary care providers to take care of chronic conditions,” she adds.

Another program that has been integrated into MEDiC—but has been paused during the pandemic—is Reach Out and Read, a national program that supports children’s language and literacy development. Through this program, MEDiC students advised parents on the importance of reading aloud to young children, including strategies for

enjoying books with infants and toddlers. Children received a free book from a MEDiC volunteer, and the volunteer also read aloud to model the behavior for parents.

According to organizers of Reach Out and Read—when possible, given public health requirements—volunteers want to provide a positive reading experience for children and model reading aloud for parents because some may have never seen good reading-aloud techniques. The goal is to help children learn to enjoy books. Volunteers hope parents will read to children at home.

In July 2021, UW Health granted the students permanent use of the space at 1102 S. Park St. and helped secure referral appointments at Access Community Health Centers, a non-profit organization that offers a full range of medical services for patients of all ages. Access Community Health Centers, with three locations in Madison, has a mission of improving the health and lives of people who otherwise face financial, cultural and/or language obstacles that prevent access to high-quality, affordable health care.

MEDiC student and clinician volunteers are now seeing patients in person at the

Southside Clinic, the Salvation Army clinic, MEDiC Mental Health and Michele Tracy Clinic. Other new initiatives are in the works.

“When I think about the challenges of reopening MEDiC’s Southside Clinic (in the new space at 1102 St. Park St.) during the pandemic, I’m totally in awe of the creativity and dedication of our volunteer students and providers,” observes Kristi Jones, community services program director, SMPH. “Their tenacity, combined with clinic space generously provided by UW Health, has made reopening not only possible but successful.”

MEDiC shines as an example of the Wisconsin Idea—UW-Madison’s unique commitment to collaborate with the people of Wisconsin, sharing knowledge and resources with the goal of improving lives everywhere. Further, MEDiC reflects the spirit of the integrated UW School of Medicine and Public Health and its collaboration with other UW-Madison health sciences schools and programs.

Christine Seibert, MD, associate dean for medical student education and services at the SMPH, a professor of medicine in the school’s Department of Medicine, and the current faculty advisor for MEDiC, says the student-run free clinic system provides a unique, authentic interprofessional learning opportunity for students early in their education, laying a foundation they will continue to build upon throughout their careers.

“MEDiC’s 30th anniversary is testimony to the long-standing dedication of our student and faculty volunteers, who go ‘above and beyond’ on evenings and weekends to provide care to our most vulnerable neighbors,” says Seibert. “It is clear that these experiences are a critical part of the students’ formation as community-engaged health professionals, and we are so proud of their commitment.”



Meghan Zander checks a blood pressure monitor at the MEDiC Southside Clinic.

Wald Earns

Folkert Belzer

Award

THE LIFETIME ACHIEVEMENT
AWARD HONORS HER
DEDICATION TO PATIENTS,
FACULTY AND STAFF

Ellen Wald, MD

by Michael Felber

Now in her 16th year as a professor and chair of the Department of Pediatrics and the Alfred Dorrance Daniels Professor on Diseases of Children at the University of Wisconsin School of Medicine and Public Health (SMPH), Ellen Wald, MD, is the 2021 recipient of the prestigious Folkert Belzer Award, a lifetime achievement recognition presented annually to an SMPH faculty member. Named for the late former chair of the school's Department of Surgery, who was known for his pioneering discoveries in organ transplantation, the Belzer Award recognizes an outstanding individual who has had a pivotal impact on the school and the people and populations it serves. Wald accepted the award at the SMPH fall faculty and staff virtual meeting on October 11, 2021.

"Dr. Wald has been a remarkable, game-changing department chair and institutional leader," says Robert N. Golden, MD, dean of the SMPH. "She has dramatically advanced our clinical and academic missions, driven by a profound commitment to improving the health of all children."

Beloved by the faculty and staff of the Department of Pediatrics and beyond, Wald has an impressive array of individual accomplishments and honors. Her greatest pride comes from supporting the academic and clinical pursuits of the department's 200 faculty members.

"Somehow, Ellen has figured out the secret of finding more than 24 hours in a day. She starts early and ends late, and her energy level is remarkable," says Paul Sondel, MD, PhD '75 (PG '80), a professor of pediatrics and human oncology at the SMPH and the research director and former chief of the Division of Pediatric Hematology, Oncology and Bone Marrow Transplant in the Department of Pediatrics.

*Ellen Wald, MD, and
Arnold Wald, MD (PG '94)*

"Ellen always has her finger on the pulse of what everybody is doing," he adds. "And so much of what we do is attributable to her genuine commitment to help each faculty member flourish in their research and clinical practice."

J. Carter Ralphe, MD, chief of the Division of Pediatric Cardiology and one of many physician leaders recruited by Wald, can't say enough about her interpersonal skills.

"At our first meeting, I knew Ellen was someone I wanted to work for," Ralphe shares. "Her genuine interest in people—both personally and professionally—really came through. When faculty come to her with requests, as they do every day, Ellen's instinct is to say, 'Yes, let's try to do that,' and follow through with supportive action."

Tremendous Growth During Wald's Tenure

In 2006, Wald joined the SMPH determined to grow the Department of Pediatrics and expand UW Health's state-of-the-art American Family Children's Hospital, where she serves as pediatrician-in-chief. Results during her tenure speak for themselves; for example:

- The number of pediatrics faculty members has more than doubled, from 90 to 200.
- Every senior investigator who was on the faculty when Wald arrived remains today.
- Department of Pediatrics extramural research funding from the National

Institutes of Health has increased nearly five-fold, from \$4.7 million (2007) to \$23.1 million (2020); the respective national ranking rose from 37th to 13th.

- In the past decade, UW Health's Pediatric Heart Program has achieved national rankings from *U.S. News & World Report* and the Society for Thoracic Surgeons.
- The department's Division of Neonatology, which cares for the region's most premature and/or acutely ill babies at two neonatal intensive care units, has grown from five to 25 faculty members.
- More effective, less toxic immunotherapy-based cancer treatments are being developed, thanks to contributions from UW Health's highly reputed team of childhood cancer researchers; UW-Madison is one of nine worldwide programs that comprise the Pediatric Cancer Dream Team supported by the St. Baldrick's Foundation and Stand Up To Cancer.

A special point of pride for Wald is the creation of a robust Pediatric Hospitalist Program that supervises inpatient care at American Family Children's Hospital. With 17 physicians—most of whom also conduct research in this nascent subspecialty that is now board certified—pediatric hospital medicine has grown in parallel with the complexity of inpatient illnesses.

—Continued on next page



"It takes more coordination than ever to successfully care for today's hospitalized children because more highly premature babies are surviving, and more kids are admitted with complex needs," says Ryan Coller, MD, MPH, who heads the Pediatric Hospitalist Program. "Hospitalists play a huge role in their care, and Ellen provided the needed resources to grow this program."

A Brooklyn Beginning

A native of Brooklyn, New York, Ellen Rashkow Wald majored in math at Brooklyn College, where she graduated Phi Beta Kappa. She planned to become a math teacher, but a chance encounter with a classmate during her senior year put Wald on a different path.

"I asked another woman student what she was doing after graduation, and she said she was going to medical school," Wald says.

She realized that going to medical school would fulfill a mostly suppressed aspiration to join the medical field that as a young girl Wald thought was beyond her reach. She was able to complete several requisite courses, take the MCAT exam and apply.

Money was tight in Wald's family, so leaving Brooklyn wasn't realistic for medical school. She was accepted close to home at SUNY Downstate Medical Center in Brooklyn, where tuition was affordable, and she met her husband-to-be, a classmate.

"I was intrigued by this girl who was eating a chopped liver sandwich," recalls Arnold "Arnie" Wald, MD (PG '94), now a professor in the Division of Gastroenterology and Hepatology in the SMPH Department of Medicine and a gastroenterologist at UW Health. "I was raised in a rural setting about 40 miles north of the city, but Ellen assured me that chopped liver was a common delicacy in Brooklyn."

By the end of their second year of medical school, Ellen and Arnie Wald married. They are one of five couples within their class who married; all are still together more than 50 years later.

Following their residencies and fellowships—hers, respectively, at Kings County Hospital in Brooklyn and the University of Maryland Medical Center in Baltimore; and his, respectively, at

Kings County Hospital and The Johns Hopkins Hospital in Baltimore—the Walds dedicated 28-year careers to the University of Pittsburgh faculty, where Ellen Wald specialized in pediatric infectious diseases with an emphasis on childhood sinus and respiratory infections. She rose to the position of chief of the Division of Allergy, Immunology and Infectious Disease and served as interim chair of pediatrics for two and a half years.

Initial Hesitation

"At first, I was hesitant about taking on so much administrative responsibility. I was told that being a chair is a thankless job, but people actually thanked me every day," Ellen Wald recalls with a chuckle. "It made me feel that I could meaningfully support the faculty and help them thrive, which is how I view the chair's primary role."

The interim role prepared her well for her current chair position. In January 2022, she will celebrate her 16th anniversary with that title.

"We were in our early 60s when we came to Madison," Arnie Wald notes. "Some people probably thought we'd retire within five years, but Ellen hit the ground running and hasn't stopped yet."

Colleagues note that few people in academic medicine work with as much energy and enthusiasm as Ellen Wald, and they praise her for her personal warmth.

"Ellen knows the name of everyone's spouse and kids," says her former administrative assistant, Sue Burke (now retired). "Her door is always open, and she makes time to help anyone professionally or personally."

Michelle Kelly, MD, MS, an SMPH associate professor of pediatrics and a pediatric hospitalist at American Family Children's Hospital, remembers an ecstatic Ellen Wald running to her office to extend congratulations moments after Kelly received a prestigious career development award that now funds Kelly's research on patient- and family-centered care.

"She's also the person who will stop you in the hallway and say, 'What's going on? Let's find some time to talk,'" Kelly says.



The Wald family

Work-Family Balance

Ellen Wald brings the full package—leadership, clinical expertise, volumes of published research and numerous professional honors. Still, family remains her most cherished priority. She and Arnie Wald are proud of their two children, Elissa and Eric, their spouses and five grandchildren ranging in age from 9 to 14.

"Grandchildren are special in so many ways," Arnie Wald says. "Not only is there the reciprocal unconditional love between grandparent and grandchild, but the intensity of your affection for your grandchildren also strengthens the bond to your children."

He continues, "Ellen and I are so grateful to be healthy enough to enjoy them as much as we do."

In September 2021, Ellen Wald indicated an interest in expanding the available time for her family and personal life by stepping down from the chair role, while planning to continue teaching and conducting research. But until SMPH leaders are able to find a successor to fill her shoes as chair of the Department of Pediatrics, she is dedicated to supporting the department and school in the steadfast manner she has exhibited to date.

"We have something special here that is truly worth cherishing," remarks Ralphe. "Ellen has been a transformative leader because she wants her people to succeed. Much of our growth is because of the collaborative cultural tone she sets, and for that we are incredibly lucky."

Celebrating Two Decades of Leadership *continued from page 11*

overwhelmed at what she has been able to accomplish.”

SMPH Dean Robert N. Golden, MD, agrees, noting, “Karen has been absolutely spectacular as a leader, as a partner and as a friend. Everyone with whom she interacts knows how dedicated she is and how hard she works to support medical students, build and support connections with our alumni and donors, and oversee many types of events, as well as *Quarterly* magazine.”

Says Peterson, “I love bringing people together and seeing them have a great time reminiscing and giving back to the school in so many ways. We’ve had such great Homecoming Weekends, Alumni Weekends, and other alumni events in Milwaukee, at Lambeau Field and all around the country.”

“I’m particularly proud that the WMAA staff and I start working with students the day they enter the SMPH, from their White Coat Ceremony to graduation. We try to make them feel like alumni right away, and we help build a culture of philanthropy and gratitude, for instance by helping them establish class funds,” states Peterson. “We are seeing the fruits of our labor with young alumni who are giving back to the school.”

She adds that several former student leaders are serving on the WMAA Board of Directors.

“They have come full circle. They graduated from the SMPH, went out and established their careers, and now they are alumni leaders. That has been a huge success,” says Peterson.

“I have worked hard to build a board that is diverse in age, number of women and men, specialty interest and ethnicity. There’s room to grow in the latter, but we have made progress. Our board members are some of the school’s greatest advocates,” she states, as she describes additional points of pride.

“All of our WMAA staff members have been very engaging with alumni, but my current staff and I have emphasized our work with students in the last 10 years,” she says.

For instance, Peterson and her team have developed several programs, including the Student Alumni Partnership Program (SAPP) for medical students to connect with MD alumni. SAPP has grown to more than 1,000 alumni who are committed to helping students, including with career exploration. Peterson also shares gratitude for major support from the WMAA Board of Directors and her team to create the Stethoscope Program, through which donors fund the meaningful gift of a stethoscope for each new medical student.

Reflecting further, Peterson shares, “My favorite memory is when (former) Dean Philip Farrell and I co-hosted a cruise on the Rhine River from Basel, Switzerland, to Amsterdam in the Netherlands. I am still friends with many of the people who went on that cruise.”

Co-sponsored by the WMAA and the Wisconsin Alumni Association, the 2006 cruise was a celebration of the WMAA’s 50th anniversary and the school’s upcoming centennial, she says.

On the national scene, Peterson shared her expertise by serving a term as the vice chair of alumni and development, and later as chair of the steering committee for the Association of American Medical Colleges Group on Institutional Advancement (GIA), in which she has participated for much of her career. The 700-member GIA is the only national professional development group devoted exclusively to the role of institutional advancement in academic medicine.

“A challenging thing for every alumni director across the country is how to keep alumni and students engaged when we cannot gather in person during the pandemic,” says Peterson. “The virtual world is challenging, as some people have developed Zoom fatigue and others simply do not embrace online technology.”

She continues, “The WMAA staff and I have worked very hard to come up with creative ideas, and we have been able to engage more alumni virtually than we usually

do in person because they can participate from anywhere in the world without traveling. For instance, two people from Israel joined a recent reunion. This factor is a silver lining during the pandemic.”

When asked about her upcoming retirement, Peterson quickly responds, “I look forward to spending more time at our lake home in the Northwoods, enjoying nature. And when it’s safe to do so, I hope to travel—I have a long list of places I want to go. I also have a lot of hobbies, including doing yoga, bicycling, sewing, flower gardening, and playing the piano and percussion instruments. I play in a bell choir, which was on hold due to COVID-19, but we are starting up in person this fall, and I’m looking forward to that.”

A Middleton Society Member with her husband, who also plans to retire soon, Peterson established a new scholarship, the Karen S. Peterson/WMAA Medical Student Scholarship.

“I want to help support students with financial need and help the school meet its greatest needs. I feel strongly about scholarships because medical students graduate with incredible debt, and anything we can do to help alleviate that is a good thing,” she says.

While preparing to pass the proverbial baton to the new WMAA executive director, Sarah Rothschild (see sidebar article), Peterson is grateful that the two have had time to interact. She notes that Rothschild has many creative ideas and much experience, including with in-person and virtual events.

“Sarah will inherit a rock star team with our small but mighty WMAA staff and advancement group,” notes Peterson.

Golden concludes, “The entire SMPH community wishes Karen the very best in her retirement, and we know Sarah will continue to build on the incredible foundation that Karen and her team have established.”

Healing and Community-Building

Liana Aubrey Dawson (left) and Kevin Franco Valle sell candles.

MEDICAL STUDENTS COLLABORATE TO CELEBRATE DIVERSITY AND ADDRESS INJUSTICES

by Beth Pinkerton

University of Wisconsin School of Medicine and Public Health (SMPH) medical students Kevin Franco Valle and Liana Aubrey Dawson felt called to create a space for healing and community-building after the verdict in the George Floyd murder trial was announced in spring 2021.

While the two students hail from different backgrounds—Valle came to the United States from Mexico City in 2010, and Dawson grew up in St. Paul, Minnesota—they share the experience of being a minority in a predominantly white academic institution. They also understand

how the racial and civil injustices of the past year impacted students of color.

With these factors in mind and with thoughtful planning, Valle and Dawson created the virtual Lights for Life Vigil, which brought together students, faculty and staff of color, plus many other supporters. The April 30, 2021, event honored the lives of those who have been lost to police brutality and other forms of injustice. It also broadly celebrated diversity.

“While we are medical students and future physicians, a lot of us still experience things related to racism because of our identity, and we’re affected by that,” Dawson reflects. “We wanted to create a space for people to feel what they feel and to be open about it without fear of repercussions.”

A self-described “artsy person who likes the hard sciences,” Dawson also envisioned a space for creative expression.

She adds, “I’ve been a part of events in the past and seen how paintings, murals and the spoken word can bring people together.”

In the same time frame as the students’ planning for the vigil, which coincided with the COVID-19 pandemic, Valle had begun making candles because he felt inspired by the symbolism of candlelight, as well as traditions from his culture.

“In Mexico, we have the Day of the Dead not only to mourn people who are gone, but also to celebrate their lives. We celebrate that they were here, and that they were part of us,” says Valle. “So it was important

not just to mourn people we lost to racial injustice but also to celebrate their lives.”

To give meaning to the lives lost, with support from MD Student Services and the Office of Multicultural Affairs, Valle and Dawson planned for a fundraising component of the event to support a local community organization that educates, employs and empowers persons of color. Thus, sales of Valle’s candles raised funds for the Urban League of Greater Madison, and they invited the organization’s president and CEO, Ruben Anthony Jr., to speak at the vigil about the league’s work.

Takondwa Mwasi, a diversity, equity and inclusivity coordinator at the SMPH, describes Valle and Dawson’s planning and orchestration of the vigil as “inspiring,” and she calls the event “incredibly moving.”

Mwasi observes, “There was immense vulnerability from those who shared their lived experiences of injustice and discrimination. Despite the emotional nature of this event, Liana and Kevin wanted to ensure that, at the end, persons of color and allies in the Madison community were able to feel re-energized to continue creating and supporting opportunities for minority populations to succeed.”

The Lights for Life Vigil reflects Dawson and Valle’s vision for their future work as physicians, as each of them has chosen to pursue a career in medicine to positively impact communities of color.

“The most important thing for me in a career is to work with people and give back to communities similar to the one in which I grew up. I want to work primarily with minority populations,” says Dawson, who is enrolled in the Training in Urban Medicine and Public Health (TRIUMPH) program, the SMPH’s urban training track, which was designed to help address health inequities and chronic physician shortages in Wisconsin’s urban areas.

“I had never really considered medicine until I learned about how flexible it is and how much you can do with it,” she recalls, adding that she spent the year after earning

her bachelor’s degree at the University of Minnesota doing clinical research in polycystic kidney disease. Dawson also worked in a job as a server, which confirmed her decision to go to medical school because, as she says, “I was able to talk to people from many different backgrounds and build relationships with people in a very short amount of time.”

Valle’s path included earning his nursing degree from the UW School of Nursing and practicing as a nurse for five years, first as an intensive care nurse at Fort Memorial Hospital in Fort Atkinson, Wisconsin, and later as an RN case manager at UnityPoint at Home in Madison. While he loved nursing and received the honor of being named a Top Nurse of Madison in 2018 by *Madison Magazine*, he felt as though he could do more for his patients as a physician.

Though Valle is still exploring his options for his career, he is certain about his goals, noting, “Racism is undoubtedly a public health issue. The effects of unconscious racism can be seen everywhere—in maternal mortality, cancer treatment, diabetes care and more. Name a statistic, and there is a disparity.”

Valle continues, “I don’t think any physicians or other medical professionals join this profession just to help one set of people but to help everyone. We need to understand the things that are affecting our patients, including racism. It’s part of our moral and professional duty as physicians to provide the care that our patients need at the clinic and at the systemic level. It’s hard and overwhelming to change the system itself, but the more people who are trying to chip away at it, the easier it becomes. Medicine is a team sport.”

Dawson and Valle hope all physicians take time to get to know the communities they serve.

“There’s so much privilege that comes with being a physician, and it’s important to show up for your community even if the community doesn’t look like you,” says

Dawson. “It’s important to be in those spaces. Go to community events, such as those for the arts, jazz, the spoken word and farmers markets. Go out and talk to the community.”

She adds, “When we think about minority communities, we often think of negative things like trauma and pain, but there’s so much good going on, too. I hope we can change the lens through which we see people and challenge ourselves to find the good and see how we can add to that.”

Dawson and Valle say they are grateful for the efforts of the SMPH Office of Multicultural Affairs and have seen results from the school’s commitment to creating a more diverse and inclusive environment.

“To have a paid advocate for minorities is really good,” observes Valle, who also points out the school’s success in recruiting students from populations that are under-represented in the field of medicine.

In the 2021 entering class of medical students, about one third of the students come from racial and ethnic groups that are under-represented in medicine.

About the Office of Multicultural Affairs, Dawson adds, “I think those staff members are a huge reason why so many under-represented students have been accepted to the SMPH, and it’s a huge reason why I feel like I have a place in medical school. I’m so thankful for spaces like that.”

Further, Valle and Dawson applaud the SMPH’s commitment to changing the standard for medical education.

“The UW School of Medicine and Public Health is far ahead compared to other medical schools in having conversations about health disparities and inequities,” says Dawson. “I’ve had conversations with residents who earned their medical degrees elsewhere and said they had no idea what health inequities are. That surprises me because we learned about that during our first week in medical school at the UW School of Medicine and Public Health.”

Bidar-Sielaff Named Diversity and Equity Associate Dean

Shiva Bidar-Sielaff, MA, CDM, has been named the inaugural associate dean for diversity and equity transformation for the University



of Wisconsin School of Medicine and Public Health (SMPH). She also is the UW Health vice president for diversity, equity and inclusion, a role she will continue.

Her appointment establishes a multifunctional SMPH Office of Diversity and Equity Transformation that will be integrated with the existing UW Health Office of Diversity, Equity and Inclusion. The unit will work closely with the SMPH Office of Multicultural Affairs, which oversees such programming for health professions learners.

"I am thrilled to be working in partnership with colleagues at the school. As educators of the next generation of health-sciences professionals and scientists, we are well-positioned to address health equity and the impact of racism on health," says Bidar-Sielaff.

She completed her undergraduate degree at Ecole d'Interprètes Internationaux in Belgium and holds a master of arts degree in international policy studies. In 1997, she joined UW Health to establish the medical-interpretation services program. Subsequently at UW Health, she became director of community partnerships and then chief diversity officer. In 2020, her role was elevated to a vice-president position.

"Ms. Bidar-Sielaff will direct our coordinated efforts to infuse the vital imperatives of equity, diversity, inclusion and anti-racism into all of our missions," notes Robert N. Golden, MD, dean of the SMPH.

Stephenson Named Multicultural Affairs Associate Dean

Jason Stephenson, MD, associate professor in the Department of Radiology at the University of Wisconsin School of



Medicine and Public Health (SMPH), is the new associate dean for multicultural affairs for health professions learners as of August 2021. He is leading efforts to enhance diversity, equity and inclusion in the school's degree programs and accredited residencies and fellowships.

"The national events of the preceding year have compelled me to seek more active ways to effect positive change in our community and beyond," says Stephenson. "My goal is to promote growth and stimulate thoughtful discourse on topics of equity and inclusion as they relate to our learning environments."

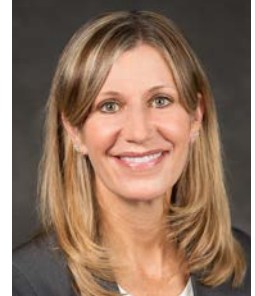
After he earned his medical degree from Washington University and completed a residency and fellowship at Mallinckrodt Institute of Radiology in St. Louis, he directed the musculoskeletal imaging fellowship at the University of Pennsylvania.

In 2012, Stephenson joined the faculty of the SMPH Department of Radiology, for which he is the director of musculoskeletal computed tomography and of medical student education. A former Centennial Scholar, he has received awards for his teaching and his commitment to compassion in patient care.

"Dr. Stephenson has been deeply committed to providing outstanding educational leadership," says Elizabeth M. Petty, MD '86 (PG '89), senior associate dean for academic affairs. "He is a strong, thoughtful advocate for learners at all levels and across all professions."

Sheehy Named a Robert Wood Johnson Foundation Fellow

Ann Sheehy, MD, MS, was named a Robert Wood Johnson Foundation Health Policy Fellow by The National Academy of Medicine.



An associate professor and chief of the Division of Hospital Medicine in the Department of Medicine at the University of Wisconsin School of Medicine and Public Health (SMPH), Sheehy has begun a year-long fellowship in Washington, DC, where she is participating in the health policy process in the congressional and executive branch offices and working on regulatory and legislative issues in public health.

"I have always believed that clinicians should be engaged in health policy to improve care for our patients. This fellowship provides an opportunity to combine my experience as a practicing physician and researcher with real-life policy in Washington, DC," says Sheehy.

In addition to her administrative and clinical roles, Sheehy conducts research on Medicare hospital outpatient (observation) status—specifically, how observation legislation and regulation may affect the most disadvantaged Medicare beneficiaries.

"Dr. Sheehy is an outstanding leader with a well-deserved national reputation for her expertise in health policy and effective advocacy," shares Robert N. Golden, MD, dean of the SMPH. "We are proud and delighted that she has been selected in this highly competitive field, and we look forward to the additional experience she will bring home to our school and academic health system."

Dempsey Receives Neurosurgical Society of America Medal

Robert J. Dempsey, MD, Manucher Javid professor and chair of the Department of Neurological Surgery at the University of Wisconsin School of Medicine and Public Health (SMPH), received the Neurological Society of America (NSA) medal at the society's 74th annual meeting.



The award is given annually to a person for "transformative lifetime contributions to the field of neurosurgery." Dempsey's contributions include patient care, teaching, research and extensive humanitarian work worldwide. With the help of multiple organizations, he has helped establish and support more than 20 neurosurgical training programs for physicians in underserved areas of Africa, Asia, and Central and South America. His work includes performing neurosurgical procedures, supplying equipment, organizing infrastructure and teaching.

As a researcher, Dempsey has more than 35 years of National Institutes of Health funding with multiple research projects on cerebral ischemia, vascular cognitive decline and repair of the injured brain. He has published more than 300 scientific articles. His excellence as an educator has been recognized internationally and with three clinical teaching awards from SMPH trainees.

The NSA award honors lifelong commitment to science, mentoring, neurosurgical service and education nationally and internationally.

NFL Awards Researchers \$4 Million to Study Hamstring Injuries

A research team led by investigators at the University of Wisconsin School of Medicine and Public Health (SMPH) was awarded a \$4 million grant by the National Football League (NFL) to study prevention and treatment of hamstring injuries for elite football players. Such injuries are common among NFL and other players.



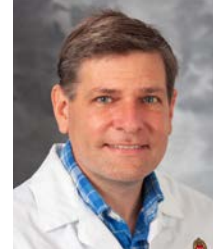
The award is part of the NFL's multi-year effort to better understand and prevent lower-extremity injuries. Findings aim to determine an athlete's propensity for injury and ways to mitigate that risk.

"Persistent symptoms, slow healing and the high rate of re-injury make hamstring strains a frustrating and disabling injury for athletes and a challenge for sports-medicine clinicians," says Bryan Heiderscheit, PT, PhD, the Frederick Gaenslen Professor of Orthopedics and Rehabilitation at the SMPH (pictured above). "To truly understand and reduce hamstring injury risk requires a study of unprecedented size and scope. We're able to do that now thanks to the NFL support."

The researchers will combine quantitative imaging, on-field biomechanics and computational analytics to determine risk factors associated with initial and recurrent injuries, and they will develop ways to help individualize risk assessment. The work also will aim to provide a road map for future research involving orthobiologics as a treatment for muscle-strain injuries. Other researchers are from the Australian Catholic University SPRINT Centre and Virginia-based Springbok Analytics.

SMPH and UW Health Conduct Moderna Vaccine Pediatric Trial

William Hartman, MD, PhD (top photo), and James Conway, MD (bottom photo), are serving as co-principal investigators for a Phase 3 clinical trial evaluating the safety and efficacy of the Moderna COVID-19 vaccine in children. The study, KidCove, is underway at American Family Children's Hospital in Madison.



Participants are grouped in three categories: 6 months to less than 2 years old; 2 years old to less than 6 years old; and 6 years old to less than 12 years old. Researchers hope to enroll approximately 4,000 children in each group, at 75 to 100 study sites in the United States and Canada, notes Conway, a professor in the Department of Pediatrics at the University of Wisconsin School of Medicine and Public Health (SMPH) and medical director of the UW Health Immunization Program.

"Getting children vaccinated will help protect everyone and get us closer to mitigating this pandemic," says Hartman, an assistant professor in the SMPH Department of Anesthesiology. "This vaccine is identical to the one given to adults today, but a lower dose; this trial will help us determine the safety and efficacy of the vaccine in kids."

To date, more than 5 million children have contracted COVID-19, and more than 400 have died. Though children's survival rates are higher than those for adults, it is clear the virus can still harm children, and they can pass COVID-19 to other people, including those at higher risk of severe disease, Hartman explains.



Harnessing the Power of Data

MATHEW'S COLLABORATIVE SPIRIT EXPANDS OPPORTUNITIES

by *Laura Hogan*

Growing up in the Indian state of Kerala, Jomol Mathew, PhD, studied agronomy at Kerala Agricultural University, where she had the opportunity to assemble data from several years of research by a team. Exposure to the power of data inspired her journey into clinical informatics aimed at improving human health through data-driven research and precision medicine.

"I was drawn to learning from and incorporating findings of past research. I learned as much as I could about data and computers in the context of biological research," recalls Mathew, inaugural chief of biomedical informatics and associate professor of population health sciences,

University of Wisconsin School of Medicine and Public Health (SMPH); director of informatics, UW Institute for Clinical and Translational Research (ICTR); and associate director of informatics, UW Carbone Cancer Center.

Mathew earned a doctorate in plant and soil sciences at the University of Massachusetts (UMass) Amherst and completed a post-doctoral fellowship in biostatistics and informatics at the New York University School of Medicine, where she became an assistant professor in 2003, when informatics was becoming a discipline.

"My background gave me a depth of perspective that allowed me to better understand the needs of those who use the data and help find solutions," shares Mathew.

Her next move was to Dana-Farber Cancer Institute in Boston, where she directed clinical and translational informatics for a decade. There, she led one of the first teams in the nation to develop systems for consenting patients, integrating genomic data with clinical data and using it for research. At that time, electronic health records (EHR) did not contain genomic information, so she and her team developed a platform that could tier genomic abnormalities and provide relevant information to health care providers. Mathew later became the chief research informatics officer at the UMass Medical School.

"Dr. Mathew has made powerful contributions, including using digital sensors for remote monitoring of research participants and EHR decision support for

advancing research and improving care," says Elizabeth Burnside, MD, MPH, associate dean for team science and interdisciplinary research and professor of radiology, SMPH, and deputy executive director, ICTR. "We were excited to recruit an informatician of her stature to oversee our informatics enterprise."

Arrival During the Pandemic

When Mathew joined UW-Madison in April 2020, the university had recently closed non-essential, in-person activities, a move that turned into a months-long accommodation to defend against COVID-19. Yet, Mathew quickly connected with her teams and began making crucial connections for informatics-based contributions to address the pandemic.

Together with Nasia Safdar, MD, PhD (PG '00, '02), SMPH professor of medicine—who recently became the school's inaugural associate dean for clinical trials and research director of the new Wisconsin Medicine Institute for Clinical Trials—Mathew led an interdisciplinary team that created a registry of conditions linked to COVID-19. The goal was to facilitate comparative effectiveness and outcome studies, assess and predict treatment responsiveness, and match patients to emerging clinical trials. The project resulted in a dashboard that supports clinical decision-making at UW Health.

In her role at ICTR, which is funded in part by a National Institutes of Health (NIH) Clinical and Translational Science Award (CTSA), Mathew facilitated UW-Madison's entry into a consortium of other CTSA sites to create the National COVID Cohort Collaborative, a repository of EHR data from COVID-19 patients, designed to help investigators identify the most effective treatments.

Mathew and her team successfully knit together the processes for identification of COVID-19 patients, preparation of EHR data for submission to the repository, and facilitation of human subjects and data protection agreements. She and Burnside have since received an NIH award to partner with the American College of Radiology and Marshfield Clinic to enhance real-time submission of data to the repository.

"If anyone had told me we could get so much accomplished with all of us working

remotely, I would have been skeptical. But the urgency of responding to the pandemic brought stakeholders together to fast-track critical decisions," says Mathew.

She credits the dedicated effort of many staff members—including Mike Collins, Gabe McMahan, Thomas Callaci and Laura Ladick—and thanks her entire team for their whole-hearted support.

"Before Dr. Mathew arrived at UW-Madison, I knew we would be happy to have her lead our efforts in informatics. Just prior to her recruitment, as part of an NIH review, other reviewers and I were very impressed with Dr. Mathew's vision and accomplishments. The SMPH is now benefiting from that same vision and talent," says Howard Bailey, MD (PG '91), director, UW Carbone Cancer Center.

Data Commons in the Cloud

"The team spirit we established through our COVID-19-centered initiatives has been sustained as we move on to schoolwide informatics initiatives," notes Mathew. "For instance, we are close to launching UW Data Commons in the cloud, in an impressive timeframe considering that it required a cross-institutional, data-sharing agreement between UW Health and the SMPH."

The UW Data Commons eventually will include EHR and genomic data, and data from the built environment, socioeconomic factors and environmental conditions. Moving it to the cloud provides enhanced computing and data-hosting abilities, and improved security.

Mathew explains that a key to launching the repository has been close collaboration with several UW Health leaders, including Cherodeep Goswami, chief information officer; Elizabeth Bolt, senior vice president and chief operating officer; Elizabeth Hagerman, PhD, chief innovation officer; and John Long, vice president, Enterprise Analytics.

Goswami says, "Dr. Mathew brings an energy and vision to our shared projects that has been pivotal to creating processes and enhancing existing systems. Her prior experience and expertise give a lot of confidence to our stakeholders as we

constructively challenge the status quo and move to a new way of thinking for tools and solutions for research."

SMPH Dean Robert N. Golden, MD, adds, "The SMPH and UW Health have an incredibly close partnership and a shared vision of using the power of research to elevate the health of people and populations. Dr. Mathew's remarkable expertise and experience, coupled with her natural propensity for establishing effective collaborations, will accelerate our progress in applying informatics to the advancement of health."

Next on the Horizon

A significant direction for the next 18 months involves a partnership between Mathew and Elizabeth (Betsy) Nugent, MSPH, CCRP, chief clinical research officer and director of the Wisconsin Medicine Institute for Clinical Trials, to improve recruitment of subjects into clinical trials. Their goal is to develop systems and processes for the MyChart patient portal to provide study-specific information directly to patients.

Nugent explains, "This potential use of MyChart has been evident, but we are now in a position to use the platform to provide personalized research study information to patients. This is a pivotal time for harnessing this technology to advance clinical trials."

Mathew also would like to expand upon her interest and early work related to collecting data from wearable devices. While such data is becoming commonplace, collection and integration into clinical records will require the computing and storage capacity of the cloud-based Data Commons.

Noting that she was attracted to UW-Madison for many reasons, including its cancer precision medicine resources, Mathew shares, "I lost a close friend to cancer, and it became important to me to not just do interesting research, but to make research quickly transferable to patients."

She concludes, "Most importantly, I saw that the leadership and staff here were willing to try things and see what works. We are building an informatics infrastructure that can help across the board. I'm excited about the future!"

Study Identifies How Lung Cells Sense Chitin

Some of the most common allergy-inducing organisms have one thing in common: chitin, which hardens cell walls in fungal spores.

Chitin triggers an immune response in the lungs, likely to fend off spores. When that reaction goes haywire, dangerous inflammation and asthma can result. Scientists have long sought to delineate how lungs sense and respond to chitin.

University of Wisconsin School of Medicine and Public Health researchers have discovered a chitin receptor in mammals. The protein,

LYSMD3, triggers an immune response in lung cells when it binds to chitin or chitin-bearing fungal spores.

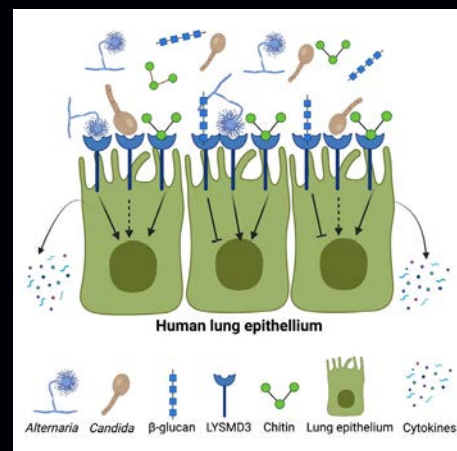
Bruce Klein, MD, PhD (PG '89), his postdoctoral researcher and lead author Xin He, PhD, and collaborators published their findings in *Cell Reports*.

Because scientists understand how plants sense chitin, He and colleagues scanned the human genome for proteins with chitin-binding motifs similar to plants. They discovered two predicted to be located where they could interact with chitin.

By reducing the amount of LYSMD3 in lab-grown human lung cells or deleting the LYSMD3 gene in these cells, inflammation was much lower in response to chitin or chitin-bearing fungi.

It is unclear how LYSMD3 affects the intensity of the inflammatory response, which is key to understanding when inflammation intensifies.

“Lots of this research was done with isolated human cells,” says Klein. “We would like to know how the cells behave in an intact animal and its relation to chitin-induced allergic disease.”



With asthma investigators, they have early evidence that LYSMD3 is expressed at much higher levels on respiratory epithelial cells from inner city children with asthma compared to those without the disorder.

Combined Treatments Eradicate Metastases in Mice

Immunotherapy has revolutionized cancer treatment. But some patients develop resistance to current immunotherapies, and others have cancers characterized by immunologically “cold” tumors, which evade or suppress their immune response.

While external-beam radiotherapy is one option to enhance immunotherapy, metastatic tumors are often too small or diffuse to treat this way. Instead, targeted radiopharmaceutical therapy—a radioactive element linked with a cancer-targeting molecule—can deliver

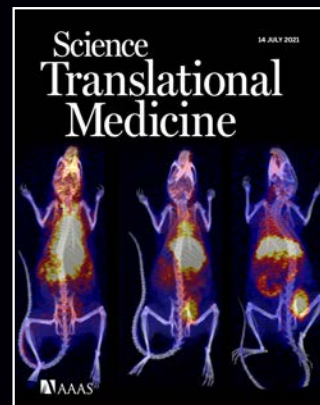
radiation to metastatic tumors upon decay of the element.

University of Wisconsin School of Medicine and Public Health (SMPH) scientists have found that combining targeted radionuclide therapy with immunotherapy significantly boosts the eradication of metastatic cancer in mice—even when radiation doses are too low to destroy the cancer. The research was published in *Science Translational Medicine*.

“With such low doses of radiation, we didn’t expect the response to be so positive. But we’re not trying to destroy the tumor with radiation; we’re trying to trigger the immune

system to kill it,” says lead author Ravi Patel, MD, PhD, who performed the research at UW-Madison as a Bentson Translational Research Fellow and who is now an assistant professor of radiation oncology at the University of Pittsburgh School of Medicine.

Patel, Zachary Morris, MD, PhD (PG '16), associate professor of human oncology at the SMPH, and colleagues gave mice with immunologically cold metastatic cancers varying doses of targeted radionuclide therapy along with immunotherapy. The mice that were given the combination treatments are the ones that



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were cured. And when tumor cells were reintroduced to those same mice, they fought off the tumor cells and did not re-develop cancer.

“Human clinical trials are needed to develop our finding into a new standard of care,” says Patel.

Interhospital Variations Impact COVID-19 Mortality

Data has revealed substantial interhospital variability in the outcomes of critically ill COVID-19 patients. To understand why, University of Wisconsin School of Medicine and Public Health (SMPH) researchers analyzed a sample of about 4,000 cases of patients who were admitted to intensive care units with lab-confirmed COVID-19 in 2020.

Matthew Churpek, MD, MPH, PhD, an associate professor of medicine, and colleagues found that these patients' presenting ICU physiology, demographics, the hospital population's

socioeconomic status and hospital strain are the driving factors behind interhospital variation in 28-day mortality rates.

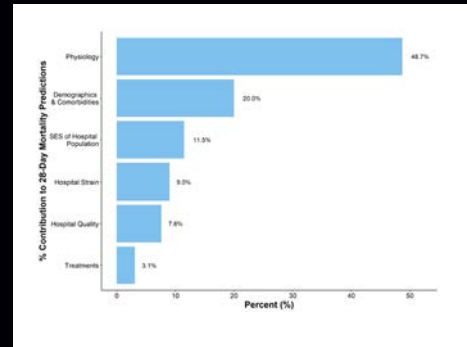
The study, published in the *American Journal of Respiratory and Critical Care Medicine*, is believed to be the first to investigate both hospital- and individual-level contributors to mortality variation among these patients.

Of the 4,019 patients, 38 percent died within 28 days of admission. But the mortality rate for those patients varied from 0 to 82 percent.

The team identified and categorized 80 variable

patient-level factors—including physiology and severity of illness early in the ICU stay; demographics and co-morbidities; and treatments given early in the ICU stay—or hospital-level factors, such as socioeconomic status, hospital strain and quality scores.

Researchers calculated each variable's contributions to the differences in mortality rates. The adjustments reduced the overall mortality variation among hospitals significantly. Patients' acute physiology, demographics, hospital socioeconomic status and hospital strain contributed most to the differences, while



the treatments provided contributed the least to the differences.

“For a patient critically ill with COVID-19, less than half of their mortality risk can be attributed to their physiology,” he notes. “This highlights the importance of other factors.”

Fungi Species Diversity Could Improve Drug Discovery

A collaboration between scientists at the University of Wisconsin School of Medicine and Public Health (SMPH) and the Oak Ridge National Laboratory (ORNL) has revealed that genetically distinct populations in a fungi species can produce unique mixes of secondary metabolites, which have applications in medicine, industry and agriculture. The finding could spur drug discoveries and boost knowledge of fungal evolution.

For people, secondary metabolites can be beneficial or harmful, such as penicillin or aflatoxin, respectively.

Most research, however, has overlooked how genetic differences between populations might influence metabolite production.

“We’ve shown that in at least some species, you can see sub-populations with their own repertoires of secondary metabolites that seem to be evolving,” says Mickey Drott, PhD, the study’s lead author and a postdoctoral researcher in the laboratory of Nancy Keller, PhD, SMPH professor of medical microbiology, immunology and bacteriology.

The findings, published in the *Proceedings of the National Academy of Sciences*,

represent a shift in thinking about fungal evolution, which is based on the idea that genetic diversity is relatively random within species.

The work started in Keller’s research program. Drott had previously sequenced the genomes of 94 strains of *Aspergillus flavus*, which is known to act as a human pathogen. He concluded that the strains comprised three genetically distinct populations.

For the ORNL collaboration, Drott removed the biosynthetic gene clusters responsible for the production of secondary metabolites. Ultimately, he found that 25 percent of



92 unique clusters showed variation corresponding to the distinct populations. The evidence that differences in gene-cluster content among populations may produce unique, population-level reservoirs of secondary metabolites also was validated through ORNL’s advanced analytical capabilities.

A New Leadership Role During a Pandemic

On March 1, 2020, I flew to Madison, Wisconsin, to start my new job as the ninth chair of the University of Wisconsin School of Medicine and Public Health's Department of Medicine (SMPH).

My dog, Watson, my house and most of my belongings remained in Charleston, South Carolina, where for seven years I had been chief of the Division of Pulmonary, Critical Care, Allergy and Sleep Medicine at the Medical University of South Carolina.

My first week at the SMPH included the usual onboarding details: ID badges, human resources paperwork, office setup. That Friday, I met many of our wonderful department faculty members at our in-person leadership retreat. I closed on my new house on Saturday morning and flew back to Charleston to meet the movers.

The next week, Watson and I got in my Jeep and started the drive to Madison.

On the advice of many, I'd planned to spend the first months in my new role getting to know people and learning how things work. That timeline went out the window between South Carolina and Wisconsin.

On Wednesday, March 11, 2020, the World Health Organization declared the COVID-19 outbreak a global pandemic. The next day, Governor Tony Evers declared a public health emergency in Wisconsin.

My phone started ringing with questions about clinic consolidations, emergency operations, remote work. Faculty were experiencing major uncertainty and anxiety.

I arrived in Madison on—appropriately—Friday the 13th. The next day, I had the first of what would become many conference calls with our department leaders, attempting to clarify information for them while telling movers where to unload boxes in my house.

Those first two weeks were chaotic and challenging. I reinvented my plans on the fly, knowing that I had to take charge

despite not yet fully knowing all the people and processes. I admit there were a few moments when I almost lost it.

Rising to the Occasion

The good news is that with time, I settled in, and although we were still very much in crisis mode, plans began to gel.

Our departmental conference calls evolved into more focused WebEx meetings, and we learned to work that way. We also started holding weekly virtual town halls for the full department. Major kudos go to Dr. Nasia Safdar, a professor in our department's Division of Infectious Disease and the medical director of infection control at UW Health. Her calm, rational COVID-19 updates were—and still are—very valuable.

Like other departments, we transitioned our Grand Rounds to a virtual format, and these sessions reached faculty and learners who previously wouldn't have been able to attend in person.

During this time, it was extremely helpful that I'm a pulmonary and critical-care physician. I was able to bring my expertise to leadership discussions on COVID-19's clinical consequences and intensive care unit management. As then-president-elect of the American Thoracic Society, I also talked weekly with experts nationwide to learn how they were managing the pandemic.

People in our department absolutely rose to the occasion. We stood up eight new hospitalist services at University Hospital and at UW Health at The American Center. We added a medical ICU team at University Hospital, and our partners at UnityPoint Health—Meriter Hospital expanded their provider rotation, doubling the number of available ICU beds. We transitioned to telemedicine and virtual meetings. Our faculty took on extra hours and clinical responsibilities, often stretching themselves way beyond their comfort zones. I'm still

incredibly impressed by their flexibility, professionalism and patient-centeredness in the face of so much uncertainty.

It didn't ever cross my mind that we might not get through this. I was a pulmonary fellow in San Francisco during the AIDS epidemic. That was devastating, but I've seen HIV go from a death sentence to a manageable disease. I knew we'd make it.

The Hidden Opportunity in Crisis

The crisis isn't over yet, but I'm now able to focus on things that were on hold during the first year, like interacting with residents and developing our research portfolio.

We recently had another departmental leadership retreat when it was deemed safe to do so in person. We have some new faculty on the team, and that meeting was the first time I'd met some of them face to face. Yet I felt like I knew them well already.

COVID-19 forced us to quickly make changes, but we can and do work differently now. This situation provided hidden opportunities for growth and improvement.

Looking back, I realize that coming in as a new department chair always carries with it an element of worry: you're stepping into someone else's shoes. But during a crisis, that goes away—you just have to act.

So to anyone who is fortunate enough to start a new leadership role during a global pandemic, I'd offer some advice. Embrace change. Maintain flexibility. Pivot quickly. Understand what's happening on the ground. And never let a crisis go to waste.

LUKE DAVIS



Lynn M. Schnapp, MD, ASTF

George R. and Elaine Love Professor and Chair, Department of Medicine, University of Wisconsin School of Medicine and Public Health



I Know YOU

... OR DO I?

If you think you can identify the person in the photograph at right, send your guess to quarterly@med.wisc.edu. We'll draw one of the correct responses and announce the winner in the next issue of *Quarterly*.

For the last issue (see below), Kaylene Fiala, MD '17, won the prize drawing and will receive a gift from the Wisconsin Medical Alumni Association!



HINT ABOUT PHOTO ABOVE:

He is a quick-witted history buff.



ABOUT LAST ISSUE'S PHOTO:

In the last issue of *Quarterly*, 13 people correctly identified the photo of Gloria Hawkins, PhD, who retired in spring 2019 after 41 years on the University of Wisconsin-Madison campus and 34 years of continuous service. For nearly 20 years, she was the assistant

dean for multicultural affairs at the UW School of Medicine and Public Health.

From 2013 to 2019, Hawkins was the assistant vice provost in the UW-Madison Division of Diversity, Equity and Educational Achievement. She directed the Chancellor's and Powers-Knapp Scholarship Programs. The latter, now called the Mercile J. Lee Scholars Program, is a merit-based program for academically talented students from under-represented, diverse racial/ethnic and disadvantaged groups who show leadership potential and a demonstrated interest in and commitment to service. Her work helped create opportunities for more than 650 undergraduates.

Daniel Cabrera, MD '07, MPH '08, noted, "Dr. Hawkins is one of the main reasons that I chose to come to the SMPH and one of the people who made those challenging years a little better. Her laugh and smile are infectious."

Kalindi Batra, MD '03, recalled, "She helped support my siblings and me, and I think of her weekly in my busy medical practice in Littleton, Colorado."

Dutima Batra, MD '01, wrote, "Dr. Hawkins touched the lives of hundreds of students over her years of service. We send much love and deep respect to her from the Batra family."

Lauree Thomas, MD '79, commented, "Dr. Hawkins fulfilled the many roles of leader, mentor, compassionate caregiver, recruiter, counselor, professor and more.... Her extraordinary work has been inspiring, transformative and rooted in the principles of academic excellence, leadership and community engagement."

Chris Hammond, MD '01, shared, "She was such a support to my wife, infant son and me. I think of her often and want her to know how much of an impact she had on our lives."

**PLEASE SHARE
YOUR NEWS!**

Please send us information about your honors, appointments, career advancements, publications, volunteer work and other activities of interest. We'll include your news in the Alumni Notebook section of *Quarterly* magazine as space allows. Please include names, dates and locations. Photographs are encouraged.

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At the 2016 WMAA Scholarship Reception, fourth-year medical student Yusi He (right) poses with donor Marilyn Schilling, who funded a scholarship that He received.

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Start a need-based scholarship as an individual, family or class, or add to an existing need-based scholarship! Your fund will receive a match of \$12,500 from the Wisconsin Medical Alumni Association (WMAA) once \$12,500 in new gifts has been received.

These matching funds will be available until December 31, 2021, or until \$500,000 of matching funds has been expended.

For more information, please contact Sara Dillivan-Graves at (608) 280-1124 or via e-mail at Sara.DillivanGraves@supportuw.org