Few research projects have stood the test of time like the Fels Longitudinal Study. Started in 1929, it became affiliated with the School of Medicine in 1977. Today, the study is the world’s largest and longest-running study of growth and development throughout the lifespan. Deemed a “national treasure” by the National Institutes of Health, the Fels Longitudinal Study has recently marked its 75th anniversary, and its databank is being used extensively in several ongoing and new research projects.

Research on Gulf War Syndrome has been the focus of an important Department of Defense grant, and the work of our scientists has improved the understanding of the interaction between stress and non-toxic doses of neurochemicals, such as DEET and sarin.

Another major grant is allowing our scientists to examine nine state vocational rehabilitation systems in an effort to improve the success rate of those programs. Often these programs fail because of underlying and undiagnosed substance abuse in the population served.

In an effort to meet the needs of underserved populations, many of our students have been awarded competitive National Health Service Corps scholarships. Their dedication and commitment to providing high quality health care for these populations is inspirational.

All of these articles reflect our mission and highlight the outstanding work of Wright State’s faculty, students, and staff.

Sincerely,

Howard M. Part, M.D.,
Dean
Our “National Treasure” Turns 75

“One of the most unique aspects of the Fels Longitudinal Study is being able to relate aspects of childhood development to adult outcomes using familial data from multiple generations, and it’s the continued involvement of the participants in the study that makes that possible.”

Roger Siervogel, Ph.D., Fels Professor and director of the Lifespan Health Research Center
In 1931, even before her birth in 1932, Warren and Mildred Drake enrolled Margaret, their first born, into a new research project called the Fels Longitudinal Study. A prominent local family since 1827, the Drakes were among the first 100 families to participate in the study. Margaret’s sisters, Dorothy and Sarah, followed as participants, as did Margaret’s children and grandchildren. In fact, her grandson Warren, now a 16-year-old high school student, became the 1,000th infant to be enrolled.

Named after Philadelphia soap maker Samuel Fels, who provided the initial funds for an independent research institute in Yellow Springs, Ohio, the study was established in 1929 with the goal of measuring biological differences among people. At its inception, the primary focus of the Fels Longitudinal Study was the growth and development of children. That focus has evolved to include the examination of body composition, risk factors for cardiovascular disease, genetic epidemiology of many common diseases, and the aging process.

Today, the Fels Longitudinal Study is the world’s largest and longest-running study of growth and development throughout the lifespan and has been characterized by a committee of experts at the National Institutes of Health as a “national treasure.”

“One of the most unique aspects of the Fels Longitudinal Study is being able to relate aspects of childhood development to adult outcomes using familial data from multiple generations, and it’s the continued involvement of the participants in the study that makes that possible,” explains Roger Siervogel, Ph.D., Fels Professor and director of Wright State University’s Lifespan Health Research Center, where the study is managed.

Building upon the strong foundation and valuable resource of the Fels Longitudinal Study, the Lifespan Health Research Center has become a collaborative, cohesive unit that has greatly expanded its critical mass and its research programs. In 2004, four new NIH grants were funded for nearly $11 million. About half the research done at the Lifespan Health Research Center is directly based on the Fels Longitudinal Study, and it remains a critical resource for studying risk factors for many common diseases and gaining new knowledge to improve the quality of life of people across their lifespan. Similar studies taking place at the center include the Southwest Ohio Family Study of Cardiovascular Disease and the Miami Valley Family Study of Aging.

The battery of tests used in the Fels Longitudinal Study has changed over the past 75 years as technology and medical knowledge have advanced, but the anthropometric data—the meticulous measurement of height, weight, body circumferences, skinfold thickness, and bone-breadth—have remained constant. Performed by two independent observers, the paired, repeated measurements must fall within specific ranges of accuracy.

Margaret, holding her baby picture, has been a research participant in the Fels Longitudinal Study since before her birth.

(L-R) John, the eldest of Margaret’s children, and her twins Jennie and Jeff, joined the study in utero.
The Lifespan Health Research Center’s biomedical studies are setting scientific precedents in research techniques and analysis. Some of the research procedures conducted at the center:

(Right) Anthropometry. Anthropometry includes the body measurements that are taken to help assess body composition, growth rate, and cardiovascular disease risk. Standard measurements, such as height and weight, are linked with circumferences, breadths, and skinfolds to provide detailed and valuable information about an individual’s body type and bone structure.

Enrolled in many instances before they were born, the children, grandchildren, and great grandchildren of the original families form the core of this research study. More than 1,100 members of the “Fels Family” still come to Dayton from across the nation for regular testing. Children under 18 months visit every three months for measurements of their growth and development. Children aged 2 to 18 visit twice a year, and adults every two years. The study has nearly 5,000 additional names on file. Certain family members—including Margaret’s husband Richard—were invited to join the study as adults. “This was what we did twice a year. It was routine for us,” says Margaret.

Her children, John and twins Jennie and Jeff, remember well their biannual visits. “I loved it,” says John. “It was fun. Nobody else did this. I felt important.” They formed close relationships with the staff who provided transportation—and ice cream—from their home to the institute and administered a battery of painless tests. They remember simple things, like Oscar the Skeleton, whose hat Jeff would wear. Or, the statue of the mother and child on the staircase. Or, giving their artwork to staff members who would post it on the wall. For the children, there was the much anticipated “toy closet” where one selected birthday and “half-birthday” gifts to take home. Adults receive a stipend for their participation.

Participants may elect to skip a test that makes them uncomfortable, says John’s daughter, Jeana, who now skips her blood draw after fainting when she was in fifth grade. Although the tests do not take the place of an annual physical, the results are shared with each participant and his or her physician. The tests, explains Jennie, “would cost a fortune if you had to pay for all of it,” and they provide an “early alert system.” For example, Jennie’s daughter Lindsay was referred to her physician when her echocardiogram showed a slight mitral valve prolapse.

It is the treasure trove of serial data that helped develop the first pediatric growth charts for infants (birth to 36 months) produced by the National Center for Health Statistics in 1977. Used by physicians nationally and internationally as a baseline for normal development and as a screening tool for nutrition related health problems, these charts were essential clinical tools. In 2000, a group of scientists, including experts from the Lifespan Health Research Center, updated and revised the charts to include BMI (Body Mass Index) measurements using national data.

The Fels data has supported entirely new directions for research efforts. For example, a new study is using the measurements of skull size and shape from the vast collection of head radiographs to locate the regions of the genome involved in normal craniofacial development, significant in common congenital defects such as cleft lip and palate. Another examines the genetics of infant growth rates. Infants who are small at birth and then grow rapidly during the first years of life are at heightened risk of obesity and cardiovascular disease later in life. This study has demonstrated that infant growth is very highly heritable. A related research focus examines sexual maturity of U.S. children in relationship to their growth.

The data from the Fels Longitudinal Study is being used to study the genetic determinants of bone mass accrual during childhood and how that might impact adult bone

thought it was a major
health and osteoporosis risk. Recent work has linked bone development in children to several chromosomal locations. The genetics of skeletal maturation is also being studied. During childhood, the skeletal age of a healthy child may vary two to three years from the child’s chronological age. The genes that influence this variation in normal skeletal development have not been fully identified, although recent findings reveal a consistent link between skeletal development in early and middle childhood and markers on chromosome 8.

Fels Longitudinal Study data has emerged as a critical resource for research on aging: gait analysis for individuals with osteoarthritis; genetics of age-related muscle loss; genetic risk factors for osteoporosis; and the possible links between body composition and joint health across the lifespan. Research projects that build upon the Fels Longitudinal Study include analyzing associations among measures of body composition and risk factors for cardiovascular disease, and comparing the metabolic syndrome in adults to their childhood risk factors. In another project, the Fels Longitudinal Study data were one of three national resources used to determine the amount of total body water in adults and children. Particularly relevant for persons with end-stage renal disease and dialysis treatments, the results were the first such data published in more than 30 years.

“With a heavy emphasis on serial data analysis and genetic epidemiology, our research projects all dovetail quite nicely,” says Ellen Demerath, Ph.D., associate professor of community health and associate director of the Lifespan Health Research Center. “There are ample opportunities for new studies that springboard off of or expand existing resources. And we are also creating new resources—we are growing family trees everyday we can.”

One long-term member of the Fels Family—and her family tree—has demonstrated the loyalty participants have toward the project: “I knew it was a research study of growth and development,” says Margaret. “I thought it was a good thing to do, and it remains a major part of all of our lives.”

—Judith Engle

Current Major Research Grants at the Lifespan Health Research Center

**Adiposity, Disease Risk Factors, and Lifetime Health**
Principal investigator: Roger Siervogel
Funding agency: NIH/NICHD
Total cost: $6,038,098

**Genetic Epidemiology of CVD Risk Factors**
Principal investigator: Richard Sherwood
Funding agency: NIH/NIDCR
Total cost: $1,386,098

**Longitudinal Cardiac Outcomes and Body Composition**
Principal investigator: Bradford Towne
Funding agency: NIH/NIDDK
Total cost: $2,770,123

**Genetic Regulation of Adiposity and Associated CVD Risks**
Principal investigator: Shumei Sun
Funding agency: NIH/NIDDK
Total cost: $2,496,794

**Metabolic Syndrome Genetic Analysis of Osteoporosis Risk Factors**
Principal investigator: Stefan Czerwinski
Funding agency: NIH/NHLBI
Total cost: $4,450,692

**Chronic Disease Antecedents Adult Early Life**
Principal investigator: Shumei Sun
Funding agency: NIH/NHLBI
Total cost: $1,747,117

**Lifetime Health Risk Factors, and Adiposity, Disease Outcomes and Body Composition**
Principal investigator: Bradford Towne
Funding agency: NIH/NHLBI
Total cost: $2,247,969

**Genetic and Environmental Influences on Childhood Growth**
Principal investigator: Karen Remsberg
Funding agency: NIH/NICHD
Total cost: $1,737,117

**Genetic Architecture of the Human Craniofacial Complex**
Principal investigator: Shumei Sun
Funding agency: NIH/NIDCR
Total cost: $877,611

**good thing to do, and it part of all of our lives.”**
The issue of access to health care is often times associated with people who do not have insurance, the working poor or the homeless. It is instead much broader, and is an issue that has been a concern, and a priority, for leaders in the nation’s health care disciplines for several decades.

In regions throughout the nation there are pockets of underserved populations where the shortage of health care workers and health care facilities, most frequently in rural or urban inner city areas, is critical.

One way to alleviate the nation’s shortage and maldistribution of health care workers, including physicians, is the National Health Service Corps (NHSC). The NHSC has helped to provide comprehensive, team-based health care since the 1970s to more than 3,000 communities across the nation.

Since 1992, 22 Wright State medical students have received highly competitive NHSC scholarships. One goal of the NHSC is to have their health professionals continue living and working in the communities where they serve their commitments. One such example is Wright State alumnus Christopher Gillespie, M.D. (’98).

Dr. Gillespie practices family medicine in a community health center network in rural central California. His patients are primarily Hispanic migrant farm workers, who travel the country north to south picking and packaging the fruits of ripening fields and trees. They typically visit a health clinic only when the need is extreme, but experience frequent work related diseases, such as dermatitis caused by working in fields sprayed with pesticides. An NHSC scholar since his third year of medical school, Dr. Gillespie states, “By working in this community I have come to understand the extreme hardships that many Americans face when it comes to obtaining care for basic health needs. The National Health Service Corps has given me the opportunity to work here, with dedicated professionals who are committed to improving health care for everyone. I would definitely recommend the Corps to any student whose goal is reaching underserved populations.”

Another NHSC scholar is Margaret Tomcho, M.D. (’99),
who practices pediatric medicine in the small town of Montrose, on Colorado’s extreme western slope. Dr. Tomcho made her commitment to serve in the NHSC in her second year of medical school and started her NHSC service after completing her pediatrics residency in urban Cleveland, Ohio. “My desire,” she says, “was to participate in making health care more accessible to all people. The NHSC is committed to bringing health care workers to clinics and regions where there are no other options for care.”

Two recent National Health Service Corps scholars are Steven Hegedus, M.D. (’02), and Heidi Duff Gullett, M.D. (’04). Both are still in their primary care residencies. Dr. Hegedus owes four years of service and will begin working in the NHSC after his internal medicine residency at The Ohio State University Medical Center. “I entered medical school with the specific desire to practice primary care medicine in a rural area,” states Dr. Hegedus. “The NHSC seemed like the perfect match for me.”

Dr. Gullett will begin her service with the NHSC after completing a family practice residency, a Master of Public Health, and a preventive medicine residency. “I chose to enter medicine because I felt called to serve poor populations by providing them medical care,” she explains. “The NHSC’s mission aligned with the reasons for my life’s choice of work, so I applied. My observation while working my residency here in Portland, in a federally qualified health center—a type of NHSC placement site—is that there is a critical need for passionate, dedicated primary care providers who aspire to affect social change. The barriers to providing health care to these populations are enormous and at times overwhelming.”

Students usually apply during their first or second year in medical school and, if chosen to be an NHSC scholar, receive full tuition and fees, 12 monthly stipend payments, and the possible reimbursement for other educational expenses. In return, the scholar, after completing residency and board certification, serves one year in the National Health Service Corps for every year of support received.

“By working in this community I have come to understand the extreme hardships that many Americans face when it comes to obtaining care for basic health needs.”

Wright State’s medical students and alumni have consistently demonstrated a passion for improving health care within their communities. Our National Health Service Corps scholars are reflecting that commitment, one physician and one site at a time.

—Nancy Harker

(R) Heidi Gullett, M.D. (’04), reviews directions with a patient during a medical mission trip to Tanzania during her fourth year of medical school.
A multidisciplinary team of Wright State researchers has found that chemicals suspected of causing Gulf War Syndrome have subtle effects on the cardiovascular system and brain and identified biomarkers for Multiple Chemical Sensitivity (MCS) and low-level exposure to the nerve agent sarin.

In a four-year study directed by Mariana Morris, Ph.D., professor and chair of pharmacology and toxicology, and Daniel Organisciak, Ph.D., professor and chair of biochemistry and molecular biology, the researchers looked at how stressful conditions combined with low-level chemical exposure could damage the body’s systems in ways that previously eluded diagnosis. Several cutting-edge research tools were applied to the studies, including gene array technology and state-of-the-art imaging. Team members ranged from cellular toxicologists to clinical scientists.

Gulf War veterans have complained of a variety of symptoms, including headaches, joint pain, fatigue, diarrhea, skin rashes, and dizziness. Evidence suggests they might have suffered neurological damage from some combination of stress and exposure to the insect repellent DEET; pyridostigmine bromide (PB), a medication used to protect against nerve gas; or nonlethal doses of sarin. A recent Government Accountability Office report confirmed that exposure to low-level sarin during the Gulf War was more frequent and widespread than previously acknowledged.

Dr. Morris and her team studied how stress modifies the response to chemical exposure as well as the long-term effects of sarin. Using integrative models, they monitored blood pressure, heart rate, and behavior in conscious mice and followed this up with neurochemical and genetic analysis. Early published experiments showed that stress sensitized the mice to chemical exposure. Recent data demonstrates that exposure to low doses...
of sarin—doses so low they cause no detectable physiological changes—produces long term effects on brain neurochemical systems and cardiovascular function. Mice were tested more than two months after sarin injection. Surprisingly, there was a marked reduction in heart rate variability as well as activation of brain noradrenergic systems. According to the researchers, this indicates there is an activation in autonomic drive to the heart mediated by central neurochemical changes, which is compatible with clinical studies in Gulf War veterans. These data raise concerns about possible public health effects of exposure to even sub-clinical levels of sarin.

David Cool, Ph.D., associate professor of pharmacology and toxicology, studied proteomic changes in the hypothalamic and pituitary axis (HP-axis) in response to the common Gulf War chemicals sarin, prophylactics, and/or insecticides. “The data indicate that specific proteins in the HP-axis and pancreas are affected. We were able to show that there are acute effects of both PB and sarin on activity in the hypothalamic region of the brain, but not in the cortex. This is significant because it suggests mechanisms for toxicity as well as treatment in cases of nerve agent exposure,” Dr. Cool explains.

The team under the direction of Dr. Organisciak undertook five modules that looked at animal and human samples for genetic and biochemical differences caused by repeated exposure to low levels of chemicals. These included tests for the auditory brainstem pathway, enzyme activity, and brain metabolism using NMR. “We wanted to look at the effects of lower levels of exposure at the molecular and cellular levels,” he says. “The chemicals were tested alone and in combination in animals or in human nerve cells in tissue culture. Using blood samples from Gulf War veterans and civilians with MCS, we also studied enzymes that detoxify chemicals.”

“**We wanted to look at the effects of lower levels of exposure at the molecular and cellular levels.”**

“Low levels of chemicals, including formaldehyde and various insecticides, pervade modern homes and work places,” explains Gerald Alter, Ph.D., professor of biochemistry and molecular biology. “Though the toxic agents do not bother most people at normal, low concentrations, some individuals have clear adverse reactions. We examined the activity of four enzymes in both chemically sensitive and normal control populations, using a double blind protocol. We found that chemically sensitive individuals generally have lower activity levels than control groups. We were able to clearly discriminate between normal and formaldehyde-sensitive groups and between normal and organophosphate-sensitive groups. This information may be clinically useful to help identify or confirm the diagnosis of chemical sensitivity.”

The research was funded in part by a $7.2 million grant from the Department of Defense, which enabled Wright State to establish the Gene Expression Laboratory, the forerunner to the Center for Genomics Research (CGR), employing the Affymetrix GeneChip system. According to Steven Berberich, Ph.D., associate professor of biochemistry and molecular biology and CGR director, “This equipment has allowed us to address novel scientific questions about the effects of low-dose sarin on gene expression in the brain and nerve cells.”

Wright State’s Departments of Biochemistry and Molecular Biology and Pharmacology and Toxicology were partners in the research. Other collaborators included the Tri-Services Toxicology Unit at Wright-Patterson Air Force Base, the Dayton VA Medical Center, and Wright State’s Departments of Community Health and Emergency Medicine. The project received the strong support of U.S. Rep. David Hobson and local philanthropist Mary Petticrew, who saw the need for this type of research and the potential for linking Wright State into national research programs through the Defense Department.

— Robin Suits
The U.S. Census of 2000 counted more than 49.7 million Americans with some type of long-lasting disability, or nearly one in five people. What is not widely known is that disabled individuals are at a higher risk for substance abuse than the general population. Some of the systems and supports for persons with disabilities are poorly equipped to deal with addiction. And, programs to treat alcohol and drug dependency frequently cannot accommodate the unique challenges presented by disabled clients.

As part of Wright State’s Center for Interventions, Treatment and Addictions Research (CITAR), the Substance Abuse Resources and Disability Issues (SARDI) program investigates factors contributing to substance abuse among disabled persons and develops specialized prevention, awareness, screening, and treatment programs for them. In 2005, SARDI, directed by Dennis Moore, Ed.D., associate professor of community health, will celebrate its 25th year in a highly specialized field that serves a vulnerable and often disenfranchised population. SARDI has been funded by the National Institute on Disability and Rehabilitation Research as a Rehabilitation Research and Training Center (RRTC) on Drugs and Disability since 1997.

State vocational rehabilitation (VR) programs are a major source of SARDI research. According to Dr. Moore, about 25 percent of disabled persons who apply for these programs have an underlying substance abuse problem. These individuals frequently are disqualified from or unable to perform in a job setting. RRTC researchers are working to adapt a substance abuse screening instrument for use with disabled persons. Dr. Moore hopes that this tool, once created, will be used to identify and assist persons who need substance abuse intervention in order to have a successful VR outcome.

Julie P. Gentile, M.D., assistant professor of psychiatry, meets with one of the individuals in the Consumer Advocacy Model program.
The RRTC also is beginning to examine unsuccessful case closures in state VR systems. With 55 percent of cases being closed unsuccessfully, $450 million dollars is being lost to the system each year. Only successes are tracked—to date, no research has been done on case closures due to lack of success. “What happens to these people?” asks Dr. Moore, referring to those whose attrition in VR is due to substance abuse. “Probably they continue to abuse and can’t pass drug tests for employment. This is the first ever nationally represented study of what happens to these people.”

Policy research documents practices and methodologies that work, and why. It also identifies negatives: exclusionary practices, duplication of effort, lack of cultural competence, poor training for staff, and other factors that affect the quality of service to the consumer. Through partnership with the Congress of State Administrators of Vocational Rehabilitation and a $2.8 million federal grant from the Rehabilitation Services Administration, SARDI researchers are embarking on a study of policy differences among nine different statewide vocational rehabilitation programs. The exchange of information should lead to better, more consistent practices in vocational rehabilitation facilities across the country.

Dayton’s Consumer Advocacy Model (CAM) is the treatment component of the SARDI program. Dr. Moore states that “the CAM program truly does serve the most difficult clientele in the alcohol, drug, and mental health fields. Typically, people get to that program by failing in others, sometimes multiple times.” Replacing paternalism with consumerism, CAM involves patients and their families in goal setting, planning, and follow-through. The professionals involved in each consumer’s case use a team approach, and provide a variety of services. In addition to assessment, monitoring, education, and peer support groups, CAM offers mental health counseling, vocational services, and referral for other issues that affect quality of life and the consumer’s ability to make progress in treatment. This may include “the basics” such as housing, transportation, and medical needs.

CAM has been nominated by the Substance Abuse and Mental Health Services Administration of the U.S. Department of Health and Human Services as being one of nine exemplary programs in the country that is creatively funding dual diagnosis patients. CAM consumers have been enrolled in clinical trials, participated in focus groups, taken surveys, and volunteered their personal stories in order to encourage others on the road to sobriety.

Are substance abuse programs adapting to better serve the disabled? Dr. Dennis Moore believes so. “One of the things that gets me out of bed every morning is that we are making a difference in the lives of people in Montgomery County, and literally saving lives,” says Dr. Moore. “SARDI has in many ways researched for and advocated for persons and disabilities that would otherwise not be represented in research or policy. This is a topic that is still not fully understood, or it’s still misunderstood, and there’s a whole lot of important work to do.”

—Sue Rytel
Dr. Paul Draus spends much of his time in the rural counties surrounding Dayton because he’s studying the use of illicit stimulants, a growing but relatively unknown problem in Ohio. “The goal is to learn more about this hidden issue,” says Dr. Draus, project ethnographer for the Rural Health Study and research scientist in the Center for Interventions, Treatment, and Addictions Research. He also serves as a regional epidemiologist for the Ohio Substance Abuse Monitoring (OSAM) network. In this role, he conducts interviews and focus groups with active drug users and substance abuse service providers concerning trends in illicit drug usage.

His involvement in this work stems from an initial interest in journalism and writing. Inspired by such writers as Nelson Algren, a Chicago writer who emphasized the importance of direct immersion in urban subcultures, Dr. Draus searched in the early 1990s for a job that would provide unique experiences. “I wanted to work in outreach, something hands-on,” he says. “You have to go there and see it yourself to understand what’s happening.”

As part of his studies, Dr. Draus conducted ethnographic interviews with patients and healthcare workers. “It really taught me how to relate to people on a very basic level,” he says. His valuable experiences working with edge populations were compiled in a recent book entitled Consumed in the City: Observing Tuberculosis at Century’s End.

The book explores how a complete understanding of the disease is impossible without understanding patients’ lifestyles and the inequalities of inner-city segregation, addiction, and poverty. “It’s important to get the statistical data,” he explains, “but the firsthand experience is also important.”

While working in Chicago, Dr. Draus completed his Ph.D. in sociology at Loyola University. He also holds a B.A. in English from Loyola, as well as an M.A. in American studies from the University of Wyoming. Before coming to Wright State, he was a visiting assistant professor of sociology and American studies at Grinnell College in Iowa from 2000 to 2002. “What really interested me with this job (at Wright State) was the opportunity to go out into the field,” he says. “It seemed like a real challenge.”

—Robert Boley
“On the road again” could be Dr. Julie Gentile’s theme song as she moves daily from one responsibility to another. As an assistant professor of psychiatry, Dr. Gentile teaches residents on Tuesdays. With a passion for working with individuals with mental illness and mental retardation, Dr. Gentile spends another day each week as the attending psychiatrist at Montgomery County Mental Retardation and Mental Disabilities (MRDD) Mental Health Supports and Services. “It is very rewarding for me because it’s an underserved population and they are so appreciative of quality psychiatric and medical care. Because some individuals have communication difficulties and some are non-verbal, it’s more challenging to connect with them, to collect information and to make a treatment plan.”

She spends yet another day each week with the Consumer Advocacy Model program, a treatment component of the Substance Abuse Resources and Disability Issues program. Dr. Gentile also serves as the project director for the Coordinating Center of Excellence (CCOE) in Dual Diagnosis (Mental Illness/MRDD) and regional director of CCOE Consultation and Assessment for the State of Ohio.

Another of Dr. Gentile’s passions is working with the medical students as director of Medical Student Mental Health Services. “It keeps me connected with the medical school. I’m not so far removed from medical school that I forget where they are right now. I can identify with them. I think the mental health services should be top quality because that is what the med students deserve.” Dr. Gentile was married and the mother of two daughters while she attended medical school, receiving her medical degree from Wright State in 1996.

For Dr. Gentile, the greatest benefit of being at Wright State is the mentoring she experiences. She feels the Department of Psychiatry is full of colleagues who help, encourage, and guide her in her professional pursuits. Such support allows her to engage in a number and variety of endeavors, including clinical, educational, administrative, and scholarly activities.

—Gwen Sloas
Alumni Association Advisory Board selected Terrence Schneiderman, M.D., as the recipient of this year’s School of Medicine Outstanding Alumni Award. This marks the first time the award has been given posthumously.

Dr. Schneiderman received a Bachelor of Science degree from University of Cincinnati in 1977. After graduating from the School of Medicine in 1982, he completed a general surgery internship at Wright State in 1983. “He was very proud of Wright State, and proud to have been a part of it. He would talk about it any opportunity he had,” says his wife Kathy Schneiderman. He later finished his training in otolaryngology at the University of Vermont and Dartmouth-Hitchcock Medical Center before returning to Dayton.

He was a cochlear implant surgeon at Miami Valley Hospital and Children’s Medical Center and led the surgical team that implanted these devices in several local children and adults. Besides his technical excellence, Dr. Schneiderman was known for being very sensitive to his patients’ needs. “Not only was he a skilled surgeon, but he was also a compassionate physician. He was an incredible listener,” says Mrs. Schneiderman. “He always said that the most important part of seeing a patient was listening to the history.” He encouraged one of his former patients, Doris Graessle, to found Cochlear Implants of the Miami Valley, a support and information group for anyone with interest in cochlear implants.

Dr. Schneiderman died June 9, 2003, at age 47 of a brain tumor, leaving behind his wife Kathy and three children. His oldest, Jenni, is 19 and currently a freshman at Kenyon College. Ali is 16 and attends Centerville High School; Stuart is 13 and in the seventh grade at Mag-sig Middle School.

Dr. Schneiderman was nominated by fellow alumnus, neighbor, and friend Dr. David Roer (‘84). “In his mind, giving was very comfortable. Receiving wasn’t very comfortable,” says Mrs. Schneiderman. “He would have been very humbled by this award.”
It’s time again for an update on the alumni association. First, I would like to thank Dr. Gary LeRoy (’88) for his years of leadership and wish him well as he moves on to a new career path as the assistant dean for Minority and Student Affairs at the School of Medicine.

The Medical Alumni Association continues to further the educational, social, and charitable interests of School of Medicine alumni. Now in our 21st year, we have finalized and endowed the Medical Alumni Scholarship, and the first recipient will soon be recognized. The recipient of the Medical Alumni Scholarship will be: 1) a medical student preparing to start his/her fourth year, 2) an outgoing individual demonstrating leadership, class involvement, merit, and community service, and 3) a student in good standing.

This will also be a landmark reunion year, with our first five-class reunion and the first reunion held outside of Dayton. The classes of 1980, 1985, 1990, 1995, and 2000 will be celebrating in Cincinnati, July 15–17, 2005. The weekend’s events will include a riverboat cruise, C.M.E., a private, after-hours dinner and reception at Newport Aquarium, and a Cincinnati Reds baseball outing. I look forward to seeing many of my classmates this summer in Cincinnati!

On a sad note, we lost a great WSU and Dayton medical community leader in 2004, with the death of Dr. John Gillen, who had a great impact on many of us who attended Wright State University School of Medicine. He was chair of Family Practice at Wright State and acting director of St. Elizabeth Family Practice Residency Program, among his many other duties during my time as a medical student and resident. He was truly one of our great family physicians, and he will be missed. Our sympathies go out to his family.

It is residency recruiting time again and the Bed and Board Program continues with over 100 registered alumni across the country. We had more than a dozen matches between fourth year students and alumni this year. If you live outside of the Dayton area and are interested in helping out traveling medical students, you can register for this program on the medical alumni Web site.

Thanks to our outgoing advisory board members, Richard McKenzie, M.D. (’85), and Dominic Bagnoli, M.D. (’90). As well, a warm welcome to our new members, Michael Albert, M.D. (’83), Evangeline Andarsio, M.D. (’84), Miguel Parilo, M.D. (’97), and Bhairavi Patel-Brittain, M.D. (’94). Of course, we offer continued thanks to our student liaisons from each medical class, Jon Coll (’05), Carrie Castleforte (’06), Beth McIlduff (’07), and Jaime Marks (’08).

Lastly, don’t forget to send us your updated news through the Medical Alumni Association Web site at www.med.wright.edu/alumni/. While you’re there, you can also subscribe to the e-newsletter, purchase alumni apparel, or sign up for the Bed and Board Program.

If you have any suggestions for future events or would like to serve on the Medical Alumni Association Board, please contact us at som_alumni@wright.edu. We look forward to hearing from you and seeing you at one of our events in the near future.

—Holli Neiman-Hart, M.D. (’90), Chair

Photos courtesy of Newport Aquarium/Cincinnati Reds.
1980

Samia W. Borchers, M.D., currently has a dermatology practice in Dayton. She is president-elect for the Ohio Dermatology Association. She and her husband William D. Borchers, D.D.S., have one daughter: Christina.

James J. Sell, M.D., is a practicing radiologist at the University of New Mexico School of Medicine in Albuquerque. In July 2004, he was promoted to professor of radiology.

Christopher J. Danis, M.D., was recently named as chief of staff-elect at Miami Valley Hospital. He is also ex-officio and past chair of the Wright State Academy of Medicine Board of Trustees, the first Wright State alumnus to serve in this role. He practices with Hand and Reconstructive Surgeons in Centerville. He and his wife Debbie have four children: James, Kathryn, Megan, and Benjamin.

1984

Thomas E. Kupper, M.D., practices interventional cardiology with Premier Heart Associates, Inc., at Good Samaritan Hospital. He and wife Jeanie, a nurse practitioner, have two 14-year-old sons: Spencer and Seth.

1985

Donald S. Herip, M.D., M.P.H., retired from the U.S. Navy in 2004 and is now the medical director for Corporate Health Services at Palomar Pomerado Health Systems in San Diego, California. He is also author of a chapter in A Practical Approach to Occupational and Environmental Medicine. Dr. Herip and his wife Pat have two children: Brenda and Matthew.

1987

In 2003, after nearly 14 years of blindness, Helen Gelhot recovered her sight at the Boston Foundation for Sight using a new contact lens. She lost her sight because of Stevens-Johnson Syndrome, a rare and often fatal condition. Her story has been featured on the “Oprah Winfrey Show,” the “CBS Evening News,” and in many news publications, and a book is in the works. Dr. Gelhot has also written for the St. Louis Business Journal and has been quoted in the Wall Street Journal. She lives in St. Louis, Missouri, with her husband Paul and daughter Mary Joyce.

1988

Michael J. Pierce, M.D., is in solo practice in Glastonbury, Connecticut, and training in psychoanalysis at the Western New England Institute for Psychoanalysis in New Haven. He does psychotherapy supervision with residents from the University of Connecticut.
Michele A. Collins, M.D., practiced general pediatrics for six years. She and her husband Steve, a pediatric anesthesiologist, live in Jacksonville, Florida. Dr. Collins currently stays at home caring for her three children: Emily, 6, Jacob, 4, and Lindsey, 2.

Mary S. Kraemer, M.D., was named director of the Internal Medicine Residency at East Carolina University Brody School of Medicine on August 1, 2004. She joined the Brody School of Medicine after seven years in private practice. She and husband Thomas Kraemer, M.D., an obstetrician/gynecologist, have two children: Patrick and Christopher, ages 9 and 7 respectively.

J. David Moore, M.D., currently works for Emory University School of Medicine, where he serves as assistant residency training director in the Department of Psychiatry and Behavioral Sciences. There, he received the 1998 Teaching Award, given to an attending by psychiatry residents, and the 2002 Teaching Award from medical students.

Michele R. Beck-Torres, M.D., practices obstetrics and gynecology and family medicine at Wellington Hospital in West Palm Beach, Florida. She and her husband Emilio, a physician, have two children: Alexandra and Lauren, ages 5 and 3 respectively. Another is on the way soon!

Kathleen A. Costlow, M.D., practices with Pediatric and Adolescent Practitioners in Gahanna, Ohio. She and her husband James Horrell live in Pataskala. The couple has a daughter: Aislinn Clare.

Sarah L. Prince-Carlson, M.D., is currently a partner at Davidson Family Medicine in Davidson, North Carolina. She practices outpatient medicine and is a student health physician at Davidson College. She finished residency in 2001 at Wake Forest University, where she was co-chief resident. She married Glenn Carlson, a massage therapist, in May 2004.

Melissa Jarboe Van Tassel, M.D., currently practices in Denver, Colorado. She specializes in family medicine and has a special interest in women’s health procedures and adolescent medicine. She is married to Jim Van Tassel, an international technology sales representative.

Drs. Nathan and Paige (Burwinkel) Bates were married in 1996. Paige completed her residency in internal medicine (including one year as chief resident) in 2003. She is currently assistant professor of medicine at the University of Kentucky. Nathan will be completing his general surgery residency (including one year of research) in June 2005. He is to begin cardiothoracic surgery training in July 2005 at Harvard-Massachusetts General Hospital. The couple has two girls: Eden, 4, and Ava, 3.

Jill L. Kirkbride, M.D., completed her internal medicine-pediatrics residency in Tampa in June 2004. She married Dave Barno in Dayton on August 7, 2004, and moved to Circleville, Ohio, last October.

Kelli P. Melvin, M.D., completed her residency at Good Samaritan Hospital in Dayton and served as chief resident her last year. She is in her second year of private practice working part-time. It has been very fun and rewarding. She is currently serving as the treasurer of the Southwest Ohio Society of Family Practice. She and her husband Tim Melvin, a financial planner, have two children: Tori, 4, and Trenton, 16 months.

She is planning on entering a vascular fellowship in July 2006, and is engaged to B. Matthew Jones, who runs an Internet business.

Brooke E. Hohn, M.D., is currently a third-year family practice resident at Forbes Regional Hospital near Pittsburgh, Pennsylvania. She plans to marry Richard Hausrod, M.D., (’02) in September 2005.

Richard V. Hausrod, M.D., is currently a second-year emergency medicine resident at Allegheny General Hospital in Pittsburgh, Pennsylvania. He plans to marry Brooke Hohn, M.D. (’02), in September 2005.

David Juang, M.D., is currently a general surgery resident with Western Pennsylvania Hospital in Pittsburgh.
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John C. Gillen, M.D., former chair of family medicine and professor emeritus, passed away early November 2004. Dr. Gillen joined the School of Medicine as an associate professor in 1975 after 20 years of experience practicing family medicine in southwest Ohio. He was named chair of the department in 1978 and served in that capacity until 1992.

Dr. Gillen was born in Wellston, Ohio, and was a Phi Beta Kappa graduate of The Ohio State University. He received his M.D. degree from Vanderbilt University and completed his internship and residency training at Toledo Hospital.

He frequently received teaching excellence awards from our students and will be remembered as an outstanding educator and clinician by both faculty and alumni. One alumnus shared his thoughts this way: “Dr. Gillen was the quintessential physician; the combination of his knowledge, compassion, and teaching ability made him truly outstanding. He represented to me all that the ideal physician should be.”

His family has requested that memorial donations be made to the John C. Gillen, M.D., Family Medicine Scholarship Fund at Wright State University School of Medicine.

Harvey A. Siegal, Ph.D., professor of community health and director of the Center for Interventions, Treatment and Addictions Research, passed away late December 2004.

Dr. Siegal joined Wright State’s faculty in 1975 and earned the Wright State University Board of Trustees’ Award for Faculty Excellence and the Presidential Award for Faculty Excellence in Professional Service. He was well known for his work in early intervention and education on substance abuse. His research efforts the past 30 years included HIV prevention and risk reduction, crack cocaine and health-services use, and strengths-based case management to improve treatment. As a nationally recognized leader in his field, Dr. Siegal was principal investigator on many major grants, and he served in several posts of national prominence, including membership in the Drug Abuse Epidemiology and Prevention Research Review Committee at the National Institute on Drug Abuse.

He completed his bachelor’s and master’s degrees at the City College of New York and earned his Ph.D. in medical sociology at Yale University in 1974.

Memorial contributions may be made to the Dr. Harvey A. Siegal Memorial Fund at Wright State University School of Medicine.
New Department Chair Announced

Timothy C. Cope, Ph.D., has been named chair and professor for the Department of Neuroscience, Cell Biology, and Physiology at Wright State University. He comes to Wright State from Emory University School of Medicine where he served as professor in the Department of Physiology, and as interim director for the Emory Neuroscience Program. Dr. Cope also served as professor in the Department of Physiology and Biophysics at Hahnemann University in Philadelphia, and as an assistant professor in the Department of Cell Biology and Anatomy at the University of Texas Southwestern Medical Center at Dallas. He received the Graduate Faculty Teaching Award and the Graduate School Distinguished Faculty of the Year award from Hahnemann University.

His areas of experimental research include synaptic transmission and plasticity in spinal cord, recovery of motor and sensory function after nerve and spinal cord injury, and organization of populations of motoneurons in movement control. He has published more than 54 research articles in refereed journals and nine book chapters, and is editor of a book entitled Motor Neurobiology of the Spinal Cord.

Dr. Cope earned his B.S. and M.S. degrees in kinesiology at the University of California Los Angeles, and a Ph.D. in physiology at Duke University. He completed a postdoctoral fellowship at the University of Washington, and served as a research associate for the Brain Research Institute at the University of California Los Angeles.

New Assistant Dean Appointed

Gary L. LeRoy, M.D., F.A.A.F.P. ('88), has been appointed assistant dean for Minority and Student Affairs. Dr. LeRoy is associate professor for the Department of Family Medicine and is the medical director of the East Dayton Health Center.

In his new position, Dr. LeRoy will administer the development of programs that focus on underrepresented groups or students with nontraditional backgrounds. He will also serve as academic, personal, and career advisor to students pursuing academic and career opportunities that address issues related to minority health and health care disparities.

Dr. LeRoy serves as the chief medical consultant for the City of Dayton Schools. He is the president of the Ohio Academy of Family Physicians for 2004–2005 and has held leadership positions in the American Academy of Family Physicians, the Ohio State Medical Association, and Phi Rho Sigma Medical Society. He is a member of the Alpha Omega Alpha Medical Honor Society and a fellow in the American Academy of Family Physicians Gold Key Honor Society.

He was recognized as one of America’s 50 Most Positive Physicians and as the Miami Valley Family Physician of the Year. He is listed in the National Registry of Who’s Who in America. Dr. LeRoy recently received the Dayton Business Journal’s 2004 Health Care Heroes Provider Award. He has also received the Wright State University Outstanding Alumni Achievement Award and the Dean’s Award to an Outstanding Graduate.

New Faces

James A. Graham, M.D.
Assistant Professor, Internal Medicine
M.D.: Medical University of South Carolina
Residency: David Grant USAF Medical Center (internal medicine)
Fellowship: Wilford Hall USAF Medical Center (pulmonary critical care)

Spencer C. Greene, M.D.
Instructor, Emergency Medicine
M.D.: Albany Medical College
Residency: Vanderbilt University Medical Center (emergency medicine)

Eric S. Halsey, M.D.
Assistant Professor, Internal Medicine
M.D.: University of Kansas School of Medicine
Residency: Wilford Hall USAF Medical Center (internal medicine)
Fellowship: Wilford Hall USAF Medical Center (infectious diseases)
Julian Gomez-Cambronero, Ph.D., professor of neuroscience, cell biology, and physiology, has been awarded the prestigious Sembrador Award by his hometown in Spain. The award is given annually to an individual born in or associated with the city of Manzanares who has “demonstrated the highest achievement in the arts, humanities, or the learned professions and whose accomplishments have transcended beyond the local frontiers, nationally or internationally.”

John Pascoe, M.D., M.P.H., professor of pediatrics and chief of the Division of General and Community Pediatrics, has been appointed to the steering committee for the National Practice-Based Research Network Resource Center funded by the Agency for Healthcare Research and Quality.

Alex Roche, M.D., Ph.D., D.Sc., professor emeritus of pediatrics and community health, received the Franz Boas Distinguished Achievement Award from the Human Biology Association. The award is given to a member who has made exemplary contributions to human biology in science, scholarship, and professional service. Dr. Roche was the director of the Fels Research Institute in Yellow Springs from 1968–1992.
Students and Faculty Recognized in the Annual Awards Ceremony

ICM I Award:
Shawn M. McFarland

Human Structure Award:
Kristen P. Massimino

Molecular, Cellular, and Tissue Biology Award:
Michael W. Mariscalco

Principles of Disease Award:
Michael W. Mariscalco

Term I Award:
Thomas A. Coffelt

Term II Award:
Kimberly J. Stockmaster

ICM II Award:
Charles M. Myer, IV

John C. Gillen Award for Family Medicine:
Emily J. Johnson

Medicine Clerkship Award:
Shandra R. (Kalter) Day

Pediatrics Clerkship Award:
Suzette N. Myton

Women’s Health Clerkship Award:
Shandra R. (Kalter) Day

James B. Peoples Silver Scalpel Award:
Melissa A. (Snyder) Meyer

Abraham Heller Psychiatry Clerkship Award:
Gwendolyn G. Greer

McGraw-Hill/Appleton and Lange Award:
Kristen P. Massimino
Michael W. Mariscalco

Teaching Excellence Awards:
Stuart J. Nelson, Ph.D.
Maria D. Urban, M.D.
Paul Koles, M.D.
Stephen Guy, M.D.

Mentor’s Awards:
John C. Pearson, Ph.D.
Robert D. Reece, Ph.D.

Excellence in Medical Education Award:
Harold F. Stills Jr., D.V.M.

New Faces

Maria C. Rivera-Amisola, M.D.
Assistant Professor, Pediatrics
M.D.: University of the East
Ramon Magsaysay Memorial Medical Center
Residency: Beth Israel Medical Center (pediatrics)
Fellowship: Schneider Children’s Hospital (developmental and behavioral pediatrics)

Jonathan M. Saxe, M.D.
Professor, Surgery
M.D.: Wayne State University
Residency: Wayne State University (general surgery)
Fellowship: Wayne State University (trauma surgery)

Hilary M. Stamp, M.D.
Assistant Professor, Pediatrics
M.D.: Dartmouth Medical School
Residency: Wright State University (pediatrics)

Michael W. Yerkey, M.D.
Assistant Professor, Internal Medicine
M.D.: Yale University
Residency: Keesler USAF Medical Center (internal medicine)
Fellowship: William Beaumont Hospital (cardiovascular disease)
Editor’s Note:
At the Fifth Annual Healer as Artist Show, more than 50 entries were received from medical school faculty, staff, and students. The entries reflected a wide range of talent, including painting, pottery, drawing, sculpture, photography, poetry, and even quilting. People’s Choice winners were:
First Place – Andrew Jacques, Year IV medical student, for a collage titled “Self-portrait”; Second Place – Carol Levine, M.D., for the oil painting “Orchids”; and Third Place – James Olsen, Ph.D., for a black and white photograph “Face Painter.” McCallister’s Art Supplies in Dayton generously provided the People’s Choice Awards. The poem “DNR” (do not resuscitate) won the Founders’ Award and is reprinted here with the author’s permission.

DNR
Kitchen table discussions of gray-clouded Ohio days, full of uncertainty and tears, loss more than pain.

How we got here? Disrespectful prostate cells growing every which way, like they own the place.

IV poisons dispose of my hair, make me wretch hourly – on the dot.

Radiation bakes my insides, precisely they say. “Precisely?” I inquire.

So when all is said and done, you and I signed our names. Dated it, Xeroxed copies tucked inside manila-yellow charts.

No tubes down my throat, IV’s in my neck and groin, no catheter jammed in my penis steriley monitoring urine output.

Let my heart quit, slowly, without ceremony. Hold my pulseless hand until it grows cold.

But you feel so… so Lonely. Like one more goodbye might make a difference.

All the doctors look so eager, so torn. They don’t get to recite the drugs they’ve memorized, yelling out orders like the captain in a submarine movie. Slowly sinking.

So… so you change my mind. And everything begins before we know it—the shoving of tubes in orifices.

“More than 5” a coy resident in a dirty white coat notes to a short-coated, curly-headed boy.

Compressing my sternum, spying the electrical green line to find the “lub-dub, lub-dub, lub-dub.”

And spend days and hours behind the door marked ICU FAMILY CONFERENCE ROOM crying, wishing the goodbye wasn’t so long.

Diprovan drips robbed me of words. My mouth half open chomping on the endotracheal tube, looked so… so horribly lifeless, my eyelids taped shut.

Just enough to lie that there might be another 4th of July or Christmas turkey carving. Did I understand what I signed?

Doing it now might mean you’re responsible, right? I just hoped you wouldn’t have to kiss a mouth chapped by 100% oxygen, crowded by a plastic tube goodbye.

—Andrew Jacques, Year IV
Team-Based Learning in Medical & Health Sciences Education—4th Annual National Conference
June 2–4, 2005
Student Union
For more information, contact 775-2643

Center for Healthy Communities Annual Meeting
June 8, 2005
10:30 a.m.–12:30 p.m.
Kettering Center Lobby
For more information, contact 775-1125

Reunion Weekend, Cincinnati
July 15–17, 2005
For more information, contact 775-2972

Student Clinician Ceremony
July 20, 2005
6:00 p.m.
Student Union, Apollo Room
For more information, contact 775-2934

Convocation and White Coat Ceremony
July 31, 2005
3:00 p.m.
Student Union, Apollo Room
For more information, contact 775-2934

Faculty Meeting
September 15, 2005
4:30 p.m.
232J Frederick A. White Health Center
For more information, contact 775-2933

SOM Awards Ceremony
November 15, 2005
5:00 p.m. reception
5:30 p.m. ceremony
E156 Student Union
For more information, contact 775-2934

In a joint effort, Wright State chapters of American Medical Students Association and Physicians for Human Rights organized several activities for AIDS Awareness Week. For AIDS in the Arts, the group arranged for film screenings of Philadelphia, The Pandemic: Facing the AIDS Crisis, and A Closer Walk. Other activities included a panel of HIV-positive patients to discuss “Living with HIV/AIDS in Dayton,” a lecture by local AIDS expert Robert Brandt, M.D., and a presentation by representatives from the Kenyan organization Wings of Africa. The last activity was an AIDS Walk to benefit the Nyumanzi AIDS orphanage in Kenya, where more than 92 HIV-positive, abandoned children have been taken out of the slums of Nairobi and provided medical care and a nurturing environment. With at least 100 participants, the walk raised more than $2,000 for the orphanage. The photo is of a small group of medical students crossing the finish line.

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Direct all correspondence to:
Editor, Vital Signs
Wright State University School of Medicine
Office of Public Relations
P. O. Box 927
Dayton, OH 45401-0927
Fax: (937) 775-3366
Phone: (937) 775-2951
E-mail: som_pr@wright.edu
http://www.med.wright.edu/

Editorial Planning Group and Contributing Authors
Robert Boley
Debbie Deichler
Judith Engle
Nancy Harker
Sue Rytel
Gwen Sloas, Ed.D.
Robin Suits

Advisory Group
Judith Engle
Paul Carlson, Ph.D.
Mark Clasen, M.D., Ph.D.
Robert Fyffe, Ph.D.
Jerald Kay, M.D.
Barbara Schuster, M.D.

Managing Editor
Judith Engle

Copy Editor
Robin Suits

Design
Debbie Deichler

Photography Coordinators
Nancy Harker
Sue Rytel

Photography
Roberta Bowers
William Jones
Chris Snyder

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