

SUMMER 2014

MISSISSIPPI MEDICINE

UNIVERSITY OF MISSISSIPPI SCHOOL OF MEDICINE



M1sts

Students Remember Moments That Shaped Them

► With **ONE VOICE** ► The **DOCTOR** She Became ► Picture of **HEALTH**



HOOP-DEE-DOO

Ryan Russell, left, representing the P3 team of physical therapists, tries to block a shot from **Alex Wills**, a member of the medical students' Myoclonic Jerks basketball squad, during a Feb. 13 Intramural Sports contest at the Norman C. Nelson Student Union gym. Intramural sports is one component in the competition for the coveted School Cup among UMMC's six schools: dentistry, graduate studies, health-related professions, medicine, nursing and pharmacy.

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The University of Mississippi Medical Center offers
equal opportunity in education and employment,
and in all its programs and services, M/F/D/V.

On the cover: Eight students agreed to relate some
of medical school's defining moments for them. They
are, back row, from left: Toi Spates, Madiha Ahmad
and Bradley Deere; second row, from left, Allison
Pace, Savannah Duckworth and Jennie Thomas; front
row, from left, Will Fuller and Marla Chapman.

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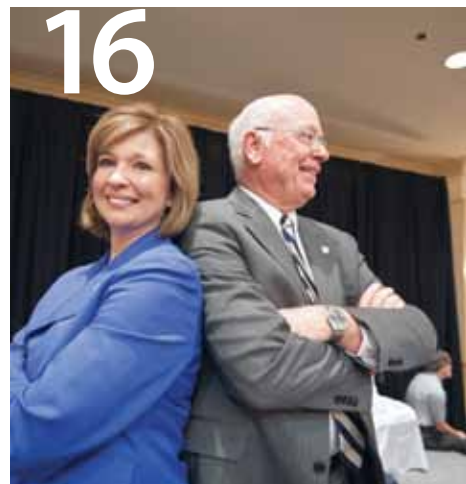
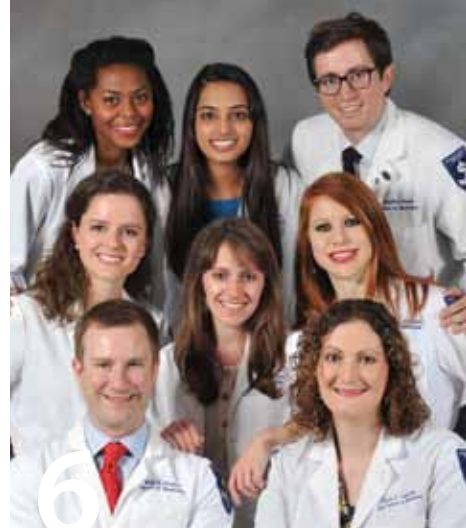
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CENTER MINDS THE STORE OF MEMORIES

by Bruce Coleman

Benjamin Gandy's children first suspected their father might be having issues related to dementia when he began to have difficulty finding the right words to finish sentences,

couldn't always recall the names of people he knew well and started to have trouble understanding his mail.

After having a bout of pneumonia, Gandy's confusion worsened, so his family brought

him to the Department of Geriatrics at the University of Mississippi Medical Center, home to the Memory Impairment and Neurodegenerative Dementia (MIND) Research Center.

In August 2012, Gandy was diagnosed with Alzheimer's disease by Dr. Gwen Windham, associate professor of medicine (geriatrics) and head of the newly launched MIND Center Clinic, which debuted last fall in Suite F of the University Physicians Pavilion. In March, the clinic held a gauze cutting and reception to mark its official opening.

The clinic, the first of its kind for the Medical Center, offers the kind of continuing care that patients like Gandy need.

"Our family is absolutely thrilled with the care he is receiving at the clinic," said Suzanne Gould, one of Gandy's daughters.

It provides research-based diagnosis and state-of-the-art treatment for a range of conditions that cause memory loss and cognitive impairment, including Alzheimer's disease.

Gandy's family says the regular visits he makes to the MIND Center Clinic have helped enrich his quality of life.

For more information about the MIND Center Clinic or to schedule an appointment, call (601) 496-MIND (496-6463).



Benjamin Gandy, flanked by his daughters Nora Michael, left, and Ruthie Courtney, shows off a sculpture he made of his grandson.

AMERICAN CANCER SOCIETY HOPE LODGE



Plans for the state's first American Cancer Society Hope Lodge were revealed Jan. 31 on the UMMC campus.

The planned \$10.9 million Mississippi Hope Lodge building will offer patients and caregivers free lodging when in Jackson to receive cancer treatments at any metro area care provider. ACS has 31 Hope Lodges across the country. Supporters are still in the fundraising phase.

From left are Lester Diamond, St. Dominic Hospital president; Kurt Metzner, Baptist Health Systems CEO; Dr. Ralph Vance, UMMC professor emeritus of medical oncology; Gov. Phil Bryant; Dr. James Keeton, UMMC vice chancellor for health affairs; Jerry Host, Trustmark Corp. president and CEO; Kelly Doss, ACS Mid-South Division executive vice president; Dr. Richard Friedman, Radiation Oncology of Mississippi; and cancer survivor Michael Artman.

STUDENTS LEARN THEIR FUTURE ON MATCH DAY

Medical students at the University of Mississippi Medical Center discovered where they would be spending the next three to seven years of their lives in residency training, during the annual rite of passage in March called Match Day.

The 128 fourth-year students on UMMC's Match Day list were among the thousands of students across the country who participated simultaneously in the National Resident Matching Program on March 21.

Most of the 900 chairs in a Jackson Marriott Hotel event room were filled by students, their family and friends and others gathered to learn where members of the 2014 medical school class would train for their 23 different specialties, such as pediatrics, emergency medicine, surgery, psychiatry and family medicine.

"It reminds me of Christmas," said Terica Jackson of Jayess, who drew a coterie of 10 relatives, including her husband Jason Jackson, to downtown Jackson for her big day.

"I set two alarm clocks to make sure I woke up in time this morning," Terica Jackson said before the announcements were made. "It's like Santa Claus is coming, and you don't want to miss it."

More than a third of the class, or 49, remained at UMMC for their residencies, including Jackson, as she would learn later. Others headed to institutions as far away as Oregon and California.

Those leaving the state were urged to return to Mississippi by two of UMMC's leaders – Dr. James Keeton, vice chancellor for health affairs and dean of the School of Medicine; and Dr. LouAnn Woodward, associate vice chancellor for health affairs and vice dean of the medical school. UMMC is their med school alma mater.

"We need you," Keeton said. "If you leave, come back and help us do something about the health care of Mississippi."

Woodward described the Match Day process as an "exhausting" series of applications, travels, interviews and more that led up to

the moment when each student walked to the stage and opened a white envelope for the big reveal in front of their supporters.

Quoting a previous med school graduate, Woodward described the day as a

"combination of the Academy Awards and the NFL Draft for Nerds."

"We're happy," Woodward said. "It's a good day to be nerds."



Vickie Phillips of Vicksburg, who matched to Vanderbilt University Medical Center for a pediatrics residency, is the winner of the doctor's black bag stuffed with \$5 bills, awarded on Match Day 2014.

UNIVERSITY OF MISSISSIPPI MEDICAL CENTER GRENADA



Various City of Grenada, community, county, state and national leaders join UMMC representatives in welcoming Grenada's premier health-care facility to the University of Mississippi Medical Center family on Feb. 7.

Inside the hospital lobby, community and Medical Center representatives pulled off a decorative cover to reveal a wall-mounted, backlit U logo that will greet patients, visitors and families as they enter the facility through glass double doors.

The event formally christened the former Grenada Lake Medical Center as the University of Mississippi Medical Center Grenada.

PANCREAS TRANSPLANT HAILED AS STATE'S FIRST

by Jack Mazurak

Surgeons transplanted a pancreas and kidney into a 49-year-old man on Dec. 5, marking the first such event for the state and final piece of UMMC's abdominal transplant line.

"Our goal has been to build a complete and high-functioning abdominal transplant program," said Dr. Christopher Anderson, UMMC associate professor of transplant surgery and division chief of transplant and hepatobiliary surgery.

"The pancreas transplant program represents that last piece of the abdominal program and is the culmination of a lot of hard work from our transplant team and the entire institution. University Transplant can now serve the state's kidney, liver and pancreas needs while keeping patients close to home."

The patient has suffered from type 1 diabetes since childhood and subsequently developed kidney failure.

Dr. Mark Earl, assistant professor of transplant surgery, performed the operation, assisted by Anderson and Dr. Andrew Gaugler, a chief surgery resident.

During a 24-hour span that included the milestone pancreas operation, UMMC

teams transplanted five organs into four Mississippians. Other patients received a heart, kidney and liver.

Organ donation remains a cornerstone of University Transplant and is lifesaving to

hundreds of Mississippians each year. For more information, visit www.msora.org.



Dr. Mark Earl, left, assistant professor of transplant surgery, conducts UMMC's first pancreas transplant on Dec. 5, assisted by Dr. Andrew Gaugler, center, chief surgery resident, and Dr. Christopher Anderson, associate professor of transplant surgery and division chief of transplant and hepatobiliary surgery.

TELEHEALTH TO LINK UP NORTH MISSISSIPPI



Dr. Kristi Henderson, left, UMMC director of TeleHealth and chief advanced practice officer, and Trina George, right, Mississippi state USDA director of rural development, demonstrate the TeleHealth program.

The United States Department of Agriculture and the Appalachian Regional Commission have selected the University of Mississippi Medical Center for a three-year, \$578,360 distance-learning and telemedicine service grant, “Telemedicine Emergency and Specialty Care for Appalachia in North Mississippi (TESCAN).”

The USDA will fund \$378,360 with a \$200,000 match from ARC.

The sites, considered “medically underserved areas” and “health-professional-shortage areas” by the U.S. Department of Health and Human Services, include:

- Calhoun County Medical Clinic, Calhoun City;
- Trace Regional Hospital, Houston;
- Kemper County Medical Center, De Kalb;
- Tishomingo Health Services, Inc., Iuka;
- Webster General Hospital, Eupora;
- Yalobusha General Hospital, Water Valley;

- North Mississippi Medical Center-Pontotoc, Pontotoc;
- Kilmichael Hospital, Kilmichael; and
- Holmes County Hospital, Lexington.

Representatives from the USDA and UMMC announced the grant agreement at a joint press conference March 6 at the UBS Building in Jackson.

The grant will expand to 104 the number of health-care delivery sites throughout the state linked to the Medical Center by the state-of-the-art telemedicine network.

According to Dr. Kristi Henderson, chief advanced practice officer and director of the Center for TeleHealth at UMMC, the TESCOAN grant will provide the capital equipment necessary for the Medical Center’s TeleHealth Program to serve 10 additional sites, including nine Appalachian counties and one Mississippi Delta county.

“Thanks to the USDA and ARC, this program will expand UMMC’s proven TeleHealth Program to an additional 10 rural hospitals in the Appalachian areas of

Mississippi,” Henderson said. “Emergency and specialty health-care providers will now be accessible in these rural communities, which will save lives and improve Mississippians’ health.”

The agreement will augment the services delivered by existing medical providers in the rural areas by connecting them with the state’s only academic medical center and trauma center. The grant will position UMMC as a “hub site” for each of the county-based hospitals, ultimately reaching 168,862 additional rural residents.

The Medical Center has been providing emergency and specialty-care consult services via telemedicine to community hospitals throughout Mississippi since 2003.

“This project provides rural residents with access to better health-care options without the financial hardships,” said Trina George, Mississippi state director of USDA rural development. “The level of health care you receive should not be based on where you live or your economic status.”



M-1sts:

An Oral History

Students remember the seminal moments that changed them

by Gary Pettus

1

MADIHA AHMAD

of Meridian just completed her third year of medical school and is considering a residency in internal medicine.

3

BRADLEY DEERE

of Jackson graduated from the School of Medicine in May; he is doing his internal medicine residency at the Tulane University School of Medicine in New Orleans.

2

MARLA CHAPMAN

of Florence graduated from the School of Medicine in May; she is doing her medicine-pediatrics residency at the University of South Carolina in Greenville.

6

ALLISON PACE

of Madison just completed her third year of medical school and is considering a residency in internal medicine.

4

SAVANNAH DUCKWORTH

of New Albany graduated from the School of Medicine in May; she is doing her internal medicine residency at UMMC.

5

WILL FULLER

of Jackson graduated from the School of Medicine in May; he is doing his internal medicine residency at the University of Kentucky Medical Center in Lexington.

8

JENNIE THOMAS

of Hazlehurst just completed her third year of medical school and is considering a residency in internal medicine.

7

TOI SPATES

of Gulfport just completed her second year of medical school and is considering a residency in internal medicine.



My anatomy textbook was gone. I had my first mini-mental breakdown...

Jennie

Medical school is a crucible. By the end of their first or second year, students have squeezed in more searing, emotional “firsts” than many people encounter in decades, if ever.

As Allison Pace put it, “The list of firsts goes on: my first time to see a kidney transplant, the first time I saw a human brain, ... the first time my dad asked me for medical advice, the first time I aced a test in pharmacology, the first time I didn’t ace a test in biochemistry ...

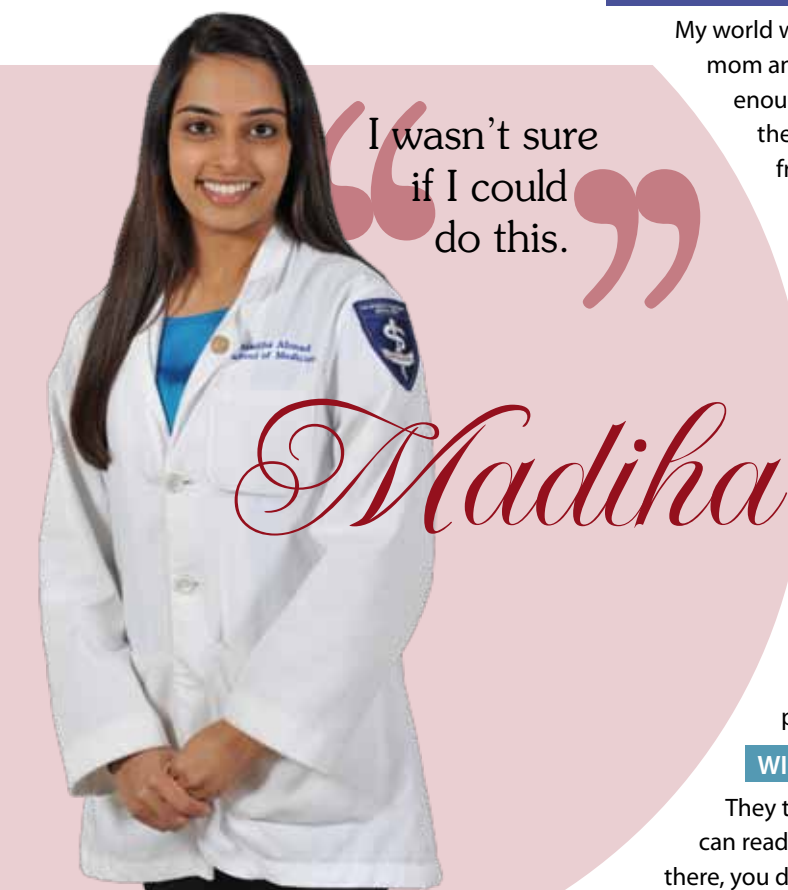
“The first time I saw death, life, hope, and despair in the medical realm. The first time I made a difference in a patient’s life.”

We asked eight to tell their stories about their firsts.

THE FIRST WEEK

JENNIE THOMAS

My world was in upheaval. Just a few days into that first week, I called my mom and told her that I just couldn’t do it. I was lost in this shuffle of never enough studying, never enough sleeping; yet doing nothing outside of the UMMC campus and my small apartment. I felt so inadequate, sick from the formaldehyde stench of the gross anatomy lab, stressed over the little idiosyncrasies of life. Thursday morning came and I rode the elevator to the seventh (anatomy) floor. I walked down the hall with rows of (unlocked) lockers until I reached my own, opened it, and panicked. My anatomy textbook was gone. I had my first mini-mental breakdown of medical school.



I wasn’t sure if I could do this.

Madiha

THE FIRST “PATIENT”: GROSS ANATOMY

SAVANNAH DUCKWORTH

Nothing prepares you for this class. In college biology, I had dissected sharks and cats. It was worlds different. The first week, we were all scared. We had that deer-in-the-headlights look. So I walk in the first day, and it strikes me that my first patient is a person.

WILL FULLER

They tell you about gross anatomy, how difficult a course it will be. You can read about it and watch videos about it, but until you are actually there, you don’t get a full grasp of it. It was more intense than I expected.

MADIHA AHMAD

I was unsure of how I would react to seeing a cadaver for the first time. I remember a very distinct smell catching me by surprise. It made the pit of my stomach churn even more.

WILL FULLER

The cadaver was face-down, on the table. We had to roll it over. Seeing the cadaver's face for the first time was a surreal moment. I started thinking, "This is somebody's mother, somebody's child, someone in this world who was loved." You're trying to do the task at hand, but in the back of my mind, all of that is also there.

MADIHA AHMAD

I slowly made my way to my assigned cadaver and met my lab partners. We were instructed to open the tanks and raise the cadavers. I told my partners I wasn't sure if I could do this. They were both guys, so they told me not to worry; they would handle it. As they raised the body and unwrapped the white sheets, I had to step back for a moment before I could look. The cadaver looked nothing like I expected.

TOI SPATES

It's a different feeling there. It's the step you have to overcome as a medical student. You have to get past this. But it should be personal. It is personal.

MADIHA AHMAD

I was so thankful for my two lab partners on that first day and throughout the semester. Some of the uneasiness began to wash away. I could do this.

TOI SPATES

The most endearing moment comes when you try to figure out what the person was like. You can't know names, but you can know where they lived. He was an older man. He lived in Mississippi. He had been excited to join our donor program. He wanted to help us, and he did; he allowed a bunch of students to learn. For him to trust us with that responsibility meant a lot. He was more than just a way to learn.

SAVANNAH DUCKWORTH

I was overwhelmed with a feeling of respect. I felt honored, but I also felt out of place. Very naïve. But, as the semester went on, I realized this person was teaching me more than any professor could.

TOI SPATES

Until then, you have never been that close to someone.

“He allowed a bunch of students to learn. For him to trust us with that responsibility meant a lot.”

Toi



“This is somebody's mother, somebody's child, someone in this world who was loved.”

Will





She said, ‘When will we get to see the real doctor?’

Marla

THE FIRST PATIENT INTERVIEW

MARLA CHAPMAN

The exhilaration of interviewing a patient by myself for the first time was so strong that I found myself practically skipping down the ER. My patient was an elderly Caucasian man, hunched forward in his bed, with mildly labored breathing. His wife was seated on a chair beside the bed with a rather impatient look on her face.

SAVANNAH DUCKWORTH

There was this patient at the Jackson Free Clinic who had Crohn’s disease [an inflammatory bowel condition] and he’d had it for years. He didn’t have insurance, so, as far as treatment, he kept falling off the wagon. He looked me in the eye and told me his history.

MARLA CHAPMAN

After about five minutes, his wife requested that I stop asking her husband questions because she was afraid that he was about to pass out. I assured her that his vital signs were stable and that we were closely monitoring his heart and oxygen. I explained that I was a student and that it was very important for me to be thorough. She then said, much more forcefully, “Well, that is enough! A student should know her place. When will we get to see the real doctor?”

SAVANNAH DUCKWORTH

He had been in a fight as a kid and been cut; he’d lost part of his eye and now had a prosthesis. He would take it out for us. He still comes to the clinic and still takes his eye out. He loves to show it off.

MARLA CHAPMAN

I began to get extremely hot and I could feel my face turning red. I wasn’t quite sure what to do. One of the nurses poked her head around the curtain and asked if everything was OK. The patient’s wife said, “No. We were doing just fine until that girl walked into the room.” I looked at the nurse for reassurance and then back at the patient’s wife. I said, “OK, ma’am. I’ll go find my upper level resident, and we’ll get back to you.” She said, “That’s what I thought. You’d better run along.”

SAVANNAH DUCKWORTH

He was the first patient I ever gave a shot to; it was a B-12 shot. I was absolutely terrified.

MARLA CHAPMAN

[At her resident’s request, Marla Chapman and the resident confront the patient’s wife together. The resident keeps her composure and “gets the situation under control.”]

[One of the things] I learned from this experience is that stress, fear and apprehension about loved ones can cause even the nicest people to act out of character.



He still comes to the clinic and still takes his eye out.

Savannah

SAVANNAH DUCKWORTH

Now the man with Crohn's disease gives the shots to himself, every month. I've gone back to the clinic almost every Saturday [Duckworth became the clinical director]. I really felt honored seeing him and hearing his story. I thought, "This is why I'm here."

MARLA CHAPMAN

A few days later, my patient's wife sought me out in the hallway and apologized. She even gave me a hug.

THE FIRST REALITY CHECK

SAVANNAH DUCKWORTH

You can't predict how you'll respond. It was November; the hospital was about to send a patient back home. He was doing better, sitting up and eating. I talked with him and his family. A couple of hours later, there was a code. He had blood clots in his leg. I went with him to the ICU.

MADIHA AHMAD

I entered the room and saw her sitting up in the chair beside the bed. I asked if I could pull up a chair next to her. We both sat quietly, but comfortably, for a minute or two. Then she asked me to explain the illness to her. She didn't understand how three months ago she was living a normal life. I had never had a discussion about death with a patient.

SAVANNAH DUCKWORTH

They tried to bring him back with chest compression. I stayed in the corner. It was very crowded in there. No one asked me to leave, but I wasn't about to. Because I was the only person in the room he had ever talked to.

WILL FULLER

This was my third year in medical school; it was at the VA. There was a patient with liver failure. The prognosis was bad. Every morning we had gone in together to see this patient, the whole team. So we kind of got to know him. We were emotionally drained.

MADIHA AHMAD

She asked me several questions and I tried to answer them the best way I knew how. Our conversation turned to her life; she shared her personal stories and her journey. At the end, she told me she appreciated that I had come to talk to her, and she felt better. She told me I would be a great physician because I had taken the time to comfort her.

WILL FULLER

We went in in the morning and said, "We've done everything we can do; there's nothing else we can do." The family was around and they were upset. But they appreciated everything we did. This was my first experience having to tell someone that. He was my patient.

SAVANNAH DUCKWORTH

Later, I asked the attending physician if it was appropriate to send his wife a letter – telling her that her husband was more than a patient to us; that we regretted we couldn't help him. So I did. It really affected me because we had told him he was going home. It made me wonder: When I have patients I've known a long time – how much harder will it be? But I don't want it to ever not become a big deal. I want to take some of that feeling with me when I go home every day. Because it's an honor to take care of people.

BRADLEY DEERE

Prior to a routine surgery, the patient's husband confided in me that his wife did not want to be resuscitated if she lost her pulse or stopped breathing. I reassured him that the procedure would be successful and she'd be discharged home soon. I was devastated when she did not survive. Looking back, I realized that her husband confided her end-of-life wishes with me because he sensed that she did not have much longer to live. It was a humbling experience.



I realized that her husband confided her end-of-life wishes with me because he sensed that she did not have much longer to live.

Bradley

SAVANNAH DUCKWORTH

I'm grateful that I got to know him for as long as I did. The man was from Mendenhall. Every time I drive through Mendenhall I think of him. I had known him for about an hour.

THE FIRST CHILD

WILL FULLER

The kids were really great to work with. One kid who was 15 had Down's syndrome. He was so fun and loving. He kept wanting to put me in a headlock and give me a noogie; that made the day more interesting.

MADIHA AHMAD

He was 5 and had come to the sickle cell clinic for a transfusion. At first, he was very shy and didn't feel comfortable with me. I decided to inquire about the Spider-man action figure in his hand. I let him listen to his own heart with my stethoscope, hoping that he could hear what I could barely make out. Then I stepped out of the room. When I returned, he was smiling at me and poking his mom, saying, "Ask her, mommy; ask her." His mom said, "He's asking if you could be his doctor from now on."

JENNIE THOMAS

She was a single mother; this being her first pregnancy, she was keeping the gender a surprise. I had my gown and mask ready, and I laced up my surgery boots; I was not going to miss this opportunity. For hours, everyone could hear me coming by the sound of the boots as I walked up and down the hall to check on my patient. I began to wonder if she would have her baby before the shift change. But she was ready. My great resident helped me deliver a healthy baby. I will never forget when I looked up at the patient, with tears in my eyes, and said, "It's a girl!"

ALLISON PACE

It was during my ob/gyn rotation; the team had to break the news to this 26-weeks pregnant woman that her baby had significant heart defects, likely had Down syndrome and probably wouldn't survive the delivery. I cried with her as I listened while she walked through her decisions. The next day, I saw my first preemie birth – the tiny little baby with Trisomy 21, delivered by C-section and whisked off to the NICU – crying and alive. *M*



I cried with her as I listened while she walked through her decisions.

Allison



Phelicity Lett, far left, receives instructions from Turner Brown before she and Madisen Moses, right foreground, participate in a demonstration involving the sense of touch. Sponsored by the Homerun Project, Brown and his fellow UMMC medical student Mikey Arceo, far right, visited Peggy Carlisle's fourth-grade science class at Pecan Park Elementary School in Jackson to present a lesson on the senses of touch, taste and smell.

TOUCHING BASE

Homerun Project links med students, local schools



Alondria Taylor uses her sense of touch to identify a golf ball ensconced inside a bag held by Mikey Arceo. Under the aegis of the Homerun Project, Arceo and his fellow UMMC medical student Turner Brown, background, taught a lesson about the senses to Peggy Carlisle's fourth-grade science class at Pecan Park Elementary School in Jackson.

by Gary Pettus

This is a story about potato chips, candy, a sock and a golf ball – and how they can make a kid into a scientist.

Peggy Carlisle's fourth-grade science students were exploring the senses of touch, taste and smell; but their sense of curiosity was the sharpest of all.

"I have a question: I have a thing on my hand and it won't go away." "What do you do for a sore throat?" "If you have an 'M' on your hand [palm], does that mean you're going to get married?"

Even these off-topic concerns of Carlisle's Pecan Park Elementary School students were patiently addressed by Mikey Arceo and Turner Brown, two second-year medical students from UMMC who were their visiting teachers: "It'll go away." "Gargle with salt water." "I have two 'Ms' – does that mean I'll be married twice?"

This was the scene during a March 21 mini-seminar courtesy of the Homerun Project, a shared effort to complement local schools' science lessons by enlisting health-professions students to help teach them.

A partnership between UMMC and the Mississippi Department of Education's Office of Healthy Schools, Homerun has scored at three separate Jackson Public Schools sites, putting medical students in several of their classrooms over the past three years.

For the future doctors, participation in Homerun is a way to fulfill their community service obligations.

“At UMMC we have an army of volunteers than can offer this service,” said Dr. Rick deShazo, UMMC distinguished professor of medicine, pediatrics and immunology, who helped launch Homerun.

This kind of work also satisfies the altruistic impulse that inspired many students to become physicians in the first place, he said.

It also gives them a taste of their future role as educators for their patients, and helps them learn how to communicate with children.

Another perk: Often, they are inspired by their young audience’s keenness and insight.

“This is a fourth-grade class,” said Brown who, like Arceo, is a Homerun veteran. “I am surprised how smart those kids are. They really want to learn.”

When Arceo told Carlisle’s class he plans to become an ENT, one boy asked, “Does that mean you’ll be messing with tonsils and adenoids?”

Yes, it does. And if the Homerun Project realizes another of its goals, maybe that inquiring fourth-grader will grow up and mess with them, too. Or maybe he’ll become an R.N., an O.T., a P.T., scientist, surgeon, and so on.

“Interest in a science-based career has to be sparked by the fifth grade,” said Carlisle, who should know; she is also the pre-school/elementary division director for the National Science Teachers Association.

In other words, the medical students, with their fresh faces and fresh perspectives, serve as role models – and in more ways than one. They are also proselytizers for wholesome habits.

“The students they teach learn about healthy eating, the importance of normal weight, that fast food is problematic because of the calories,” deShazo said.

The idea for Homerun got to first base a few years after the 2007 passage of the Mississippi Healthy Students Act, which mandates more physical activity and health education for students.

But without state funding to back the act, the Department of Education searched for creative ways to make that happen. The Homerun Project became one of those ways, beginning with a pilot program in 2011 at Jim Hill High School in Jackson.

“Some M3s brought in some human kidneys to the class,” said Susan Bender, chair of Jim Hill’s science department. “That was a tremendous hit.

“I honestly think the medical students get as much out of it as the students they teach. It doesn’t hurt that they bring candy or some other bribe to pass out when they’re finished.

“But I believe it’s been a humbling experience for some of them as well. If high school students don’t understand what you’re talking about, they will tell you quickly.”

Brandi Martin Brooks, a Jim Hill student on the science-career track, remembers a Homerun class on cancer. “The medical students gave us a clear explanation about the differences between solar radiation and the radiation used to treat cancer, because I wanted to know if they affected your skin the same way,” said Brooks, 18.

“I found it incredible how the health sciences world is finding various cures. I learned a lot that I didn’t know. The medical students seemed to really know what they were talking about.”

The pilot at Jim Hill took off. And now the ultimate goal is to take the program statewide.

In 2012, the Department of Education added JPS’ Pecan Park and Davis Magnet Elementary schools to the lineup, said Kevin Batte, the UMMC student

representative for the program.

“The idea was to reach students at an even earlier age.”

Arceo and Turner tried to reach Carlisle’s students with, among other things, an athletic bag, a red sock and a mysterious object.

Alondria Taylor was the guinea pig: With her right hand, which was covered by the sock, she rummaged inside the bag, found the object and used her sense of touch to identify it as some kind of ball. But it wasn’t until she felt it with her bare left hand that she could discern the dimples and nail it down: “Golf ball,” she said.

This kind of demonstration is bound to appeal to younger students. “The younger the better,” said Christine Philley, the school health administrator for the Office of Healthy Schools.

“I don’t know of any other program like Homerun in our state right now,” Philley said. “We’d love to have more.”

“I honestly think the medical students get as much out of it as the students they teach. It doesn’t hurt that they bring candy or some other bribe to pass out when they’re finished.”

- Susan Bender -

They'd also like to find more donors, in addition to such benefactors as the Selby and Richard McRae Foundation, to pick up some costs or offer in-kind giving.

If funds are hard to come by, though, there is no lack of commitment.

"All the partners are passionate about teaching a lesson that has value," Philley said. "The teachers who invite the medical students really want what's best for their kids."

Those teachers choose the topics, which have included the pros and cons of vaccinations, and polio – then and now. Their choices are passed on to the medical students by Dr. Jerry Clark, chief student affairs officer and associate dean for Student Affairs in the School of Medicine.

KEY POINTS:

Teach students the value of making healthy choices

Teach students the consequences of making poor health choices

Teach students where to search for valid health information

Teach students to set high health goals for themselves

Teach students to advocate for the health of themselves and others

Source: Homerun Project, information for medical students

When the med students arrive in the classroom, they are wearing their white coats and are often bearing props, such as Warheads.

Arceo and Turner passed out Warheads sour candy to Carlisle's fourth-graders, along with Pringles potato chips and other snacks for consumption, asking the students to note how different parts of the tongue enhanced the various flavors – salty, sweet, sour, bitter – according to the location of specialized taste buds.

"Taste buds?" said one student. "My mom told me those are 'lie bumps.'"

Be that as it may, one of the day's lessons was that the senses of taste and smell are closely related and "help build memories," as Turner put it.

"They help make us who we are."

And that's how it's done. **M**



With Mikey Arceo, and Turner Brown, Pecan Park's fifth graders include first row: Nicolas McKee, Kirstin Lakes, Makedra McCoy and Adriana Cavitt; second row: Phelicity Lett, Alondria Taylor, Madisen Moses, Percia Blair, Charity Ashford, Aisja Shirley, Sarahdrick Mitchell, Kynedi Nichols and Taniya Adams.

When One Plus One **EQUALS ONE**

The Leadership Calculus of
Keeton and Woodward

by Gary Pettus



In the School of Medicine there's a dean: Dr. James Keeton; and there's a vice dean: Dr. LouAnn Woodward.

For the Medical Center as a whole there's a vice chancellor for health affairs: Keeton; and there's an associate vice chancellor for health affairs: Woodward.

When the School of Medicine's executive faculty meets, who do you suppose runs things?

The tall, friendly, but imposing man in his 70s, the former high school athlete and ex-Navy man?

Or the youthful, approachable, not-so-tall mother of four?

Here's a hint: Near the end of the meeting, the tall man stirs and says, 'Well, I guess she's going to let me talk now.'

It's like the Bridge Over the River Ego, this rapport that connects Keeton and Woodward professionally. Even at that, the river runs pretty low.

"They never compete, never," said their chief of staff, Brian Rutledge, who is on sabbatical from UMMC, working for U.S. Sen. Thad Cochran.

"They don't feel threatened by each other, which is very unusual for two people at such similar levels of authority. There are disagreements, of course. But they are very gracious and usually listen to each other."

Their colleague, Dr. John Prescott, has never seen another working model quite like it.

"It is, in a lot of ways, an exemplar for others to emulate," said Prescott, the chief academic officer for the Association of American Medical Colleges (AAMC).

"I've seen close working professional relationships in other places, but this one is different: They use theirs to benefit the medical center and the medical school."

Sure, they're alike in some ways, as noted by Dr. Leigh Ann Ross: "They are both humble, and very genuine."

"I would say that, even if they weren't my boss," said Ross, chair of pharmacy practice and associate dean for clinical affairs in the School of Pharmacy who technically reports to the dean of her school at Ole Miss.

"They are both very good at making you, as a leader, know you're supported. They try to communicate well with everyone. I wouldn't hesitate to pick up the phone and call either one of them."

Otherwise, it would be difficult to find two other people who look, talk, or make a point less alike.

Keeton has the manner of a kindly grandfather (which he is), said Dr. Loretta Jackson-Williams, the School of Medicine's associate dean for academic affairs.

"He's easy to talk to." He's comfortable, and secure, enough, to share leadership with Woodward; those executive faculty meetings prove that, she said.

"But you know he's in charge – and not just by talking to him; it's also the way he carries himself."

He puts the "big" in "the big picture."

Keeton leads the way you might expect of a trained surgeon (which he is), Rutledge said: "If something isn't working, you cut it out."

Woodward, a specialist in emergency medicine, was trained to keep things in, so to speak.

"What they have in common is their love and appreciation of the institution and a passion for the medical center," Rutledge said. "But their styles balance each other out."

It's the kind of balance you might see in a basketball game dominated by two players: The commanding man in the middle taking charge, improvising; and the smaller one acting quickly and decisively, attuned to the finer points and subtler demands of her position.

Even from the nose-bleed seats, though, you notice this: They're shooting at the same goals. Education. Improving the health of the people.

"When one is speaking," Prescott said, "he or she speaks for both."

Two generations. Two genders. Two clinical backgrounds.



Woodward and Keeton hash out a few matters while air-borne.

SEVEN KEYS TO EFFECTIVE LEADERSHIP

BE BOLD, but temper boldness with integrity and good judgment.

BE AWARE of what you're good at and play to those strengths.

COMMUNICATE a vision of where you and others need to go.

RECOGNIZE the contribution of others and give the team room to try out new ideas.

HAVE BALANCE – at work and in your personal life.

Choose the **BEST LEADERSHIP STYLE** for you; find your own way and remain authentic.

Find **DIFFERENT LEADERSHIP STYLES** in your organization that complement your own.

Sources: *Forbes*; Rebecca Hourston, director of programs at Aspire



Keeton and Woodward, the dean and vice dean, respectively, of the School of Medicine, survey photos of members of the Class of 2014.

One voice.

How did this add up?

The first half of the equation grew up in Columbus, where he watched movies for free at the Princess Theater because the owner was Ed Kuykendall: his grandfather.

Jimmy Keeton attended a school that sat across the street from his parent's two-bedroom house; he walked home for lunch every day, barefoot, as he remembers.

He lived one block from the YMCA, two blocks from his church, five blocks from the Princess.

"It was Leave It to Beaver," he said.

He was only 5 when he started the first grade – "because the principal said I could handle it" – but he was a sickly, skinny child who became a kind of cottage industry for local doctors.

He caught the whooping cough soon after one of his two brothers was born, forcing him to stay for a while with his grandmother, who treated his cough with some sugar "and a small amount of whisky."

Then he was hospitalized with pneumonia, around the time he had to have his appendix removed.

But his health improved and he joined the basketball and swimming teams at Lee High School, where he graduated in 1957, the year he earned \$1 an hour making car tags. "I painted the numbers on," he said. "Everyone thought we were prisoners."



School of Medicine Class of 1991 portrait

Like a prisoner, he was planning an escape of sorts: After his father opened a dry cleaning/laundry store, Keeton and his brothers set their sights on professional school – "so we wouldn't have to go back and work in that laundry business.

"I was around doctors a lot and said I wanted to be one. When you say that, people give you a lot of affirmation. So it was, '***! I guess I gotta be one.'

"If I didn't get into medical school, I was going to be a YMCA director."

Years later, Keeton would become the first UMMC vice chancellor who had attended the University of Mississippi – Ole Miss – as an undergraduate.

In his School of Medicine Class of 1965, there were fewer than 60 graduates; four were women.

"It was almost as if they were non-existent. I think that describes my world really well."

The woman who would one day become UMMC's No. 2, he said, "grew up in another world."

The world of LouAnn Heath, the older of two children, began in Carroll County, just south of Grenada, in the community of Jefferson, where her parents still live on the same country road.

"I'm sure it will never be paved in my lifetime," she said.

Her father worked hard running his restaurant and buying homes that he rented out to support his "farming habit." He always considered himself a farmer first; his crop was cattle.

It was somewhere between Leave It to Beaver and Rawhide.

Keeton and Woodward serve free hot dogs and other fare at the School of Nursing/School of Medicine walkway area on May 13, during Employee Recognition Week.



“Growing up on a farm, I come from a family that is very resourceful,” she said. “I remember my grandmother and mother saying, ‘whatever needs to be done, just find a way to do it.’”

Men, more than women, were doing what she wanted to do at the time; it didn’t matter.

“I never thought, ‘Should I be doing this? Am I qualified for this?’”

Her teachers at Kirk Academy in Grenada encouraged her in her dreams of medical school. But at Mississippi State University, where she studied microbiology, she was torn between teaching and doctoring.

“I thought that you’re either one or the other.”

One day in her parents’ kitchen, she was agonizing over this with her mother; her father happened by, overheard them and decreed: “LouAnn, you need to go to medical school.” Then he left the room.

And that was that.

She was one of 21 women in her entering class of 100.

By her fourth year, she knew where her heart was headed – toward her future husband, Jon Woodward, whom she was dating at the time; and toward emergency medicine.

“It is a mix of all the specialties that I love. It was that rush of feeling – ‘this is the perfect fit for me.’”

Her training gave her a perspective that would serve her, and others, in her current role, Rutledge said.

One day, bereft of information he wanted in order to make a judgment call, he became discouraged, until Woodward sat him down.

“She said, ‘It’s a lot like seeing a patient in the emergency department: You have to make high-stakes, life-or-death decisions based on partial information.’” Information that isn’t always right.

“I thought, ‘Well, she doesn’t kill her patients, so it must work,’” Rutledge said.

Jackson-Williams, who’s also a professor of emergency medicine, said she’s fascinated by the ER role: “Because you’re the captain of a ship you don’t own.

“You have to convince everyone to always do the right thing. It prepares you for leadership.”

Woodward was drawn also to surgery, but knew she would want children, “and at that time there weren’t many women in surgery who fit into that mama bucket,” she said.

As it turned out, she not only had four children of her own, she also took charge of hundreds more – medical students.

It was during her residency that she discovered she was no longer torn between becoming a teacher or a healer, she said.

“I realized you could be both.”



School of Medicine Class of 1965 portrait

Dr. Dan Jones: If any one thing explains why the Keeton-Woodward alliance was forged, it’s the influence wielded by the University of Mississippi’s chancellor, Keeton’s forerunner.

But the special brew of circumstances that brought them together percolated for years.

Unlike Keeton, once Woodward came to UMMC, she never really left.

“If someone had told me as a medical student that I would still be here or I would be in administration,” she said, “I would have surely thought they were crazy.”

She stayed, in part, because her extended family was close by, and, in part, because of her love of teaching. Once she finished her residency, in 1995, Woodward joined the faculty. She began training her own residents.

Emergency medicine was still growing up then, from a division to a department, and Woodward was in the middle of it. She learned that she enjoyed administration, the part where she helped build things – and doctors.

“I liked being a part of the residents’ growth from the point when they arrive and are scared to death to when they’re ready to take over the world.”

Later, when she joined the School of Medicine administration, in academic affairs, she found that students there energized her, too.

“But I had to adjust my style,” she said, “because medical students will cry.”

For his part, Keeton took a post-medical school journey that wound from Jackson to London, England, to Great Lakes, Ill. (at a naval hospital) and back to Jackson, where he worked at UMMC for two years before entering a nearly three-decades-long practice in surgery and pediatric urology.

In 2000, he was called home again. At UMMC, he rejoined the full-time faculty, a choice that, as it turned out, set his course for the top spot at the Medical Center.

Seven years after his return, Keeton, unwittingly, began a kind of apprenticeship for his current job: He became the chief of staff for Vice Chancellor Jones.

“The connecting piece in the beginning was our mutual respect and love for Dan Jones,” Woodward said.

“I believe that’s what brought us together. The trust we had for him made us comfortable with each other.”

When Jones left for Ole Miss a couple of years later, a search began for his replacement; Keeton agreed to serve as vice chancellor – temporarily.

A couple of months after he was appointed chancellor of Ole Miss, Dr. Dan Jones, left, spends a moment with Woodward and Keeton before the start of the Sept. 23, 2009 fall faculty meeting at UMMC. The following February, Keeton would rise from interim to permanent vice chancellor for health affairs; Woodward would become permanent associate vice chancellor for health affairs and vice dean of the School of Medicine.



“A major factor in my job satisfaction is to respect the people I work for. I respect them profoundly, professionally and personally. Everything they do is with integrity.”

- Brian Rutledge -



In the meantime, he needed a No. 2, someone with the knowledge and experience to oversee the medical school, and he found her – on the spot, said Dr. Mart McMullan, senior advisor to the vice chancellor.

“He empowered Dr. Woodward to essentially serve as dean. When Dr. Keeton was elevated to permanent vice chancellor, LouAnn became even more valuable as a sounding board for his ideas.”

During their “interim” leadership, a feeling of trust developed between them that is now as solid as that old YMCA building in Columbus.

Her expertise in the education world is “incredible,” Keeton said.

Her skills complement his.

“I can speak extemporaneously. I know more physicians in the state,” he said.

“She can write extremely well, which I can’t do. She’s a master. She can encapsulate an idea quickly and explain it. It’s been a blessing to me.”

This dynamic became fixed at UMMC when the two finalists for the vice chancellor’s seat withdrew; Jones asked Keeton to take over for good – for stability’s sake.

But “stability” and “stagnation” are not synonyms.

When Jones’ predecessor, Dr. Wallace Conerly, retired on June 30, 2003, UMMC’s annual budget was around \$609 million.

Today, it’s \$1.6 billion.

Growth has been “exponential,” Keeton said. “It becomes more and more difficult to run the organization without a great deal of help.”

So, when he became permanent vice chancellor, Woodward remained put, too, performing, some might say, less like a No. 2 than a No. 1-A.

“There is a singleness of vision or purpose that became the heart of our working relationship,” Woodward said.

“He will tell me if something is a bad idea. Neither one of us is threatened by opposing views from the other.

“Sometimes I take a more subtle and softer approach than he does. But that may be our personalities, or the surgeon/non-surgeon thing.

“We don’t differ in our philosophy, or in our gut feelings about people, or on the right thing to do.”

That he is about 50 percent older than her doesn’t matter, she said.

“Jimmy acts younger than his age. He embraces technology, he embraces new ideas.

“He’s actually older than my father. But there is an energy about him that makes it fun.”

Keeton acknowledges this model of “redundancy” may frustrate some who aren’t quite sure who runs this place.

“I run this place,” he said. “But if something happens to me, keep on talking, because she can handle it.

“And if you don’t have redundancy in your department, there’s a problem. If something happened to you, who would take over? None of us is immortal.”

Those are the words of someone whose years and experience have produced in him a kind of hard-won fearlessness.

Like any physician, he learned how to break bad news to patients and their families; but nothing prepared him for this: Telling the same parents, on two separate occasions, that they had lost a son, one at age 44, the other at 34.

“That’s not the way it’s supposed to work,” he said.

The parents were his. Their sons were his brothers.

What are billion-dollar budgets compared to that?

Despite all the seriousness that comes with their roles, they both have a well-developed sense of humor. That’s part of the glue that makes Keeton-Woodward work.

They share adjoining offices. Sometimes their support staff go looking for them in his office, only to find them next door in hers. Or vice versa. The laughter emanating from within is often the tip-off.

The other thing that binds them, and has earned them the respect of people inside and outside the Medical Center, is that they are who they appear to be, according to Rutledge, who returns to UMMC at year’s end.

“A major factor in my job satisfaction is to respect the people I work for,” he said. “I respect them profoundly, professionally and personally. Everything they do is with integrity.

“Being their chief of staff is the best job I ever had.” **M**

A portrait of Dr. Joyce Olutade, a Black woman with short, dark, curly hair, smiling. She is wearing a white lab coat over a red top. A black stethoscope is draped around her neck. On her left chest, there is a medical ID badge with a photo and the text "MD" and "1000". On her right chest, there is a small blue and white patch with the text "Mississippi Health Care" and "10 YEARS".

Dr. Joyce Olutade



IN GOD'S TIME

Olutade responds to hour of need

by Gary Pettus

By the time Joyce Essien was 8, her wonderful life in Nigeria began to fall apart.

For two or three years, the girl who would become Dr. Joyce Olutade lived in a place where she had to walk past the bodies of people killed by bullets, where young women sold their bodies for money to buy food, where the homeless passed through like ghosts on the road to starvation.

That she saw all these things as a girl too young to be of help does not explain why she became a doctor; but it may explain the type of doctor she became.

"Joyce is a woman of action," said Dr. Lessa Phillips, medical director of United Healthcare and the former chair of family medicine at UMMC who hired Olutade years ago. "She has an indelible sense of morality and integrity, especially when it comes to relieving health disparities."

Now an assistant professor of family medicine at UMMC, Olutade has been, since October, the medical director for Student/Employee Health.

But for many of her colleagues and former students, her preeminent title is creator of the Jackson Free Clinic, the medical refuge that for nearly 12 years has served the working poor.

She recently left her position as the clinic's medical director in the hands of Dr. David Norris, but Olutade remains on the board and volunteers at the clinic, where patients in many ways resemble those she also sees, yearly, in the country where she was born.

"She has an indelible sense of morality and integrity, especially when it comes to relieving health disparities."

- Dr. Lessa Phillips -

It was more than 50 years ago, in Calabar, Nigeria, that she became the third child of a man who already gained two sons but had lost his mother and both sisters. He had wished for a girl, and when he got one, he named her Ini-Abasi – "in God's time," or "God's time is best."

Joyce, the baby's middle name, is English, the common language among the many tongues spoken in a country colonized by the British.

Called Ini or Joyce ("Joy see") by her friends, she had few cares during the first eight years of her life, playing soccer against the boys and living comfortably with her siblings on the salary of Jeremiah Essien, the director of a teachers' training college.

She attended church, one of the best schools around and family celebrations heaping with fish, plantain, cocoyam, rice, chicken soup and kegs of palm wine.

Then, in 1968, the war came, she said, and "disrupted my beautiful childhood."

In the conflict of secession that produced the country of Biafra, people on both sides suffered. In Uyo, where the teachers' college was located, Biafra's army converted the school into a barracks and kept her father on as administrator, until it arrested him.

Falsely accused of disloyalty, he would not see his family for two years, a period of despair he describes in his book, *In the Shadow of Death*. Alone with six children, his wife supervised the barracks kitchen in order to survive.

In the village where Essien's family had tried to retreat from the war, Joyce now played hide-and-seek with air-raided bombs instead of with her friends. Almost daily during the last year of the war, she walked past the bodies.

"As a child, after a while, you just shut that out," Olutade said.

Long before she witnessed this misery, she knew who she would become. Her future was set in the city of Ibadan, known to her for two things: its medical college and her uncle.

"My uncle was the first African doctor I knew," she said. "When I was 3 or 4, he would bring us presents." At one point, he was her guardian.

His example and encouragement are the reasons she went to medical school; there, she encountered some women who shaped her personal and professional lives forever.

They had cervical cancer. They had been treated with such high doses of radiation that no one could enter their hospital rooms safely – including the medical students there to observe them.

"Food was passed to them through the door," Olutade said. "Their own families had to talk to them through the door.

"They were like Old Testament lepers. What did the women do to deserve this? This stayed with me."

Something more positive stayed with her as well: A medical student who would become Dr. Tunde Olutade, a nephrologist, and her future husband.

Trained as an ophthalmologist, Joyce Olutade accompanied her new husband to America, after he earned a fellowship in nephrology at Emory University in Atlanta. Later, they lived in Virginia, where he also practiced family medicine in a medically-needy area. She liked what she saw of his practice there.

When they returned to Atlanta and she was denied an ophthalmology residency, she switched to family medicine, and has been there ever since.

But Atlanta in the 1980s was getting too big and too fast for the couple and their children. They looked for a smaller place, "a place where we could make a difference," she said.

"We prayed about it. We ended up in Mississippi through prayer – and leads.

"Before that, if you had told me I would be moving here one day, I would have said, 'You must be joking.'"

To her delight, she found the people here friendly and gracious.

She also found many of them poor. Her idea for a student-run free clinic was based on one she had seen in action during a short fellowship in San Diego. Like that one, the clinic that opened in Jackson in 2002 was for the homeless.

"What we discovered, though, was that the majority of the people who came here had jobs, but couldn't afford insurance," Olutade said. Soon, the clinic dropped "homeless" from its name.

At UMMC, the Department of Family Medicine had taken the clinic on as a project, Phillips said.



During her March visit at Molly Medical Center in Ibadan, Nigeria, Dr. Joyce Olutade points to a slide of the cervix as she lectures on the introduction to colposcopy, an examination to detect signs of disease.



During a lecture and seminar at Molly Medical Center in Ibadan, Olutade explains how a cryotherapy instrument is assembled and prepared for use to treat cervical dysplasia, the appearance of abnormal cells.



Dr. Joyce Olutade and her husband Dr. Tunde Olutade, a nephrologist and UMMC affiliate faculty member, have gone on medical missions together, to such locations as Ghana, Sierra Leone and Nigeria.

“Joyce gave untold hours to it. She will say that the students did it all. But, if not for her, it wouldn’t have happened.”

One of Olutade’s former students is Dr. Shannon Pittman, UMMC associate professor of family medicine.

“I once came in for an exam under her and I wasn’t ready,” Pittman said. “She made it clear that she was prepared, and I should be prepared. She didn’t lower the bar. Dr. Olutade has an expectation of excellence. She doesn’t expect anything from others that she doesn’t expect from herself. I’ve never forgotten that.”

Both Pittman and Phillips have been on medical missions to Africa, including Nigeria, where they train doctors and nurses to screen women for cervical cancer.

Olutade has been on those same missions, including a nine-day visit in March to Ibadan, where she trained cytotechnologists in cervical cancer prevention and taught doctors and nurses to perform a quick and inexpensive exam. They also screened women for the disease.

“What we discovered, though, was that the majority of the people who came here had jobs, but couldn’t afford insurance.”

- Dr. Joyce Olutade -

“It is the No. 2 cause of cancer death in women in Nigeria, second only to breast cancer,” Olutade said.

“It’s a tragedy, because it’s a preventable disease in 99.7 percent of the cases.”

Of the 500,000 or so women who develop cervical cancer worldwide per year, about half of them die, Olutade said.

About 80 percent of those are in developing countries.

The women Olutade saw when she was a medical student were not pre-screened for cervical cancer; there was no such effort available in that time or in that place.

Now, because of Olutade and the efforts of various organizations and medical missions, there is. She plans to go back to Nigeria in the fall.

“Why should so many women die from something that can be prevented?” she said.

In the country where she was born, Olutade is able to help them now. God’s time is best. **M**

The Picture of **HEALTH**

Destiny Frames Mary Currier's Career

by Gary Pettus

On those cold mornings in Dublin, her days began with the sound of the Volkswagen clearing its throat outside the drafty Irish duplex as her dad drove away to pursue a mystery called multiple sclerosis.

No one else in the neighborhood drove a Bug (the lady next door mistook them for Germans) and no one else had a dad like Mary Currier's.

Every day, Dr. Robert Currier motored out to interview particular sets of twins – one with MS, the other without – hoping to discover what made the difference, to crack the code and help prolong many lives in one fell swoop.

This was something his older daughter could sink her teeth into: It had charts and graphs and people in need.

It was a turning point in her life that, as much as anything else, set her onto the path that seemed chosen for her, winding toward the momentous job she took on four years ago and which even now can leave her “terrified.”

“It is a huge responsibility, doing the right thing for the whole state,” said Dr. Mary Currier, a 1983 School of Medicine graduate.

“I wake up some mornings and think, ‘Oh, my, what am I doing?’ But, then, I come to work and realize there are a lot of people here who do a really good job regardless of what I do.

“That keeps me from screaming and running out the door.”

The door opens onto the Mississippi State Department of Health in Jackson, and Currier has been walking through it for years, most notably as State Epidemiologist and, since 2010, as State Health Officer.

She is in charge of about three million “patients.”

Although her father was writing about his own role when he retired as chair of UMMC's Department of Neurology in 1990, he could have been describing his daughter's as it cooled its heels 20 years in the future:



All you need is the skin of a rhinoceros, the patience of an ant colony, the optimism of Pollyanna, the balance of a Wallenda, the willingness of Hercules, the morals of a vestal virgin, and the humor of Rodney Dangerfield.

You have to convince yourself that it really is fun. Which it is.



If “fun” is a synonym for “challenging,” then Mary Currier is having the time of her life.

She rose to the health department's top post just three years after the agency faced a crisis of trust, but one she helped defuse.

Today, she spends much of her time trying to scrape up funding for measures that chip away at obesity, infant mortality, STDs and all the usual suspects that make Mississippi the last word in unhealthiness.

Wearing Mississippi Public Health Association colors, Dr. Mary Currier lends her support and feet to Walk for Health 2014, a two-mile walk/run on April 11 to celebrate National Public Health Week.





Dr. Mary Currier, left, State Health Officer, Mississippi State Department of Health, hoods her son Drew Mallette after he received his Doctor of Medicine diploma May 27, 2011.

“Public health touches every person in the state. I always wanted to do something that helped. This is a place where a person can help a lot.”

- Dr. Mary Currier -



“Public health touches every person in the state,” she said. “I always wanted to do something that helped. This is a place where a person can help a lot.

“I know it’s corny. But that’s really how my parents raised me.”

Dr. Lucius “Luke” Lampton of Magnolia is partly responsible for assigning her this task, but he gives much of the credit to destiny.

“It’s almost like she had been put on a path to become State Health Officer,” said Lampton, chair of the 11-member Mississippi State Board of Health, which appointed her.

The evidence: Dr. Alton Cobb, the department’s long-time leader, was her mentor. Dr. Ed Thompson, her boss and immediate predecessor, was her advocate.

And Dr. Robert Currier was her father, Lampton said. “She was reared in that wonderful family.”

Her memories of family life begin in Ann Arbor, Mich., where she learned to fight off the snow and the cold by drinking coffee when she was 4.

When she was 5, she gave up the snow but not the coffee when her father was recruited to UMMC; he would eventually be named the first-ever chair of the new Department of Neurology.

She spent her childhood reading books, riding bikes and scribbling on her father’s chalkboard in the research wing of the old hospital, the lair of a “huge machine that looked like it could lop your arm off.”

But she took to the hospital the way most kids take to a swimming pool. “I was never afraid of it or thought of it as a place I didn’t want to be,” she said.

It’s the place where she ate lunch in the cafeteria with her father and wrapped Christmas presents for sick children with her mother. It’s the place she grew up in years before she hooded a new, young doctor at commencement: her son.

It’s the place where she earned her own medical degree nearly three decades before she took the job across State Street, in the office decorated with a framed photo of her

hero Dr. John Snow, the man who unmasked the source of London’s 1854 cholera outbreak.

Not quite 150 years later, Currier would confront an equally frightening, if less deadly, public health panic: an anthrax scare.

It’s a job she might have arrived at regardless of her teenage fling with Ireland. But Ireland didn’t hurt.

“We loved it, but it was as cold as the dickens,” said Marilyn Currier of Jackson, a former English teacher, and her mom.

In the mid-’70s, the family, which now included adopted daughter Angela, rented a Dublin duplex for six months in a country with a high rate of multiple sclerosis – the reason Robert Currier chose it for his research.



“Bob would go off to discover the cause of MS,” Marilyn Currier said. “I don’t think he discovered what it was, but I believe he discovered what it wasn’t.”

Mary Currier discovered something, too: Math was even cooler than she thought it was.

“Dad kept all his stuff in the dining room,” said Mary Currier, who was around 15 at the time. “He made all these cool graphs.”

All those lines of connecting points represented human lives; between them lay the key to saving them.

“I just loved that.”

Living in Ireland meant a lot to everyone else in the family, Marilyn Currier said. “It meant even more to Mary. When we were finally leaving Dublin, she said, ‘I’m coming back here to go to college.’

“And she did.”

In 1977, she revisited the city where biostatistics had stolen her heart. After completing a year at Trinity College in Dublin, she returned to the States, graduated from Rice University and gave destiny the runaround.

“I still wasn’t certain if I should go to medical school,” she said.

A year later, she knew. Working as a waitress at Friday’s, and then as a lab tech, showed her the way. “I wasn’t particularly good at either one,” she said.

In college and medical school she met two of the most important men in her life. One of them asked her out on a date in the Histology Lab as minute animal life writhed under the microscope beneath them.

This same medical student practiced his surgery on a campus rose garden marked by a sign that said, “Don’t pick the roses.”

Robert Mallette, now an ophthalmologist and surgeon, then had the flowers delivered to the Gross Anatomy Lab, where they were handed to Mary Currier over the cadaver tank.

Naturally, she married him.

They would have two sons, Dr. Drew Mallette, now a general surgical resident at UMMC (his wife is ob-gyn resident Dr. Kathryn Mallette) and Dan Mallette of San Antonio who, like his grandmother, became an English teacher.

“That’s the best thing I’ve ever done: Have those two boys,” Currier said.

The second man was Dr. Alton Cobb, whom she also won over – in a different way – after she hooked a fish about half her size from a lake near Cobb’s home in Madison County.

The huge white perch wouldn’t give up, but neither did Mary. Cobb never forgot that.

He had invited her there after meeting her through his son Tommy Cobb, a friend of Mary’s and Robert Mallette’s; he also knew her father.

“He was an outstanding teacher,” said Cobb, who was the state’s chief health officer from 1973 to 1993. “He believed in taking service to the people.”

These same qualities, he said, have served Mary Currier well in the position that was once Cobb’s.

“This is more than a job for her.”

During her tenure so far, the infant mortality rate has dropped, to 8.8 per 1,000 live births from 9.4, between 2011 and 2012 – the latest available figures.

Mississippi recorded fewer than 100 cases of tuberculosis in 2012, the lowest number since at least 1980.

The number of SIDS-related deaths was almost halved. Syphilis rates, finally, seemed to be headed south.

When she was State Epidemiologist her second go-round, Mississippi rose to No. 1 in immunizations for children 19-35 months of age, for 2009-2010.

“I enjoy looking at the epidemiology of the diseases in the state,” she said. “What can best be done about them. Who’s being affected the most. Things you can tell from the numbers. And being asked to help people with it.”

This is the realm of preventive medicine, but there wasn’t (and still isn’t) a corresponding residency program at UMMC when she graduated from medical school.

After finishing an internship in pediatrics, she went to work as a staff physician at the Department of Health, where Cobb began grooming her for his job, knowing she might have to leave for a while, but hoping he could get her back.

She did leave Mississippi long enough to earn a Master of Public Health during her preventive medicine residency at Johns Hopkins University. Then

she and her husband left Baltimore and came home.

“We realized that every place has its problems,” Currier said. “We decided to go to the place where we knew the problems.”

As it happened, the problems spilled into the Department of Health itself, between Dr. Ed Thompson’s two tenures as State Health Officer.

During his first, from 1993 to 2002, Currier was State Epidemiologist; when he left for a post at the Centers for Disease Control and Prevention in Atlanta, Currier joined the

UMMC faculty. Five years later, the Department of Health was under fire from the State Legislature for its disease-reporting practices and other accusations.

Currier was called as an expert witness at a legislative hearing, and Lampton was there.

“Her testimony showed her brilliance, her integrity and how she clearly understood public health in an extraordinary way,” he said.



Dr. Mary Currier with her father, Dr. Robert Currier



Dr. Mary Currier, foreground, right, warms up with Sylvia Burnett, left, graphic arts supervisor at the Mississippi State Department of Health, before the start of the April 11 Walk for Health recognizing National Public Health Week.

"This told me what I needed to do as a member of the board."

In 2007, a reconstituted State Board of Health asked Thompson to return to his old post. "He told me, 'If you hire me, you'll get two for one,'" Lampton said. "Of course, he was talking about Mary."

Once again, she became State Epidemiologist under Thompson, the boss she also considered a friend.

"He kept working until he couldn't anymore," she said. "We still miss him here."

Thompson and Currier were a strong team, Lampton said. "He leaned on her counsel."

"Then he got sick and went into decline, which broke our hearts."

When Thompson died in office, the choice of successor was obvious to Lampton and others.

"It was Mary who, behind the scenes, made sure everything ran smoothly during the worst days of his illness," Lampton said.

"She told me that part of her leadership style is she's never going to yell at anybody – a funny statement, but a perceptive one."

"She's humble; she understands human frailty and proves you can be a good human being and still be a great leader – and, in fact, be the best leader."

Currier agreed to be Thompson's replacement out of respect for the agency, she said, "not wanting it to go through the uncertainty of who would finally be in this spot."

Four years earlier, her father had passed away – too soon to see her fall into the job that seems meant for her.

But not too soon to leave behind advice that seems meant for that job:

Solve the problems. Shuffle the paper. Keep your office door open a while every day. Every now and then you may find out what is going on ...

Cry a little, but carry on. **M**

TOMATOES AND TORNADOES: *Currier confronts crises*

Among the public calamities Dr. Mary Currier has faced in the Mississippi State Department of Health, the bioterrorist anthrax "attack" was one of the most disturbing.

"People were afraid to open their mail," said Currier, who was the State Epidemiologist at the time. "Something so ordinary had become scary."

In the wake of 9-11, people across the country were infected with anthrax mailed in letters. In the fall of 2001, several died after exposure to the particles that resembled white powder or a sand-like substance.

Postal facilities were closed, buildings evacuated, and the panic reached Mississippi, where the Mississippi State Department of Health geared up to perform thousands of anthrax tests.

"The lab had to have the capacity to screen samples from local folks and turn around the results quickly and get the word out," Currier said.

"The department was testing such items as luggage, tomatoes, even some toilet

paper. They all had white powder on them."

Then, there was a report about an airplane that appeared to be spreading poison across the Mississippi River.

The department had to hold a press conference to confirm that death was dropping from the sky – from a crop duster killing bugs.

"There was never an outbreak here," Currier said, "but because of the scare, testing was conducted across the country by every health department."

Lessons were learned, though, including one that affected the most recent public crisis Currier confronted, this time as State Health Officer: the April 28 tornadoes.

Following the anthrax scare, an explosion of bioterrorism funding spread to Mississippi, enabling Currier's department to expand hurricane preparedness measures, such as mobile hospitals and special-needs shelters.

During this year's deadly outbreak of spring tornadoes in Mississippi, storms

heavily damaged the Winston Medical Center in Louisville.

In early May, a mobile disaster hospital went up in Louisville. Among the agencies directing this response, including the Mississippi Emergency Management Agency, was the Mississippi State Department of Health, led by Currier in person.

"There were lots of folks from UMMC, as well as from MSDH and many other groups, who were integral in restoring medical care in Louisville," she said.

As usual, she prefers to share the credit. But it's Currier who distinguishes public health in Mississippi, particularly during catastrophe, said Dr. Luke Lampton, chair of the Mississippi State Board of Health.

"People don't appreciate public health until it is gone," Lampton said.

"It's when disaster and crisis strike that the public finally appreciates the quality of public health. Mississippi is blessed to have Mary taking care of it." **||§||**

Creative Giving:

The Art of Donating Boosts Medical Center

By Ruth Cummins



It could be a valuable coin collection, a vacation home in Florida or a retirement plan remembrance.

Gifts to the University of Mississippi Medical Center are getting more creative as donors lay plans for the future or step in to meet current needs. Natalie Hutto, the Office of Development's new director of gift planning, is answering a growing number of questions current and potential donors have about how an unusual asset can benefit UMMC.

Trends in giving tracked by the development office show donors are thinking carefully about how their gift will benefit the state's only academic health science center, and how a planned donation can be a gift in itself when it comes to ease in settling a giver's estate.

"One of the more unique gifts we've received recently is from a donor who gave gold Kruggerand coins and silver bars," said Hutto, a certified public accountant and tax attorney. "That will fund a year- and- a- half of medical school tuition.

"We have some people who are donating second homes, or leaving a remainder of the interest in their home to fund an endowment or support a certain department," Hutto said. "It may be that none of their children want to inherit the house, and leaving their personal residence to UMMC at the death of the surviving spouse is the perfect way to benefit UMMC and eliminate the estate having to maintain and sell the property."

Donors can be assured that philanthropic gifts to the Medical Center will be put to use supporting a worthy cause of their choice. The range of opportunities is almost limitless, from scholarships to faculty development and from research to new facilities. The new School of Medicine, under construction with state bond money, will nevertheless benefit from private giving to offer state-of-the-art technologies like a simulation center.

Hutto's expertise in estate, gift and income tax planning, with an emphasis in charitable giving, is key to giving donors advice on estate planning and sometimes

“One of the more unique gifts we’ve received recently is from a donor who gave gold Krugerrand coins and silver bars.”

Natalie Hutto

complicated tax codes that govern giving. She’s fielding lots of questions, for example, from alumni and faculty who want to know the tax benefits of a planned gift, and how they can make an impact without giving up their current financial security.

At a recent breakfast for retired physicians, she said, many wanted to know how to structure their estate to avoid probate, how charitable gifts from retirement assets could reduce their tax liability in the year of death, or how to eliminate estate taxes so that family members won’t be left with that burden.

Those who have benefited from Hutto’s guidance include retired UMMC professor and physician Dr. Ed Draper of Jackson, whose gifts to the Medical Center include a fund that supports a lectureship in the Department of Psychiatry and honors top psychiatry residents.

Hutto “gave a magnificent presentation to a retired doctors’ breakfast club meeting that I attended. She had the old profs like me spellbound by what she had to say,” said Draper, who for 20 years served as chair of the Department of Psychiatry, bringing it from three to 33 faculty members and from three residents to 22.

“She’s been very responsive to questions I’ve had, and has laid out before me the things that are important,” Draper said. “What they’re (UMMC) doing with the program, and with her, is a major service to Medical Center people across the board.”

Giving trends also include the donation of stock, Hutto said. “Stock transfers are a way to save on capital gains. We’ve had a lot of stock transfers lately, and people also have named us as a beneficiary on their retirement assets to save on taxes.”

The Office of Development also is receiving gifts of paid-up whole life insurance policies, Hutto said.

“Some of those policies were bought when the donors were in medical school,” she said.

Many potential donors aren’t aware of what’s called a contingency gift. Such a donation is contingent on events that transpire before the donor’s death.

For example, Hutto said, a Vicksburg resident who had never set foot on the UMMC campus recently donated her home and estate, contingent on her relatives having passed away before her own death. The woman’s estate is indeed benefiting UMMC, Hutto said.

To discuss your ideas for a creative gift, or for more information, contact Hutto at 601-984-2306 or email her at nhutto@umc.edu. **M**



Dr. Ed Draper

AMONG WAYS TO MAKE A GIFT TO UMMC:

PLAN YOUR GIFT. After providing for your loved ones, you can make a gift from an IRA, 401(k), Keogh or similar plans. Ask the plan administrator for a Change of Beneficiary form, and designate UMMC to receive the portion you designate.

MAKE A GIFT OF LIFE INSURANCE. Name UMMC a beneficiary, either primary, secondary, final or contingent. Or, give a paid-up policy you own by changing the owner and beneficiary.

SPECIFY A DOLLAR AMOUNT TO BENEFIT UMMC IN YOUR WILL with assistance from your financial and legal advisors. Or, make a gift of the remainder of your estate after all other distributions have been made.

CHOOSE A SPECIFIC PROPERTY, such as jewelry, art, antiques or real estate, in your will and specify it as a gift to UMMC.

MAKE A GIFT OF SECURITIES – stocks, mutual funds or bonds. It can be either outright, or to fund certain types of gifts that provide income to the donor and/or others for a period of time. This type gift often leads to maximum tax benefits for the donor.

In his wildest dreams:

Endowed chair celebrates Parker's dedication

By Jen Hospodor

In the midst of the storm of the season, colleagues, friends and family braved the elements to stand by professor emeritus Dr. Paul Parker at the announcement of completed funding for the Paul H. Parker Chair of Pediatric Gastroenterology, a position meant to enhance research and clinical care in pediatric gastroenterology.

Parker, a University of Mississippi School of Medicine graduate who

began the pediatric gastroenterology program in 1981, is still shocked by the April 28 tribute.

"I never even in my wildest dreams imagined that I would have a chair named after me," Parker said.

The chair will be held within the Department of Pediatrics and is only the third funded chair in the department, following the Suzan B. Thames Professor and Chair of Pediatrics and the D. Jeanette Pullen

Professor and Chair of Pediatric Hematology-Oncology.

Dr. Rick Barr, the Thames professor and chair of pediatrics, said having endowed chairs helps raise the profile of the entire institution.

"It signals a real commitment to excellence from the institution," he said.

The first holder of the chair is Dr. Neelesh Tipnis, division chief and associate professor of pediatric gastroenterology. Prior to joining the Medical Center, he was associate professor of pediatrics in the Division of Pediatric Gastroenterology and Nutrition at the University of California in San Diego, Calif., practicing in UC San Diego's affiliated hospital, Rady Children's Hospital.

Tipnis, noting that he is honored to be named chair, said, "The endowed chair recognizes the importance of Dr. Parker's commitment to improve the lives of children in Mississippi. I am excited to continue this mission in Dr. Parker's name as the institution builds a dynamic and far-reaching pediatric gastroenterology program." **M**



Dr. Neelesh Tipnis, second from right, was honored during an April 28 reception as the recipient of the chair named for Dr. Paul H. Parker, far right. Congratulating him are, from left, Dr. Rick Barr and Dr. James Keeton.

"I never even in my wildest dreams imagined that I would have a chair named after me." - Parker

Two chairs, one night

Geissler, Russell awarded chairs named for “giants”

By Gary Pettus

Dr. William B. Geissler and Dr. George V. Russell were awarded separate, endowed chairs named in honor of two legendary UMMC professors during a June 11 reception in Jackson.

Geissler and Russell are professors in the Department of Orthopedic Surgery and Rehabilitation, which Russell also chairs.

Geissler received the Alan E. Freeland Chair of Orthopedic Hand Surgery, while Russell was awarded the James L. Hughes Chair of Orthopedic Surgery.

Drs. Freeland and Hughes, professors emeriti at UMMC, acknowledged the recipients before a gathering of about 125 people at the Country Club of Jackson.

“Endowed chairs are vitally important to academic medicine,” said Dr. James Keeton, vice chancellor for health affairs and dean of the School of Medicine.

“Lots of people gave of their time and their treasure They care about the Medical Center and the Department of Orthopedic Surgery.

“It shows you are committed. My gosh, you are committed – two endowed chairs in one night, and in the same department.”

Dr. Jorge Alonso, formerly of UMMC, and now professor and director of orthopedic trauma at the University of South Alabama College of Medicine, introduced Freeland and Hughes, referring to them as “these two giants.”

Freeland, former chief of the medical staff at UMMC, is listed in “Guide to America’s Top Surgeons”. He established the Hand Fellowship Program in 1991 and served as its director until 2004, retiring from clinical practice in 2005 to focus on research.

Hughes is an internationally known orthopedic surgeon who served at UMMC as chief of staff and chair of the Department of Orthopedic Surgery. He retired from UMMC in 2011.

While introducing the recipient of the Freeland Chair, Freeland said, “You could look all over the world and you couldn’t find a better guy than Will Geissler.”

Geissler completed his internship and residency in orthopedic surgery at UMMC before finishing fellowships in Switzerland and Richmond, Va.

Returning to UMMC to complete a fellowship in hand and upper extremity surgery under Freeland was “the best decision in my life,” Geissler said.

He joined the department in 1992 and specializes in shoulder and elbow surgery, hand surgery and advanced arthroscopic surgery. He is program director of UMMC’s orthopedic hand fellowship, serves as team consultant for the University of Mississippi athletic program and other community sports teams.

For his part, Hughes introduced Russell as “an extraordinarily competent surgeon” and only the fifth person to chair the Department of Orthopedic Surgery.

“I am honored that George [Russell] would be in this lineage,” Hughes said.

Russell joined the department in 2000.

He has become one of the nation’s leading orthopedic trauma surgeons and a recognized expert on obesity in orthopedics. A procedure he created, the clamshell osteotomy, is used around the world.

Russell praised Hughes for his mentorship and support.

“This is a very personal place for me,” he said of UMMC.

“For me, George Russell, an African-American from Cincinnati, Ohio, to become a tenured professor and an endowed chair at the University of Mississippi in Jackson, Mississippi, at the Country Club of Jackson, is a hell of a story.” **M**



Dr. William Geissler, standing, left, and Dr. George Russell, standing, right, were named recipients of, respectively, the Alan E. Freeland Chair of Orthopedic Hand Surgery and the James L. Hughes Chair of Orthopedic Surgery – chairs honoring professors emeriti Dr. Alan Freeland, seated, left, and Dr. James Hughes, seated right. Dr. James Keeton, standing, center, vice chancellor for health affairs and dean of the School of Medicine, spoke at the reception, held June 11.

LEUKEMIA DRUG ISOLATED AS POTENTIAL NEMESIS FOR AGGRESSIVE BREAST CANCER

A drug used to treat leukemia patients shows promise in fighting triple-negative breast cancer, a particularly aggressive subtype often affecting African-American women, researchers at the UMMC Cancer Institute said.

Scientists found roughly half of more than 800 triple-negative tumor samples they tested exhibited a key protein in the cells' nuclei. Further experiments proved the drug imatinib mesylate targets that protein and stops the growth process.

"By identifying a biomarker and oncogene found in about half of all triple-negative cases, we were able to successfully target and kill tumor cells in that subset of triple-negative samples," said Dr. Wael M. ElShamy, UMMC associate professor of biochemistry and Cancer Institute researcher.

"The next step is to organize a phase one clinical trial, where we would test this drug in a small

number of women with this cancer subtype in addition to their regular treatment."

PLOS (Public Library of Science) ONE, an online peer-reviewed journal, published ElShamy and his team's findings on April 30.

Triple-negative breast cancer, most often diagnosed in African-American women, is notorious for spreading, following initial treatment, to the brain, lungs or liver.

Triple negative refers to a sub-type of cancer whose cells lack three kinds of receptors on their cell surfaces. Conventional cancer drugs target those receptors, but they're ineffective for triple-negative patients.

If the drug imatinib passes clinical trials, it would be a new targeted therapy for triple-negative breast cancer.



Dr. Wael ElShamy

MICROGLIA CAST IN ROLES OF COP, ELECTRICIAN

New findings in often overlooked brain cells called microglia could lead to better understanding of – and possibly treatments for – neurological disorders, including autism, ALS, multiple sclerosis and Parkinson's disease.

Research by two University of Mississippi Medical Center neuroscientists investigated the apparent dual role of microglia: one as a policeman, the other as an electrician.

The new research, from the labs of Dr. Rick Lin, professor of neurobiology and anatomical sciences, and Dr. Yi Pang, assistant professor of pediatrics, indicate microglia cells are electricians involved with myelination during brain development.

Myelin is a fatty coating that insulates the brain's electrical wiring.

"The clinical implications of knowing more about that process – and maybe controlling it – are enormous because so many neurologic diseases result in myelin dysfunction," said Lin, who also holds faculty appointments in the Departments of Pediatrics and Psychiatry.

In their police role, microglia serve as part of the body's immune system, protecting the brain from invading pathogens. They also respond to trauma sites, possibly to hold down swelling.

Pang used a drug to eliminate microglia in the brains of developing rats. When the rats grew to the equivalent of early childhood, he analyzed each brain.

"We found that anywhere we'd injected the drug in the white matter there were no microglia and reduced – or even no – myelination," Pang said.

His experiment used only four treated and three control rats, so he plans to repeat it with more to produce statistically relevant data.

"These are preliminary data only. But they indicate there is a link between microglia and myelination," he said.

Pang's lab has published findings in cell culture that link microglia to the myelin-production process. But this poster is the first to test the hypothesis in animals.

Lin's project relied on microglia's snap transformation from their resting, compact shape into an activated form with spindles extended, allowing them to engulf intruders.

His team treated more than 20 rat pups daily with therapeutic-level doses of the antidepressant Citalopram, beginning at eight days old through two weeks. That time period of rat brain development corresponds to the final trimester in human pregnancy and first few years of life.

Such early exposure produces rats that exhibit key behaviors, deficiencies and brain malformations seen in autism, including myelination problems.

Lin and his autism research team let the rats reach adulthood – between six and eight months – then examined their brains. Each of the 20-plus treated rats had activated microglia.

This novel finding points toward a possible connection between the immune system job of activated microglia and their role in support of myelination during brain development.

RESEARCHERS ID PROSTATE CANCER FIGHTER

Researchers at the University of Mississippi Medical Center Cancer Institute recently identified a protein that could help doctors give a clearer prognosis to patients with high-risk prostate cancer.

“Our goal was to identify biomarkers associated with patient survival in prostate cancer,” said Dr. Christian Gomez, associate professor of pathology and Cancer Institute researcher.

Biomarkers – such as genes and their product proteins – act as flags to help identify all kinds of specimens and diseases, including subtypes of cancers.

Finding new prostate cancer biomarkers ultimately could improve patient care



Dr. Christian Gomez



Pang, left, and Lin

through better diagnostic methods, predictive models and improved therapies and drugs.

“The idea is you want to be able to tell patients very quickly whether to consider a prostatectomy, to just keep up surveillance, or to go home and forget about it,” Gomez said.

Prostate cancer, the second-leading cause of cancer deaths in the U.S., killed nearly 30,000 men last year, according to American Cancer Society estimates. With approximately one in every six U.S. men diagnosed with prostate cancer, and likely many more cases going undetected, medicine needs better tools.

In their research, Gomez and his collaborators at UMMC and the Mayo Clinic figured the low-oxygen environment of prostate cancer tumors might hold clues.

Low oxygen, or hypoxia, results from tumors’ ravenous need for oxygen to support their rapid growth. They hastily build rogue blood vessel networks to feed themselves, but those inefficient networks often provide less oxygen than normal, well-built systems would.

That hypoxic environment can make gene activity go haywire. Like a set of poorly managed checkout lanes in a grocery store, production of proteins in some genes gets amped up way beyond normal, a situation known as over expression. Production in other genes slows to an indifferent shuffle.

Gomez and his team compared gene expression in 100 prostate tumor samples and 71 normal-tissue control samples to narrow a group of more than 500 candidate genes to 24 that are significantly over- or under-expressed in hypoxia. They further whittled the field by correlating the gene candidates with patient survival and Gleason score, a standard evaluative measure in prostate cancer.

Using a Mayo Clinic database, they computer-matched 150 pairs of prostate cancer cases that had similar clinical characteristics and pathological scores, but differed in outcomes – meaning patients either survived or did not. They then tested the matched pairs for levels of proteins encoded by three candidate genes.

“We found that of the three candidates, HURP, a protein encoded by the gene DLG7, had the best predictive value for good outcomes,” Gomez said.

The journal Public Library of Science ONE published his study in December 2013.

MEDICAL CENTER WELCOMES NEW FACULTY

Dr. Michael R. McMullan, former clinical chief of cardiology and director of the Cardiology Fellowship Training Program at UMMC, has rejoined the Medical Center faculty as a professor of medicine and director of the Adult Congenital Heart Program.

A native of Decatur, McMullan received the B.S. in chemistry summa cum laude in 1987 from the University of Southern Mississippi, where he also was a summa cum laude Honors College graduate.

He earned the M.D. cum laude from UMMC in 1991 and had an internal medicine internship and residency there from 1991-94. He also served as chief resident, internal medicine, 1994-1995, and did a cardiology fellowship, 1995-1997, at UMMC.

At Duke University Medical Center, Durham, N.C., McMullan did an interventional, valvular and adult congenital heart disease cardiology fellowship, 1997-1998.

He originally joined the Medical Center faculty in 1998 as an assistant professor of medicine, where he started the Adult Congenital and Valvular Heart Disease Clinic. He became an associate professor of medicine and director of the Heart Station in 2002.

McMullan served as associate director of the Cardiology Fellowship Training Program, 2000-2003; director of the Cardiology Fellowship Training Program and associate director of the Internal Medicine Residency Training Program, 2000-2008; and clinical chief of the Division of Cardiology, 2005-2007 – the year he became a partner in the Jackson Heart Clinic, P.A.

A Best Doctors in America selection, McMullan is an active member of several professional organizations, including the American Medical Association, the Mississippi State Medical Association and the American Heart Association. A fellow in the American College of Cardiology, he served as governor of Mississippi for that organization, 2005-2008.

He was course director for the Introduction to Clinical Medicine course, and was selected as the Department of Medicine Teacher of the Year and UMMC Clinical Professor of the Year. He also was selected to the Nelson Order and to the Blake Academy for Excellence in Teaching.

Dr. Gene R. Barrett, a founding partner of Mississippi Sports Medicine and Orthopedic Center and a practicing sports medicine physician there for 28 years, has joined the Medical Center faculty as an associate professor of orthopedic surgery.

After attending Millsaps College, Barrett earned his M.D. at UMMC



McMullan



Barrett

in 1974. He did a general surgery internship and an orthopedic surgery residency, 1975-1976, at UMMC.

He completed his orthopedic residency at the Greenville (S.C.) Hospital System in 1979. After finishing an A-O International Fellowship in Liestal- Basel, Switzerland in 1980, Barrett completed a 14-month sports knee surgery fellowship at the Hughston Orthopedic Clinic, Columbus, Ga., in 1981.

Barrett was president of the Mississippi Orthopedic Society in 1989, and has served as an orthopedic consultant to numerous high schools and colleges throughout the area.

He is an active member of the American Orthopedic Association, the American Academy of Orthopedic Surgeons, the American Orthopedic Society for Sports Medicine, the American College of Sports Medicine, the Arthroscopy Association of North America, the Southern Orthopedic Society, and the Mid-America Orthopedic Association; he has served on many committees in these organizations.

Barrett has been inducted into the International Society of the Knee (International Society of Arthroscopy, Knee Surgery and Orthopaedic Sports Medicine), and was asked to join the prestigious Anterior Cruciate Ligament Study Group, where he served on the membership and program committees.

Barrett has authored or coauthored four book chapters and more than 35 articles on knee problems in peer-reviewed professional publications. He has presented his clinical research nationally and internationally.

Dr. James Simeon Adams Neill, a UMMC alumnus and practicing pathologist with Quest Diagnostics, has rejoined the Medical Center faculty as an associate professor of pathology.

After attending the University of Mississippi from 1971 to 1974, Neill earned the M.D. at UMMC in 1978.

He completed an internship in family practice, 1978-1979, and residency training in family practice, 1979-

1981, at Eugene Talmadge Memorial Hospital, Medical College of Georgia, Augusta. He subsequently finished residency training in pathology at UMMC, 1984-1987.

Neill entered family practice in 1981 at the Cleveland (Miss.) Medical Clinic and served as an emergency room physician at Spectrum Emergency Care, St. Louis, 1983-1984, and at Mississippi Emergency Association, Jackson, 1984-1986.

He initially joined the UMMC faculty in 1987 as an instructor in pathology. From 1988 to 1992, he served as an assistant professor of pathology and director of the Electron Microscopy Department of Pathology and Laboratory Medicine at the East Carolina University School of Medicine, Greenville, N.C.



Neill

In 1992, he joined the staff as attending pathologist and director of Electron Microscopy in the Department of Anatomic Pathology at William Beaumont Hospital, Royal Oak, Mich. He returned to his home state as a staff pathologist with Ameripath of Mississippi in 2005.

An active member of several professional organizations, including the American Society of Clinical Pathologists, the College of American Pathologists and the Mississippi State Medical Association, Neill is the author or coauthor of 27 articles in peer-reviewed professional publications.

Neill's research interests include animal models of focal segmental glomerular sclerosis. Most recently, he has reviewed the wound-healing characteristics of bovine fetal collagen in full thickness skin wounds.

Dr. Melissa M. Rhodes, assistant professor of pediatrics at the Ohio State University College of Medicine and director of the Comprehensive Sickle Cell and Thalassemia Center at Nationwide Children's Hospital, Columbus, Ohio, has joined the Medical Center faculty as an associate professor of pediatrics.

After receiving her B.S. in biology and B.A. in religion from Washington and Lee University, Lexington, Va., in 1995, Rhodes earned her M.D. at Eastern Virginia Medical School, Norfolk, in 1999.

She did a pediatrics residency, 1999-2002, at Children's Hospital of the King's Daughters, Norfolk, Va.; a pediatric hematology/oncology/BMT fellowship, 2002-2005; and a research fellowship, 2005-2006, at the Vanderbilt University Medical Center, Nashville, Tenn.

Rhodes joined the Vanderbilt University Medical Center faculty in 2005 as an instructor in pediatrics and became an assistant professor of pediatrics there in 2007. In 2008, she moved to Ohio State University as an assistant professor of pediatrics.

A journal reviewer for several publications, including *Blood*, *Pediatric Blood and Cancer*, the *Archives of Pediatrics and Adolescent Medicine* and the *BMT*, Rhodes is the author or coauthor of at least 16 articles in peer-reviewed professional publications, two book chapters and 16 abstracts.

Her research interests include lung function and bronchial responsiveness in infants and toddlers with sickle cell disease, and health literacy and readiness for transition in adolescents with sickle cell disease.

Dr. Troy E. Rhodes, a cardiac electrophysiologist from the Ohio State University Medical Center, has joined the Medical Center faculty as an assistant professor of medicine.

Before medical school, Rhodes received his Ph.D. in biomedical sciences-neurosciences from Old Dominion University and Eastern



Rhodes



Rhodes

Virginia Medical School in 1996. He received his M.D. from EVMS in 2002. He completed his internal medicine residency in 2004 and a cardiology fellowship in 2008 at the Vanderbilt University Medical Center, followed by cardiac electrophysiology fellowship at the Ohio State University Medical Center in 2010. Following his fellowship, he joined the OSUMC faculty as a clinical assistant professor of medicine.

Rhodes is board-certified in internal medicine, cardiology and electrophysiology, a certified cardiac device specialist, and a fellow of the Heart Rhythm Society. He has authored or coauthored 13 articles in peer-reviewed journals, 24 abstracts and two book chapters.

Rhodes specializes in treating patients with arrhythmias, syncope and cardiac devices (pacemakers, ICDs, loop monitors).

He performs electrophysiologic testing and ablation procedures as well as device implants and lead extractions.

His research interests include evaluating new cardiac devices and ablation therapies. He completed the Institute for Healthcare Improvement's (IHI's) Patient Safety Executive Development Program in 2013 and was involved in patient safety and quality improvement while at Ohio State.

Dr. Vadivel Devaraju, a medical physicist and diplomate of the American Board of Radiology with specialization in diagnostic medical imaging physics, has joined the Medical Center faculty as an assistant professor of radiology.

He received his bachelor's degree in electrical engineering from India, earned his Master of Science in biomedical engineering and his doctorate in medical imaging at Drexel University, Philadelphia, Pa.

"Dr. Dev" was trained in diagnostic imaging physics at the University of Texas M. D. Anderson Cancer Center, Houston, and later joined the University of Florida, where he served in quality assurance for the University of Florida Proton Therapy for approximately six years.

He conducted research in collaboration with the faculty members of the radiology department on an Institutional Review Board-approved proposal.

Devaraju has worked at the University of Pennsylvania with the medical imaging section of the Department of Radiology, carrying out research work and system administration. He also worked for an ultrasound company in the U.S., performing acoustic measurements on a variety of medical devices.

Among the several publications and conference presentations to his credit is "Challenges in Multiparametric MR imaging," presented at the Radiological Society of North America conference in 2013. His current research focus is oncologic MR imaging and dosimetry.

Devaraju is a member of the American Association of Physicists in Medicine, the American College of Radiology and the Institute of Electrical and Electronics Engineers of the USA. He is a fellow and chartered engineer of the Institution of Engineers, India.



Devaraju

FAMILY TIES HELP GUIDE ARNOLD TO UMMC'S CHIEF OF STAFF POST

In Rochester, Minn., where Dr. Peter Arnold grew up, you could hardly shake a tree without a surgeon falling out.

"Being the son of a chief of surgery wasn't a big deal," Arnold said. "The town was full of them."

But there, at the home of the Mayo Clinic, even Dr. P. G. Arnold cast an enormous shadow that would loom over his son.

"I really tried not to be a doctor," Peter Arnold said, "but there was that voice in the back of my head that wouldn't stop talking."

The voice that guided Arnold to a medical career in spite of himself would steer him years later to UMMC, where the plastic surgeon and recently appointed chief of the medical staff is making his own place in the sun. Appointed to the chief's post mid-summer of last year, and four years after his arrival, Arnold believes he pestered his way into the job.

"I guess I made enough of a nuisance of myself to be considered for it," said Arnold, who's also associate program director for the Plastic Surgery Residency Training Program.

As chief of the medical staff, he gets to try out all those ideas he had been bringing to the door of Dr. William Cleland, chief medical officer, who

tapped Arnold with the approval of Dr. James Keeton, vice chancellor for health affairs.

"A couple of processes bugged me and I'd walk into Dr. Cleland's office and tell him," Arnold said. "Then I started thinking about the bigger picture – how do we make the process work for plastic surgery, for the Department of Surgery, for vascular surgery?"

Now he's trying to make it work for everyone on the medical staff.

"Dr. Arnold is smart and has a lot of energy," said Cleland, who, as chief medical officer, works for the entire Medical Center, including the hospitals, clinics and dental school, while also serving as medical director for risk management. "He is very well-spoken and is well-respected among the staff."

"He has that mix of things that equals the right stuff for the job."

Between the chief medical officer and chief of medical staff jobs, there is some overlap. Formerly a two-year elected position before Arnold succeeded Dr. Marion Wofford, the chief of the



Dr. Peter Arnold is making a place for himself as the new chief of medical staff at UMMC.

medical staff is now appointed – a decision Keeton and Cleland made as well.

"It was difficult to make an impact in just two years," Cleland said.

From now on, chiefs of staff also will be given more time to do that job, thanks to a reduced clinical workload.

By tradition, Arnold will oversee the credentialing of physicians, peer reviews, ongoing professional practices, evaluations and more. Beyond those conventional duties, Keeton and Cleland tacked on a couple more: improving quality control and boosting communication among physicians and between physicians and other staff.



David Putt

PUTT TAKES HELM AT UMMC-GRENADA, LEXINGTON

David Putt, an experienced hospital executive who has run health-care organizations large and small, has been appointed chief executive officer of the Medical Center's community hospitals in Grenada and Lexington.

The appointments took effect March 1 and April 1, respectively.

Formerly a health network relationships advisor to the vice chancellor for health affairs, Putt had been serving as interim CEO of the former Grenada Lake Medical Center since UMMC began managing the facility in September 2013. UMMC entered a long-term lease to operate the hospital – renamed UMMC Grenada – in February.

UMMC has owned Holmes County Hospital and

Clinics in Lexington since 2000.

Putt has a long history in health-care management, including 11 years – three as CEO – in senior leadership positions with UMMC's adult hospitals in Jackson. During his 19 years with UMMC, Putt also has served as CEO of the hospital and clinics in Lexington.

"David Putt knows what it takes to run a successful hospital," said Dr. James Keeton, vice chancellor for health affairs. "Everywhere he's been he's earned the loyalty of employees and the confidence of the medical staff."

"He's the right person at the right time to lead these two hospitals that are so vital to their communities."

THE FAME OF HALL: SEC HONORS UMMC RESEARCHER/MENTOR

Dr. John Hall, a professor and administrator at the University of Mississippi Medical Center, has been named the Southeastern Conference's 2014 Professor of the Year in recognition of his excellence both in the classroom and as a topflight obesity and cardiovascular researcher.

The SEC announced on April 30 Hall's selection as the top professor among those teaching at the SEC's 14 member institutions of higher education.

"Dr. John Hall represents what is best about academic leadership in the Southeastern Conference," UM Chancellor Dan Jones said. "His reputation as an educator spans the globe and his contributions in the broad fields of medicine and physiology are substantial. He exemplifies the ideals we should all have for an SEC Professor of the Year."

Hall is the Arthur C. Guyton Professor and chair of physiology and biophysics, and director of the Mississippi Center for Obesity Research at UMMC. He is one of the most recognized teachers and researchers in the areas of cardiovascular and renal physiology, mechanisms of hypertension, obesity and metabolic disorders.

At UMMC, he's mentored more than 120 postdoctoral fellows, graduate students and medical student researchers. He's seen six of his understudies go on to become chairs or directors of various university departments, and one is dean of graduate studies at UMMC.

"There are 14 outstanding universities, so it was a real surprise to me when I received the notice that I was chosen for this honor," Hall said. "I think this to me is important because it does signify that the Southeastern Conference really values academics and scholarship."

"This is a tribute not to me so much, but the university – that we have a good team here of cardiovascular researchers and many folks that work together."

The award is given each year to one SEC faculty member with a record in research and scholarship that places him or her among the elite in higher education. The winners are picked from the universities' SEC Faculty Achievement Award nominees. The SEC will provide Hall with a \$20,000 honorarium and recognize him at the SEC Spring Meetings in May.

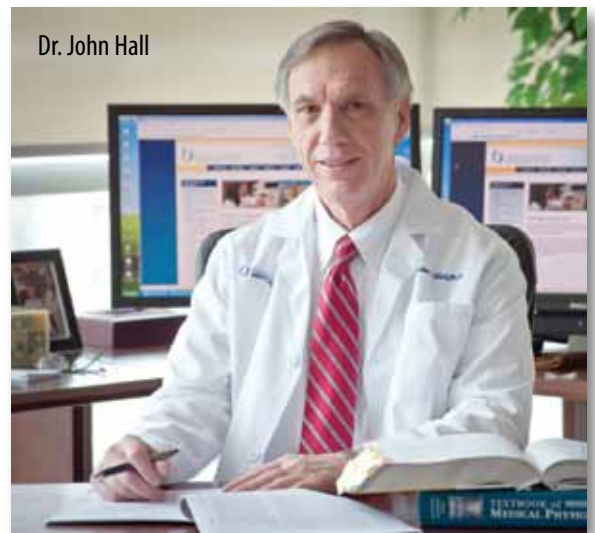
Hall has fostered development of the next generation of "exemplary scientists," said Dr. James Keeton, vice chancellor for health affairs and dean of the UMMC School of Medicine.

"Dr. Hall is part of a lineage that includes some of the finest scientists this country has produced," Keeton said. "He is the product of a department that has nurtured many leaders in the field of physiology and, in turn, his leadership has fostered the development of the next generation of exemplary scientists. There's no greater legacy than that, and no person more deserving of this honor."

Hall received his bachelor's degree at Kent State University, his doctorate in physiology at Michigan State University and his post-doctoral training at UMMC before joining the faculty.

He has been the principal investigator of grants that have brought roughly \$50 million in extramural funding to UMMC. Hall's research has been funded by the National Heart, Lung and Blood Institute since 1975 and he's also been director of a National Institutes of Health Program Project since 1988. He has written more than 530 publications and has been cited more than 35,800 times. He also co-authored the Textbook of Medical Physiology, which is considered the leading textbook on the subject. It has been translated into 14 different languages and is one of 18 books he has either written or edited.

Hall has been inducted into the Norman C. Nelson Order for Teaching Excellence at UMMC,



and in 2005, his students nominated him as an All-Star Professor.

Mississippi Gov. Phil Bryant said the honor for Hall reflects the countless lives he's touched through his work.

"I have had the privilege of calling Dr. John Hall a friend for many years," Bryant said. "His work is a perfect example of the excellence and innovation found in Mississippi. He has touched countless lives in the classroom and through his research. He certainly deserves this honor."



Dr. Scott Stringer, left, UMMC professor and chair of otolaryngology, receives a Vice Presidential Citation in recognition of his contributions to otolaryngology-head and neck surgery from Dr. Doug Girod, vice president of the Triological Society Middle Section, at the Jan. 10 Triological Society Combined Sections Meeting in Miami, Fla.

LONGTIME DIRECTOR RETIRES FROM UMMC ALUMNI AFFAIRS

Geoffrey Mitchell, longtime director of alumni affairs for UMMC, announced his retirement as of May 30, 2014.

Mitchell had worked for the Medical Center since February 1990.

Originally from Glasgow, Ky., he is a 1965 graduate of the Chamberlain-Hunt Academy in Port Gibson.

Mitchell earned his bachelor's degree in business administration from the University of Mississippi in 1970.

He served as trust officer for Third National Bank in Nashville, 1970-1983, before entering the field of certified property management in N. Palm Beach, Fla., and then in Nashville.

Mitchell began his career at UMMC as associate director of alumni affairs and development and was later promoted to director.

He is married to Christine Peterson Mitchell; they have two sons, John and Hunter.



Geoffrey Mitchell



The School of Medicine's top educators were recognized at the 18th annual awards banquet of the Carl. G. Evers M.D. Society April 1 in the Norman C. Nelson Student Union. Evers Award winners include, seated from left, Dr. David Brown, M1 Professor of the Year; Dr. Jack Correia, M1 Department of the Year (Department of Biochemistry); Dr. William Daley, M2 Department of the Year (Pathology); and standing from left, Dr. Lauren Barry, M3 Resident of the Year; Dr. Lisa Didion, M3 Attending of the Year; Jan Simpson, M3 Course Administrator of the Year; Dr. Lyssa Weatherly, M4 Resident of the Year; and Dr. Michelle Horn, M3 and M4 Department of the Year (Department of Medicine). Not pictured are; Dr. Alexandra Brown, M2 Professor of the Year, and Dr. Calvin Thigpen, M4 Attending of the Year.

BARR SCORES EDITORIAL POST

The Southern Medical Journal selected Dr. Rick Barr, Suzan B. Thames Professor and Chair of Pediatrics, as assistant editor for child health starting Jan. 1.

A monthly electronic publication of the Southern Medical Association, the journal covers a broad range of topics germane to physicians and other health-care specialists.



Dr. Rick Barr

GAMBLE CITED AS SCHOLAR IN CANCER DISPARITIES PROGRAM

Dr. Abigail Gamble, an instructor in pediatrics and an early-career investigator in the Office of Population Health, was selected this year as a scholar in the 2014 Health Disparities Research Training Award Program (HDRTP), focusing on health-disparities research in cancer prevention.

The two-year, interdisciplinary program trains early-career faculty as independent investigators through a series of workshops that hone skills in health-disparities research.

It is funded by grants from the NIH Cancer Institute, the NIH National Institute on Aging and the NIH National Institute on Minority Health and Health Disparities through the Morehouse School of Medicine, Tuskegee University, the University of Alabama, Creighton University, Jackson State University and the University of Alabama at Birmingham.



Dr. Abigail Gamble

VINJIRAYER'S REVIEW EARNS ANESTHESIA RESIDENTS' PRIZE

Dr. Anita Vinjirayer, house officer in the Department of Anesthesiology, was awarded second place for her presentation-literature review at the Gulf Atlantic Anesthesia Residents' Research Conference, April 6 in Jacksonville, Fla.

The annual meeting devoted to presentations by resident physicians from anesthesiology programs based in the Southeast allows resident-physicians to speak publicly about their research interests and activities. The presentations are co-developed under faculty supervision.



Dr. Anita Vinjirayer

DILLARD'S DEVOTION TO QUALITY SPARKS MEDICAL CENTER'S Q AWARD

Dr. Benjamin C. Dillard, associate professor of pediatrics, was recognized in January for promoting quality and patient safety when he received the Q Award from Dr. William Cleland, chief medical officer.

Dillard was nominated by Jennifer Stephen, clinical director of pediatric emergency and lab services, who wrote that Dillard fosters quality in his role at the Medical Center.

"Benji has accepted committees, councils and task force appointments to supplement pediatric knowledge and emphasis," Stephen wrote, noting that the greatest demonstration of his efforts lies in his "teaching of students and residents in the pediatric ER."

"His commitment to teaching extends past his hours as attending physician in the pediatric ER."

The Q Award is presented quarterly by Quality Administration to a Medical Center physician who promotes quality and improves patient safety.



Dr. Benjamin C. Dillard, right, associate professor of pediatrics, receives the Q Award from Dr. William Cleland, chief medical officer.

THREE UMMC ANESTHESIOLOGISTS ASCEND TO STATEWIDE OFFICES



Dr. John Bethea



Dr. Page Branam



Dr. John Lutz

Three Medical Center physicians were elected to statewide offices during the Mississippi Society of Anesthesiologists' annual meeting, Feb. 22 at the Hilton Hotel in Jackson.

Dr. John Bethea, assistant professor of anesthesiology, was elected president-elect of the MSA; Dr. Page Branam, assistant professor of anesthesiology, was elected to a three-year term as secretary/treasurer; and Dr. John Lutz, house officer in anesthesiology, was elected a resident member of the MSA's Executive Committee.



Dr. James Keeton, vice chancellor for health affairs, presents the Mississippi Board of Trustees of State Institutions of Higher Learning Diversity Award for Excellence to Dr. Bettina Beech, associate vice chancellor of rural health and health disparities.

BEECH REWARDED BY IHL TRUSTEES, JOURNAL

Dr. Bettina Beech, associate vice chancellor for rural health and health disparities, was honored in February by the Mississippi Board of Trustees of State Institutions of Higher Learning (IHL) for her work in fostering diversity.

Beech was among 11 award recipients from Mississippi universities who were recognized "for serving as a role model and advocate for the advancement of diversity" during the IHL's observance of Black History Month.

A month earlier, on Jan. 1, Beech, who is also a professor of family medicine and pediatrics, was named editor of the journal *Family and Community Health*.

A quarterly publication of Lippincott, Williams and Wilkins, *Family and Community Health* provides a forum for spreading creative, multidisciplinary views and tactics for strong public health practice and community health programs.

Each issue highlights one area of interest for an international readership that embraces numerous disciplines and specialties.



Photo by Deryll Stegall

Members of the 1935-1963 School of Medicine classes gathered March 7 for the UMMC Medical Legacy Reunion. They are, front row, from left, Dr. Robert May, Dr. Alton Cobb, Dr. William Cook, Dr. Kirby Bryant, Dr. Mary Wheatley, Dr. Nancy Burrows, Dr. Ralph Brock, Dr. William McQuinn, Dr. Wadie Hill Abraham Jr., Dr. Dewitt Crawford, Dr. Heber Etheridge, Dr. Paul Moore; middle row, from left, Dr. Richard Yelverton, Dr. Sam Field, Dr. William Bowlus, Dr. Richard Ellison, Dr. Joe Johnston, Dr. Walter Rose, Dr. Charles Spence, Dr. Jimmy Hays, Dr. Richard Johnson, Dr. Bill McKell, Dr. George Smith, Dr. J. T. Davis; back row, from left, Dr. Benton Hilbun, Dr. Charles Burgess, Dr. Waymond Rone, Dr. Gene Wood, Dr. George Ball, Dr. Dayton Whites, Dr. Brantley Pace, Dr. Jerry Gulleddge, Dr. Glyn Hilbun, Dr. Charles Smith, Dr. Alvin Brent, Dr. James "Buddy" Griffin.

Legacy

MEDICAL CLASS REUNION

by Gary Pettus



Savannah Duckworth, now an internal medicine resident at UMMC, examines a vintage yearbook with Dr. Charles Smith, Class of 1951, during the UMMC Medical Legacy Reunion, March 7.

Dr. Ralph Brock of McComb, who's approaching 90, is proud that he's computer literate, has a cell phone and does a "little texting back and forth."

A member of the medical school class of 1945, he welcomes the gadgets and learning tools available to 21st century medical students, including online testing, lecture podcasts, downloadable Power Point presentations, interactive slides and Audience Polling Devices (clickers).

Unlike today, when Brock was a student the only way to take a class was to go to it.

"Technology has taken over, which is fine," said Brock, who graduated

from what was then a two-year medical school located in Oxford. "But I wouldn't take anything for my medical education there."

During the March 7 UMMC Medical Legacy Reunion at UMMC, Brock was one of dozens of medical school graduates who were tutored in the ways of the modern-day institution, even as they were honored for their own bequests.

"Everyone feels a debt of gratitude for what you've done," Dr. LouAnn Woodward told alumni during the event, which recognized the classes of 1935-1963 and included a tour of the Medical Center.

"You can be just as proud of the students coming out of the school

now as you are of those in your own class," said Woodward, associate vice chancellor for health affairs and vice dean of the School of Medicine.

Many of those attending – 36 for the Student Union lunch, 29 for the reception and dinner at the Country Club of Jackson – finished medical school in the 1950s and early '60s.

Brock alone represented the oldest class present, which graduated 10 years before the four-year school opened in Jackson. His was one of two classes that finished in 1945, the final year of World War II, which had affected graduation schedules.

Yearly tuition then was \$150, compared to \$23,149 now.

"That two-year school at Ole Miss was something special," said Brock, who closed his private practice in 1995, when he was 70.

"The professors were friendly, but they pushed us. They wanted us to be a credit to the school. When I went to Tulane University Medical School to finish my degree, I was a full semester ahead of the students who had been there for two years."

Brock was one of 28 students who finished in his class at Oxford. As Woodward pointed out, the current entering class is about five times that,

and there are plans to boost future enrollment to 160-165 over the next few years, here in a state where the physician shortage per capita is the most critical.

"We feel a tremendous sense of possibility for the impact we can have on the state," Woodward said of the medical school and UMMC in general.

"We touch a lot of lives in Mississippi, and we never lose sight of that."

Woodward, a 1991 School of Medicine graduate, said that even compared to her class, today's students spend more time in the community, volunteering for work in the Jackson Free Clinic and in other areas of the state.

"They are really making a difference," she said.

Compared to the past entering classes, they are also more likely to come from a variety of educational, economic and ethnic backgrounds, said Dr. Steve Case, associate dean of medical school admissions.

"We are not looking just for students who can succeed, but also for those who can fulfill our mission and diversity interests."

Students admitted here, as a whole, score below the national average on the Medical College Admission Test (MCAT), but by the time they take

Step 2 of the United States Medical Licensing Exam a few years later, their marks rise well above that standard, said Dr. Jerry Clark, associate dean for student affairs.

Students who do especially well nationwide, Clark said, have taken courses under Dr. Kimberly Simpson, associate professor of neurobiology and anatomical sciences.

It was Simpson who summarized for alumni the technology essential to modern classroom learning, including downloadable lectures available to students who miss a class or who want to review it.

Among their other tools are polling devices, or clickers, which had been distributed to the alumni for a series of surveys taken throughout the program.

At one point, Dr. Loretta Jackson-Williams, associate dean for academic affairs, polled alumni on this question: "Are you ready to begin (medical school) again?"

"No" was the answer for 85 percent.

Dr. Marion Sigrest, 84, of Yazoo City, class of '62, was likely a "no" voter.

"If I went back to school today, I would have to start in the first grade," Sigrest said, following the lunch.

"I don't understand anything they've been talking about. But I do know something about the art of medicine. And that's what I tried to teach her."

He was referring to Dr. Lyssa Weatherly of Yazoo City, an internal medicine resident who did two medical school rotations with Sigrest and who attended the reunion to greet her mentor.

"He's awesome," said Weatherly, as she used her smart phone to snap a photo of Sigrest's '62 class portrait from one of the vintage yearbooks on display.

"They don't make them like him anymore."

Sigrest, who's still in practice, was asked if he was responsible for Weatherly's choice to become a doctor.

"Yes," he said. "And I taught her how to play golf." **M**



Dr. Wadie Hill Abraham Jr., of Marion, Class of 1960, enjoys a laugh with Dr. Lyssa Weatherly, a UMMC internal medicine resident, during the UMMC Medical Legacy Reunion luncheon, March 7, in the Student Union.

1940s



Dr. Wallace Earl "Mike" Caldwell (1948) has retired from practice and lives in Ridgeland with his wife Marlene.

The Baldwin native attended Memphis State University and Mississippi College before entering the two-year program at the University School of Medicine in Oxford.

He earned his medical degree in 1950 from the University of Texas Southwestern Medical Center in Dallas and served a rotating internship at Shreveport Charity Hospital in Shreveport, La.

Caldwell practiced family medicine in his hometown for more than 25 years before serving as health officer for the Northeast District of the Mississippi Board of Health. He was medical director for Blue Cross & Blue Shield of Mississippi for 10 years.

A World War II U.S. Navy veteran, he was a physician for the Department of Defense's Military Entrance Processing Station in Jackson from October 1988 to November 1997. He served later as chief medical officer for the station, retiring in 2002.

Caldwell is a former president of the Ole Miss Medical Alumni Association and is past chair of the University of Mississippi Center Guardian Society.

1950s



Dr. Henry Mills with wife Catherine

Dr. Henry Mills (1957) retired eight years ago after a 42-year career as a board certified ophthalmologist in private practice in Jackson.

He and his wife Catherine have been married 57 years and have a summer home in Hendersonville, N.C.

Mills, 80, spends time traveling, river and ocean cruising, and attending church.

Dr. Tom Mills, his son, is a gastroenterologist at St. Dominic offices in Jackson and is also a UMMC School of Medicine graduate. He also has a son, Henry, and a daughter, Catherine.

"My patients were wonderful and I miss them," Mills wrote. "Ophthalmology is such a fine specialty and is now extremely high tech and interesting. My physics degree from Millsaps (College in Jackson) came in handy while I was practicing ..."

1960s



Dr. Bill Keeton (1966), an anesthesiologist and pain management specialist in Atlanta, Ga., has written a book about growing up in the Jackson neighborhood that has come to be known as Fondren. The book's title, *A Boy Called Combustion*, draws its name from the mischievous activities of the protagonist, who always seems just moments away from a calamity, usually self-induced. Keeton's grandfather, D.F. Fondren, established a general store in what was then the outskirts of Jackson, but now is home to UMMC and a thriving business and residential community. Keeton's nostalgic memoir is offered by Hoorah Patch Press and available from Amazon. He is a cousin of Dr. James Keeton, vice chancellor for health affairs at UMMC.

Dr. Fred T. Kimbrell Jr. (1967) of Old Hickory, Tenn., retired in 2010 after practicing general surgery for more than 40 years.

Kimbrell participates in many volunteer projects, including Project Cure, Nashville: sorting and packing medical supplies for third-world countries; Alive Hospice Nashville: visiting hospice patients; and Charis Health Center, Mt. Juliet, Tenn.: performing surgical consulting and minor office surgery.

He remains active in his church, Hermitage United Methodist Church, Hermitage, Tenn., and teaches a Disciple Bible study class.

Kimbrell's 11 grandchildren all live in the Greater Nashville area. "So I get to take them out, sugar them up and let them get dirty," he wrote, "and then take them home to their parents."

1970s



Dr. Thad F. Waites (1970) of Hattiesburg was chosen this year as a member of the board of trustees for the American College of Cardiology after he served as chair of the organization's board of governors.

A cardiologist with the Hattiesburg Clinic, Waites is also director of the cardiac catheterization lab at Forrest General Hospital.

After graduating with his medical degree from UMMC, he completed an internship at Emory University, Grady Hospital. He also completed an internal medicine residency at the University of Colorado after his active duty as a flight surgeon with the U.S. Navy Reserve.

Waites practiced internal medicine for two years at Ochsner Clinic before completing his chief residency at Emory, where he also received a cardiology fellowship.

For eight years he worked at Ochsner, where he was named Teacher of the Year, and then joined the Hattiesburg Clinic in 1987.

He has served as president of the Mississippi Affiliate of the American Heart Association, president of the Southeastern Affiliate of the American Heart Association for two terms and vice president of the Hattiesburg Clinic.

His clinical research interest is in the field of CT imaging.

Dr. Bill Bradford (1971), an emergency medicine physician in Waveland, has retired from his practice.

He and his wife Dr. Judith Bradford survived the Hurricane Katrina storm surge that wrecked their home and devastated their town in 2005.

Bradford has been active in community affairs and has made several presentations about the history of Waveland, including Katrina's destruction. He wrote that he is looking forward to his 45th medical class reunion in 2016.

Dr. Horace Byron Phillips Jr. (1973) of Talladega, Ala., retired from his ob-gyn practice in 2011, and now spends time in Colorado and Alabama.

He volunteers for surgical mission work in Honduras with Hattiesburg-based Baptist Medical & Dental Mission International, which has served that country and Nicaragua since 1974, treating more than one million people for free and establishing more than 120 churches.



Dr. Mary Fennell Lyles (1975) of Winston-Salem, N.C., has been at Wake Forest School of Medicine since completing her postgraduate training and works in internal medicine in the division of geriatric medicine.

Her husband Doug Lyles earned his Ph.D. at UMMC in 1975 and has chaired the Wake Forest School of Medicine's Department of Biochemistry for the past 10 years.

Mary Lyles is also performing clinical research, studying the causes of muscle weakness in aging. She has conducted about 700 muscle biopsies to that end.

She and her husband have three grown children and a grandson. "We welcome visits from classmates who may be in the area," she wrote.



Dr. John J. McGraw (1978) of Jefferson City, Tenn., was named chair of the Board of Councilors (BOC) of the American Academy of Orthopaedic Surgeons at the AAOS meeting in March in New Orleans.

The BOC, which serves as an advisory body and performs several other AAOS-related duties, represents orthopedic surgeons in all 50 states, the District of Columbia, the U.S. military, Puerto Rico, Canada and four regional orthopedic societies.

McGraw is a part of the Knoxville Orthopedic Clinic and for the past 10 years has anchored the Jefferson City office. He also serves as a team physician for the Tennessee Smokies (the Chicago Cubs' AA minor league team) and Jefferson County High School.

He is now in his third year as a member of the AAOS board of directors and is past president of the Southern Orthopaedic Association, serving also as a BOC representative for that organization.

After earning his medical degree at UMMC, McGraw completed his residency at St. Louis University Hospital and an internship at Spartanburg General Hospital in South Carolina.

McGraw served for 34 years in the U.S. Air Force and U.S. Army, participating in deployments to Afghanistan and Kosovo. He retired in April 2013 as a U.S. Army Reserve colonel.

He is co-owner of Lakeway Broadcasting, LLC, in Jefferson City and frequently serves as announcer on medical and civic news shows and other programs.

McGraw and his wife Ann Rogers McGraw, have two grown children and several grandchildren.

1980s

Dr. Dwalia South (1980) has been a family doctor in Ripley for more than 30 years and serves as chair of the Publications Committee for the Journal of the Mississippi State Medical Association.



Dr. Dwalia South with her granddaughter Molly Lee Williams and her son Jack

She served as president of the Mississippi Academy of Family Physicians, 1999 – 2000, and president of the Mississippi State Medical Association, 2007-2008.

South has been honored as the Mississippi State Family Physician of the Year.

A noted writer, she collected her stories, essays, poems and letters in her book *Una Voce*, published in 2011.

South lives on her family farm with her husband, musician Roger Yancey. She has two sons, Jesse and Jack. Her granddaughter, Molly Lee Williams, was born on Jan. 7, 2014 to her son Jack and his wife Kimery.



Dr. Hubert Spears with wife Rose Spears

Dr. Hubert Spears (1980) recently moved his practice from Oxford to Grenada to work in general surgery for the University of Mississippi Medical Center Grenada.

Spears is the former president of the Medical Alumni Chapter.

He completed his residency in general surgery at the University of Tennessee in 1985 and a fellowship in surgical oncology at Roswell Park Cancer Institute in Buffalo, N.Y., in 1987.



Dr. Marc Aiken (1983) is CEO of Watauga Orthopaedics in Johnson City, Tenn., where he has practiced since 1988.

The Starkville native is the team physician for the United States Ski Team and has, since 1995, served as the sports medicine physician for the Masters Water Ski Tournament at Calloway Gardens, Ga.

Following his graduation from the UMMC School of Medicine, he performed a five-year orthopedic surgical residency at UMMC.

He completed a fellowship in hand surgery and trauma at Inselspital in Bern, Switzerland, and also studied in Edinburgh, Scotland, and New Castle, England.

Aiken has performed medical mission work in Russia, Romania, Haiti, Trinidad, Mongolia, Africa and other places abroad, working to improve trauma care. He has been part of the faculty for trauma courses in the United States and overseas.

Aiken has helped train students and residents at East Tennessee State University's Quillen College of Medicine as well as fourth-year orthopedic residents from UMMC's program.

In Johnson City, where he lives with his wife Laura and their two children, he reserves his free time for restoring cars, waterskiing, sports, woodworking, church and more.

Dr. James Jeffery Boyd (1984) of Brookhaven is a urologist affiliated with multiple hospitals in the Brookhaven area.

Originally from Tupelo, he earned his medical degree at UMMC before attending the University of Tennessee for his internship. Boyd returned to Jackson to complete his residency at the Medical Center.

He and his wife Nancy have three children: Jason, Emily and Allison. On June 3, 2013, he became grandfather to boy/girl twins.

His hobbies include golf, exercise and traveling.



Dr. Michael Mansour (1984), a cardiologist at Delta Regional Medical Center in Greenville, has been elected chair of the American College of Cardiology Board of Governors and secretary of the board of trustees, the college's main governing body, for 2014-2015.

Elected in March, Mansour has been a member of the Board of Governors and president of the American College of Cardiology's Mississippi chapter since 2011. As chair of the board, he will lead a body of 66 governors from all 50 states, the District of Columbia, Puerto Rico, Canada, Mexico and the U.S. Uniformed Services who were chosen to aid communication between college leaders and their members.

Mansour, who graduated from Millsaps College in Jackson and completed his internal medicine residency at the Ochsner Foundation Hospital, is also a member of UMMC's affiliate faculty. He is the current secretary/treasurer and a member of the Mississippi State Medical Association board of trustees.

Mansour has been chief fellow in cardiology at the University of Florida School of Medicine and an interventional fellow in cardiology at Beth Israel Hospital, Harvard Medical School. He later served as assistant professor of medicine at the University of Florida, and then as clinical assistant professor of medicine at Emory University.

The problem of health-care disparities is one of his research interests, and he has focused on reducing disparities and improving outcomes in underserved and minority populations.

He and his wife Dr. Kathleen Mansour and their four children live in Greenville.

Dr. Ken Vanexan (1984) of Corpus Christi, Texas, is a diagnostic radiologist and neuroradiologist with Radiology and Imaging of South Texas.

Previously, he spent about 11 years with a similar group in Birmingham, Ala. He chairs the management committee of his current group, which includes 16 partners and three associates.

Vanexan has been married for 12 years to Elizabeth Vanexan; they have two sons.

Dr. William S. Mayo (1985, residency) of Oxford has been re-elected to a three-year term on the American Osteopathic Association Board of Trustees (2013-2016).

Mayo is serving his eighth year on the Mississippi State Board of Medical Licensure. He also serves on the Council of Medical Service for the Mississippi State Medical Association.

Mayo graduated from the College of Osteopathic Medicine, Kansas City University of Medicine in Kansas City, Mo., in 1981. He did his flexible medicine post-graduate year one and ophthalmology residency at UMMC from 1981 to 1985. He sees patients at the Mayo Eye Center in Oxford.

Dr. William B. Cornell (1986) retired in September 2013 as medical director of the laboratory of the Fisher-Titus Medical Center in Norwalk, Ohio. He continues to work part-time and serve on the medical center's board of directors. Cornell is also division commissioner, Northern Ohio, for the College of American Pathologist Commission on Laboratory Accreditation. He and his wife Linda Cornell plan to enjoy more time with their children and four grandchildren.

1990s



Dr. C. Joseph "Joey" Cadle (1995) is the national director of Clinical Client Engagement and serves as the primary physician liaison for more than 25 of Kaiser Permanente's largest national accounts.

Based in Atlanta, Ga., Cadle also serves as assistant to the executive medical director for external relations, marketing and sales for Kaiser Permanente's Georgia region. Among his other responsibilities are oversight and supervision of a team of 20 clinicians.

Cadle has practiced with Kaiser Permanente for more than 13 years, and served as chief of the ob-gyn department in 2007 and 2008. Prior to this role, he was managing physician of three medical office buildings, served as lead physician for a team in the ob-gyn department and contributed to implementation of Kaiser Permanente's electronic health record.

Cadle joined Kaiser Permanente after two years of private practice in Rome, Ga. The Mississippi native graduated from the University of Mississippi and completed his M.D. and residency training at UMMC.



Dr. S. Steve Samudrala (1997, residency) of Brentwood, Tenn., is a founder and medical director of America's Family Doctors, a multi-lingual practice that is able to serve patients who speak English, Spanish, Telugu or Hindu.

He is also a co-founder and chief medical officer of dVisit.com, a mobile and web app for patients seeking treatment for routine illnesses.

Samudrala earned his medical degree at Wayne State University School of Medicine in Michigan before completing his residency in family medicine at UMMC.

Also known as "Dr. Sam," he specializes in medically-supervised weight loss, hormone replacement and attention deficit disorders. He is also "passionate" about aesthetic and age management medicine, he wrote.

Samudrala's personal interests are tennis, hockey and spending time with his wife and two daughters.

2000s



Dr. Tara Allen (2003) of Nashville, Tenn., completed a residency in urology at the University of Arkansas for Medical Sciences in 2008.

That same year, she joined the Center for Urological Treatment in Nashville, where she continues to practice.

In 2010, Allen became a diplomate of the American Board of Urology and completed subspecialty certification in female pelvic medicine and reconstructive surgery (FPM-RS) in 2013.



Dr. D. Clark Files (2003) received an Outstanding Early Career Investigator Award from the American Thoracic Society (ATS) Foundation in January.

Files, an assistant professor at Wake Forest Baptist Medical Center in Winston-Salem, N.C., is investigating muscle degeneration related to acute lung injury (ALI), with the goal of developing treatments for older ALI patients.

The awards were created to offset the effects of federal government budget cuts on the coming generation of scientists in pulmonary care, critical care and sleep medicine.

The ATS Foundation has granted a total of \$280,000 in research money to support early career investigators like Files, whose work is otherwise unfunded.

As with other foundation funding, Files' \$40,000 award will enable him to continue his initial research and reapply for further funding down the road.



Dr. Charles Christian Paine II and Dr. Elizabeth Rickman Paine with their son Charles Griffin Paine

Dr. Charles Christian Paine II (2010), a pediatrician and house officer at UMMC, and his wife Dr. Elizabeth Rickman Paine (2007), a UMMC assistant professor of medicine, had their first child, Charles Griffin Paine, on March 31.

Paine's name at the time of his medical school graduation was Charles Christian Paine Snider II.

Dr. PonJola CONEY

Pioneer alum regales medical honors students

by Gary Pettus



Dr. Omar Rahman, left, UMMC associate professor of pediatrics, presents a plaque to Dr. PonJola Coney recognizing her contributions as a visiting Alpha Omega Alpha professor.

Even before she told her family she was going to be a medical doctor – Dr. PonJola Coney, to be exact – she had become a medical student.

Aware of the stormy racial climate that persisted back then in the 1970s, she knew her folks would worry about her, and so delayed revealing her plan until the last minute.

“When I told my mom that I had been accepted to medical school,” Coney recalled, “she said, ‘I just don’t think they’re going to let you do it.’”

But they “let” her do much more than that: In her decades-long career, Coney has been a pioneer in academic medicine and a leader who has risen to her current position as senior associate dean, Center on Health Disparities Director at the Virginia Commonwealth University (VCU) School of Medicine in Richmond.

On March 13, she returned to Jackson,

the city of her medical school alma mater, to deliver a message to her profession’s future leaders: inductees into the UMMC School of Medicine’s chapter of the Alpha Omega Alpha (AOA) Honor Medical Society.



Dr. PonJola Coney

“I never cease to appreciate my alma mater, which has dedicated itself to preserving the best of the past and inventing the future boldly,” Coney said in her keynote address to a gathering of

approximately 100 initiates and their guests, plus faculty and staff, at Jackson’s Fairview Inn.

“It gave me my first insight into scientific principles and instilled in me the importance of treating all patients as if they were the Queen of England. ...”

A member of the School of Medicine Class of 1978, Coney helped write

the history of UMMC, particularly in 2002, when the McComb native became the first Medical Center graduate named as dean of a medical school: Meharry Medical College in Nashville.

She had come a long way from her days as a lab tech who had to be persuaded to go to medical school.

Brought up on a 50-acre farm in Pike County, the daughter of parents who were originally sharecroppers, she was the first in her family to go to college. One of seven children, she reaped the wisdom of her great-grandfather, whom she describes as a “political farmer.”

“He kept up with politics and told me about the world. He insisted that I go to college,” Coney said in an interview.

Boosted by her mom’s willingness to take a job outside the home to help pay for her education, the salutatorian of her high school graduating class in Magnolia entered Xavier University of Louisiana in New Orleans and earned a B.S. in medical technology.

When the University of Chicago recruited Coney to its medical school, she said, she turned down the offer.

"My attitude was: 'I worked like a dog to get out of college. I'm going to get a job.'"

That job was in the acute care lab at UMMC, where she became friends with medical students who brought samples there, she said.

"They said, 'You're smart enough to go to medical school; you should apply.'"

Finally, she did. She was admitted to UMMC's School of Medicine, with the provision that she complete two hours of physics in the summer. Working days and attending night classes at Mississippi College, she finished the course work a week before medical school started.

Her mom's fears for her were unfounded. One of 15 African-American students in her class of 150 and one of 28 women, the one known as P.J. was elected vice president by her classmates.

She does remember one troubling encounter with a patient, a plantation farmer who asked the young medical student what she was doing in his room. When she told him, he asked her to leave and, by the time she returned, he had checked himself out and entered another hospital.

Mostly, though, she remembers an encouraging environment, as well as "the energy and synergy" that endure at UMMC today, she told the AOA initiates.

"There were so many small moments with big meaning and cherished memories for which I will always be grateful, moments that have stayed with me and will stay with you in a good way as you go out into the world."

Coney's foray into the world, post-UMMC, began with her ob-gyn residency at the University of North Carolina in Chapel Hill, followed by a reproductive endocrinology and infertility fellowship at Pennsylvania Hospital in Philadelphia. She has held faculty and leadership positions in various institutions, among them chair of ob-gyn at the University of Southern Illinois, which preceded her stint at Meharry.

"I've always been at an academic medical center," said Coney, who is also a professor in the Department of Obstetrics and Gynecology at VCU's School of Medicine.

"I love the environment. I love the students."

Of the 22 students accepted into AOA here, she said, "You have demonstrated outstanding scholarship, professionalism, leadership and service, and you did it in far shorter period of time than I. It only took me 20 years after leaving this great institution to be elected to this society."

Faculty members and residents were also initiated into the AOA chapter, whose faculty councilor is Dr. Omar Abdul-Rahman (Dr. Rahman), UMMC associate professor of pediatrics.

"We were so thrilled when Dr. Coney agreed to return to Mississippi for this great event honoring the medical school's best students," Rahman said, following the ceremony.

"She spoke so passionately about the excellent quality of a UMMC education, and how it set her up for the many successes she has had in her professional life.

"I believe the students heard that message, and we are excited to see what great things the class of 2014 is going to accomplish."

Coney's visit wasn't her first official appearance in Jackson since graduating from UMMC. She was the commencement speaker for the Medical Center graduation ceremony in 2003, the year after she was invited to fill the same role at Jackson State University.

"You can never say 'no' to Mississippi," she said.

Coney, who serves on several national task forces and councils, is an advocate for patients who endure health disparities and limited access to care.

"Each year in the U.S., thousands of individuals die unnecessarily from treatable or preventable diseases," she said to the AOA initiates.

"... Disparities in health represent a serious threat to our future as a nation."

Relieving these inequalities, she said, requires caring, knowledgeable leaders in medicine.

Among her suggestions for the future leaders were these:

- ◆ "Love what you do."
- ◆ "Keep the ego in check."
- ◆ "Be willing to take some risk."

Remembering the sacrifices of her mother, the advice of her great-grandfather and the support of her UMMC classmates, she also said this: "If you don't have friends and family, you should get some." **M**

ALPHA CHAPTER OF MISSISSIPPI INITIATES, ALPHA OMEGA ALPHA MEDICAL HONOR SOCIETY

- ◆ Class of 2014: Anna Katherine Allred, Clayton Hunter Dugan, Sarah Frances Duhon, Matthew Melton Fort, Robert Milton Gathings III, Joel Iverson Howard, Colette Marie Jackson, Michael Olen Jennings, John Randall Moore, Patrick Reid Peavy, Christopher Alan Penton, Justin Lamar Smith, Charlotte Skelton Taylor, Douglas Dwight Thaggard, Clark Monroe Walker.
- ◆ Class of 2015: Clifford Edwin Coile, Joshua Joseph Cousin, Julie Marcia Dhossche, Lauren Michelle Tardo, Ann Robin Tucker, Lauren Marie Wahl, Diantha Ann Williamson.
- ◆ 2014 residents: Dr. Feriyal Bhajjee, Dr. Michael Wyatt Morris, Dr. Geoffrey Ian Watson.
- ◆ 2014 faculty: Dr. Barbara Thompson Alexander, Ph.D.; Dr. Kyle Thomas Lewis.
- ◆ 2014 AOA Resident Teacher of the Year: Dr. Lyssa Taylor Weatherly, internal medicine, 2015-2016 internal medicine chief resident.
- ◆ 2014 AOA Faculty Teacher of the Year: Dr. Robert Thomas Brodell, chair and professor of dermatology.

In Memoriam

Dr. Vincent P. Barranco (1962) of Tulsa, Okla.; Nov. 13, 2013; age 76

Dr. Donald Ray Berry (1952) of Picayune; Jan. 17, 2014; age 91

Dr. Mark A. Byrd (1993) of Lewisburg, W. Va.; Feb. 14, 2014; age 52

Dr. Woodrow Wilson Defore Jr. (1972) of Oxford; Jan. 6, 2014; age 66

Dr. Wilford C. Doss Jr. (1951) of Florence, Ala.; March 14, 2014; age 92

Dr. John Daniel Ferguson III (1978) of Sarasota, Fla.; Jan. 19, 2014; age 64

Dr. Richard Fleming (1960) of Meridian; Nov. 11, 2013; age 79

Dr. Viacin Faeza Jones-Chandler (1989) of Hattiesburg; Jan. 4, 2014; age 51

Dr. George Dale Ladner (1962) of Jackson; Jan. 28, 2014; age 77

Dr. Theodore Lewis (1948) of Charleston; Jan. 6, 2014; age 93

Dr. Benjamin Franklin Martin III (1966) of Holly Springs; Feb. 23, 2014; age 75

Dr. Barry P. McIntosh Sr. (1951) of Paris, Tenn.; Dec. 6, 2013; age 84

Dr. Albert L. Meena (1952) of Madison; Dec. 1, 2013; age 86

Dr. Henry R. Nail (1960) of Brandon; Nov. 13, 2013; age 79

Dr. Gary A. Nelson (1970) of Clinton; Feb. 1, 2014; age 68

Dr. Jeanie Katherine Stubblefield (1939) of McMinnville, Tenn.; Jan. 18, 2014; age 99

Dr. Joe Walter Terry Jr. (1957) of Canton; April 4, 2014; age 82

Dr. James L. Thornton (1959) of New Albany; Jan. 12, 2014; age 78

Dr. Billy M. Wansley Sr. (1960) of Biloxi; Dec. 11, 2013; age 79

Dr. Donald Watson (1983) of Las Cruces, N.M.; Dec. 8, 2013; age 57

Dr. Garland Hamilton "Bo" Holloman Jr.

(1973) Dr. Garland Hamilton "Bo" Holloman Jr., professor of psychiatry, medical director of the psychiatry emergency service, assistant professor of emergency medicine and associate professor of neurology at UMMC, died Feb. 7, 2014 following a lengthy illness. He was 70.

The son of Garland H. Holloman and Eugenia Floy Simpson Holloman, he was born April 17, 1943 in Montgomery, Ala. As an Eagle Scout, he was the recipient of the God and Country Award and was a member of the Order of the Arrow.

After moving to Mississippi as a child, he graduated in 1960 from Clarksdale High School, and then earned the B.A. in biology in 1964 at Millsaps College, where he was nicknamed Bo, a name his father and uncles were also known by. A talented pianist, he played in high school and college bands.

Holloman received his Ph.D. in physiology and biophysics in 1969 and his medical degree in 1973 from UMMC before completing his psychiatry residency at the Mental Health Institute in Cherokee, Iowa, and a year of residency in neurology at UMMC.

He received many awards and honors, including Teacher of the Year several times. His influence helped establish the Crisis Intervention Team for Hinds County.

Holloman chaired Project Beta, a collaboration that created Best Practices Guidelines for evaluation and treatment of acute agitation



with approaches observed worldwide. In 2013, he received the Exemplary Psychiatrist Award from the National Alliance on Mental Illness.

He was also the recipient of the Emergency

Psychiatry Achievement Award from the American Association for Emergency Psychiatry. UMMC psychiatry residents presented him with the Excellence in Psychiatric Education Award, and he was named the inaugural member of the 7th Floor West Attending Hall of Fame.

Holloman was a member of the Board of the American Association for Emergency Psychiatry and the Mississippi Psychiatric Association. At UMMC he organized and led the Psychiatric Epic Task Force and served as a member of the Peer Review Committee and the Medical Directors Committee for the Department of Psychiatry.

Among his interests were Southern history, genealogical research, art and tending his backyard.

He is survived by two sons, Tom Holloman of New Orleans, La., and Patrick Holloman of Missoula, Mont.; and his sister Floy Holloman (Jesse Carr) of Houston, Texas.

He is buried in the Itta Bena Cemetery in Itta Bena.

Dr. Henry Latham Laws II (1954) of Mountain Brook, Ala., died on Feb. 25, 2014 at age 81.

A pioneer in the training of surgical physician assistants, Laws was honored in 2012 for his lifelong contributions to medicine when the University of Mississippi

In Memoriam

Medical Alumni Chapter inducted him into the inaugural Medical Hall of Fame, along with two of his heroes and mentors, Dr. Arthur Guyton and Dr. James Hardy.

He was also selected to the Ole Miss Alumni Hall of Fame in 2004, the year after he retired.

Laws was born on Feb. 24, 1933 in Columbus, where he graduated from Lee High School.

At Ole Miss, he was a member of Kappa Alpha Order and played football as a walk-on for three semesters while taking an accelerated academic course. He completed two years of medical school on the Oxford campus in 1954 and at the encouragement of Guyton transferred to Harvard Medical School, graduating there in 1956.

He interned at Baylor University under Dr. Michael DeBakey's program and completed a surgical residency at the University of Alabama.

Laws also served stints as a U.S. Army surgeon before going into private practice in Anniston, Ala., and then serving on the medical faculty of the University of Alabama-Birmingham.

Known as a "surgeon's surgeon," at UAB he pioneered and led a program for the training of physician assistants. From 1982 to 2000, Laws was director of the Surgical Training Program at Carraway Methodist Medical Center. During this time he also served as a clinical professor of surgery at UAB.

Noted for his expertise in general surgery and trauma care, Laws was a leader in various prestigious professional organizations, including the American College of Surgeons.

He was a past president of the Southeastern Surgical Congress, which recognized him with its Distinguished Service Award.

Considered a visionary and innovator

in small-incision surgery, he was co-director from 1989 to 1992 of the Laparoscopic Laboratory Practicum, where he utilized the Auburn Veterinary School to instruct surgeons in laparoscopic surgery.

Laws spoke on five continents as the principal speaker or main panelist on endoscopic surgery. He authored more than 140 scientific articles and exhibits and served as visiting professor or visiting surgeon at various medical centers, including Duke University and Harvard's Massachusetts General Hospital.

He was also a contributor to Dr. James Hardy's textbook on surgery. Retiring in 2003, Laws and his wife Debbie spent time at their farm in Chilton County, Ala., where he indulged his passions for growing oak trees, quail hunting and fly fishing.

Dr. Earl E. Whitwell (1968) of Tupelo died on Nov. 8, 2013 at age 70.

Born in Memphis on July 12, 1943, he grew up in Senatobia, where he was an Eagle Scout and enjoyed all sports, particularly football.

After graduating as the 1961 valedictorian of Senatobia High School, he accepted a college football scholarship and attended the University of Virginia for two years.

Returning to his home state to complete his undergraduate work at the University of Mississippi, he was admitted to the UMMC School of Medicine after his junior year of college and completed his M.D. in 1968.

Whitwell completed his residency in orthopedic surgery in July of 1973 and became board certified by the American Board of Orthopedic Surgery the following year. In 1977, he became a Fellow of the American Academy of

Orthopedic Surgeons. In the 1990s, he served as president of the Mississippi Orthopedic Society.

In Tupelo, Whitwell enjoyed a 28-year career in orthopedics, starting in 1973. A well-known figure in the community, he was the team doctor for the Tupelo High School football program for almost 20 years and directed the Crippled Children's Clinic.

Whitwell and Valerie Argo Whitwell were married for 23 years. His interests included golf, college football and World War II history.

A man of faith, he had recently become spiritual mentor and discipleship leader for the congregation at The Orchard in Tupelo. He was also an advisory board member with the Mississippi Chapter of the Fellowship of Christian Athletes and the Save a Life Foundation during the 1980s.

Send us your lives

We're looking for more and more class notes. If you didn't get your news in this issue, send it for the next. Let your classmates know what you've been doing since graduation or the last class reunion. Be sure to include the name you used in school, the year you graduated, and if possible, a digital photo of yourself.

We also welcome your story ideas, subjects you'd like to see covered in these pages or a graduate you know who would make an interesting profile.

Send class notes, story ideas and photos to gpettus@umc.edu or mail to

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