

CLASS NOTES

'70s Gurmukh Singh

(PhD '77, Pathology Resident '78) holds the Walter Sheppard Chair in Clinical Pathology and is vice chair of pathology at Augusta University's Medical College of Georgia (MCG). Singh's laboratory investigates methods for diagnosing multiple myeloma, and its recent findings—that both urine and blood tests produce the most reliable results—were featured in the *Journal of Clinical Medicine Research*. He was honored in 2017 with MCG's Faculty Recognition Award in celebration of his passion for pathology education. "Pathology," he says, "is a little more like science than clinical medicine, which is more an art. It's a good fit for my personality."



Singh



Jaffee

Johns Hopkins University, where she also serves as deputy director of Hopkins's Sidney Kimmel Comprehensive Cancer Center. Her research focuses on developing vaccines to treat cancer, and she's currently researching a vaccine that "teaches" immune-system T cells to fight pancreatic cancer. "We're making a lot of progress" on the vaccine, she says—"it's quite an exciting time."

'80s Elizabeth Jaffee

(Internal Medicine Resident '88) is the Dana and Albert "Cubby" Broccoli Professor of Oncology at

Jaffee was appointed chair of the National Cancer Advisory Board in 2013 by former President Barack Obama, a position she still holds today.

'90s Theodore Delbridge

After 12 years as chair of emergency medicine at East Carolina University, Theodore Delbridge (Emergency Medicine Resident '92, Emergency Medicine Fellow '93) moved to Baltimore in 2018 to serve as executive director of the Maryland Institute for Emergency Medical Services Systems. This is a "one-of-a-kind job," he says; he oversees the state's emergency medical system—including ground and air transport and related policies—in a comprehensive system unlike that in any other state. Delbridge's love of EMS stretches back to high school.



Delbridge

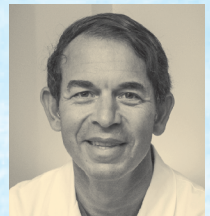
Anureet Bajaj (MD '96) started her private practice, Bajaj Plastic Surgery, in Oklahoma City in 2007. Her clinical repertoire includes the pioneering deep inferior epigastric perforator (DIEP) flap procedure for breast reconstruction, a vascular surgical method that reconstructs breasts with the patient's own tissue while also preserving their abdominal muscles. Until recently, says Bajaj, "I was essentially the only person in the state doing this procedure." She also serves on the editorial board for the journal *Plastic and Reconstructive Surgery*; her most



Bajaj

recent publication for them considers the best ethical-use practices for social media in plastic surgery.

At Columbia University, Selim M. Arcasoy (Pulmonary and Critical Care Medicine Fellow '98) serves as the Dickinson W. Richards Jr. Professor of Medicine (in pediatrics) and medical director of the Lung Transplantation Program. The program has grown to "one of the largest in the country," he says, performing more than 80 lung transplants a year. Arcasoy is a member of the Lung Working Group of the Organ Procurement and Transplantation Network, which is working on an allocation policy for continuous distribution of lungs, as opposed to geographic distribution—a system that will make organ transplants more accessible to underserved regions.



Arcasoy

'00s Amy Hartman

(PhD '03) is an assistant professor of infectious diseases and microbiology at the University of Pittsburgh Graduate School of Public Health. Her research focuses on emerging viruses at the human-animal interface, particularly the mosquito-transmitted Rift Valley fever virus (RVFV): "a human and animal pathogen," says Hartman, "that presents a significant disease risk to people and livestock." RVFV causes serious disease in humans; Hartman works to develop vaccines and therapies to prevent infection; her research findings were published last December by *Science Advances*. "I find RVFV to be a fascinating virus," she says, "because of its complex ecology—it has implications for the environment, animals, and people."



Hartman

KMarie Reid (General Surgery Resident '05) is a professor of surgery at Morehouse University, as well as director of quality, and the section chief for liver, pancreas, and foregut surgery. Since joining Morehouse in 2018, Reid has built a practice focused on hepatobiliary and pancreas surgery. She's on the board of the Society for Surgery of the Alimentary Tract and serves as a National Surgical Quality Improvement Program champion for Atlanta's Grady Memorial Hospital. "It's exciting," she says, "to have the opportunity to serve our patients and offer them multidisciplinary care in a field where they previously didn't have access."



Reid

J. Scott VanEpps (Bioengineering PhD '07, MD '09) is an assistant professor of emergency medicine at the University of Michigan, with additional appointments in biomedical engineering and macromolecular science and engineering. He practices in Michigan Medicine's



VanEpps

Emergency Medicine and Critical Care Center—a “one-of-a-kind-in-the-nation intensive care unit . . . in the emergency department,” says VanEpps. He also researches novel technologies for preventing and treating medical device infections. For this interdisciplinary research, VanEpps was named a Taubman Emerging Scholar in August. He says he's excited to “hang out” with these other scholars to find solutions to big problems.



Prince

José Prince (General Surgery Resident '08, Pediatric Surgery Fellow '10) is an associate professor of surgery and pediatrics at the Zucker School of Medicine at Hofstra/Northwell, where he also serves as director of the Laboratory of Pediatric

Injury and Inflammation and vice chair of surgery. In 2018, Prince was elected chair of the New York City Regional Trauma Advisory Committee, which oversees 20 NYC trauma centers. He attributes his career to his grandfather Manuel Beyra, a pediatrician in Cuba. “I didn't grow up around him because my parents left in exile,” says Prince. “But their stories about him influenced my decision to become a doctor and to take care of children.”

'10s **Juleen Rodakowski** (Clinical Research MS '14) is an assistant professor of occupational therapy at Pitt's School of Health and Rehabilitation Sciences; she also holds a secondary appointment in



Rodakowski

Pitt Med's Clinical and Translational Science Institute. Her research into quality-of-life enhancements for elder adults with minor cognitive decline was recognized recently with a \$3 million grant from the National Institute on Aging. “We have a growing issue here,” says Rodakowski about elder care and rehabilitation. “Our current strategy is watching and waiting—we could be

more proactive.” She's investigating early stage intervention strategies to empower seniors to increase their physical autonomy and agency. —*Rachel Mennies*

MODJOROS

CONSULT ON ADULT SITUATIONS

One evening, a man undressed his wife at the dinner table, while their meal was still warm. Skipping dinner and heading straight for intimacy was not their usual M.O. The husband—taking dopamine-enhancing drugs to treat Parkinson's disease—had become newly hypersexual, and his changed appetite coupled with a Parkinson's-characteristic decline in executive function had led the couple to this uncharted moment, says Melanie Modjoros (MD '05). “When you receive a new diagnosis,” she says, “doctors give you medicine, but there's not enough talk about how that's going to impact your sex life.”

An internist and certified sex counselor, Modjoros runs her Sexual Health Consultants clinic in the DC metro area, addressing the intersection of medical problems with sexuality and sexual experience. “Every patient has a sexual problem related to medicine—whether it's mental health, nausea, prescription side effects,” she says. For her Parkinson's patient and spouse, resolving issues like the dinner incident meant “setting rules and a schedule,” where both partners could feel comfortable and heard. They worked together over seven sessions, she says, “to figure out their new normal sex life.”

Modjoros's path to sex therapy began in residency, when a chronic back injury had her shift her focus from an ob/gyn residency into internal medicine with a women's health focus. After training, Modjoros worked as an office-based gynecologist, where “women would come in with pain or sex difficulty,” she says. Seeking solutions led her to sex medicine and, eventually, sex therapy. “I'm often teaching people what they never learned—sex positivity,” Modjoros says. “Sexuality is a part of [my patients'] health, theirs to own and enjoy.”

Modjoros is regularly interviewed for podcasts and gives grand rounds about the sexuality-illness intersection. She recommends sex therapy as a referral option for doctors who aren't able to fold much sex talk into their practice. “Your patients will have medical-related sexual dysfunctions that they will not tell you about—unless you ask,” she notes.

Getting, and staying, in touch with one's sexual self is far from simple, she recognizes. “If sex were so easy,” she jokes, “I wouldn't have a job!” —*RM*



PHOTO BY HASSAN MALIK. PHOTO ILLUSTRATION: ELENA CERRI

Sexuality is part of our health, says Modjoros.

FREDERICK W. CROCK

FEB. 7, 1952–AUG. 16, 2019

Frederick Crock (Res '84), who was an echocardiologist and clinical assistant professor at the University of Pittsburgh, is remembered by his colleague Jenifer Lee as “Superman.” Lee, professor of medicine and director of medical student education in the Division of Cardiology, says: “The bottom line is, Fred was perfect.”

Crock, who died in August, taught second-year courses about individual organs. Students at all levels “really adored him,” Lee says.

She quoted a 2018 course evaluation that notes his “virtuosic mastery of his field and an infectious enthusiasm for both teaching and the subject matter.”

Cardiology trainees voted Crock outstanding teacher in 2005, 2010, and 2018; medical students chose him for that honor in 2010 and 2011; and medical residents did the same in 2012. The school’s Alpha Omega Alpha Society awarded Crock its Charles Watson Teaching Award this year.

He also was part of a research team that Lee called instrumental in introducing percutaneous catheter-based treatments for valvular heart disease at UPMC Presbyterian. It’s a substitute for traditional open-heart surgery, and “really in the vanguard to what we are doing nowadays,” she says. The pair worked together as noninvasive imaging cardiologists at UPMC, and she remembers him being last in the office, helping to close up. “He was one of those guys who really loved what he did.”

Crock was a fellow of the American College of Cardiology and the American Society of Echocardiography. He received his bachelor’s degree from Pitt and MD from Temple University. He trained in internal medicine at Mercy Hospital and was chosen as a chief resident. He then completed a cardiovascular fellowship under Pitt’s James Shaver before joining the teaching faculty at Mercy in 1984, when he also was appointed clinical assistant professor of medicine at Pitt. In 2004, he joined UPMC’s Cardiovascular Institute.

—Marty Levine

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Crock

JOHN ROBERT DILLE

SEPT. 2, 1931–MAY 5, 2019

Graduating from Pitt Med, John Robert “Bob” Dille (MD '56) knew he’d be drafted into the Korean War. Certain he couldn’t handle the physical demands of the Marine Corps, Dille went to an advisor, who suggested the U.S. Air Force (USAF).

Thus began a lifelong passion for Dille, who went on to become an authority on aerospace medicine. As a captain and flight surgeon at Loring Air Force Base in Maine, Dille signed up for hazard pay, accompanying flight crews on test runs.

“Most of the other doctors were stuck on the base,” says Dille’s son, Paul. “Those milk runs gave my dad a great firsthand look at what the air crew was going through.”

Dille ultimately logged more than 250 hours in the air, kindling a passionate interest in the physical tolls of flight and ways to make flying safer. After completing studies at the USAF School of Aviation Medicine in 1957, Dille went to Harvard University to earn a master’s degree in industrial health.

Dille continued to focus on these subjects as a civilian, serving as chief of the Federal Aviation Administration’s Civil Aerospace Medical Institute in Oklahoma City from 1966 until his retirement in 1987.

A historian and writer, Dille published more than 200 research articles. He also traveled the world lecturing on pilot and aircraft safety. “He got sent to five continents, and he picked up the other two on his own,” Paul Dille says.

After retirement, Dille served as medical director for Oklahoma’s department of corrections, traveling the state treating inmates. It was a fitting conclusion to Dille’s career. Growing up in Waynesburg, Pa., during the Great Depression, he’d dreamed of working as a general physician.

“He was finally practicing medicine like he thought he would,” says Paul Dille. “That’s what he envisioned growing up, and he finally got to do it.” —Adam Regier



Dille

ROBERT KISILEVSKY

DEC. 19, 1937–JUNE 5, 2019

In retirement, Robert “Bob” Kisilevsky (Biochemistry PhD '69, Res '69) biked 45 minutes each day to a local senior center where he spent hours pursuing a newfound passion for wood carving. Steadily improving his craft over time, Kisilevsky produced ornate pieces he gave to family members, walking sticks to help him cope with arthritis, and an intricate chess set for pursuing another serious hobby.

Kisilevsky’s focus in these avocations would come as no surprise to colleagues. During a distinguished career as a researcher, Kisilevsky made foundational contributions to understanding the abnormal protein amyloid and the rare disease it causes, amyloidosis. He published more than 300 papers, abstracts, and book chapters on amyloid and on topics ranging from protein synthesis and cholesterol metabolism to malaria.

“In research you have to be creative; and when he retired, he turned his focus to another creative project, this time wood carving,” says his wife, Barbara Kisilevsky, professor emerita at Queen’s University in Kingston, Ontario, where Kisilevsky was professor emeritus of pathology and biochemistry.

Kisilevsky’s specialty was basic research, investigating the mechanisms and central functions of a disease, rather than working on diagnostic aids or translating prior findings into medical treatments.

“He was extraordinarily successful at coming up with plausible ideas of why people get a disease, and then what you might do about it,” recalls Paul Manley, a longtime colleague. “Once you knew that, then you had the possibility of intervening.”

A fellow of the Royal Society of Canada, Kisilevsky also founded two biotechnology companies aimed at addressing amyloidosis and atherosclerosis. As a department chair at Queen’s, Kisilevsky was instrumental in establishing a doctoral program in research.

“He was open to a variety of ideas, and he wasn’t afraid of challenging authority when appropriate,” Manley says. “He was quite wonderful.” —AR



Kisilevsky

HE TOOK ON THE ESTABLISHMENT BERNARD FISHER: AUG. 23, 1918–OCT. 16, 2019

BY CARA MASSET AND JOE MIKSCH

Surgeons began performing radical mastectomies in the 1800s. Though the practice involved disfiguring removal of the breasts and nearby tissue, dogma held that this was the best approach for breast cancer patients. Less-invasive treatments were considered malpractice in some circles; both hubris and a lack of evidence for other treatment options played into that mindset.

A century later, surgeon-scientist Bernard Fisher challenged that dogma by conducting laboratory research on breast cancer biology and then pioneering large-scale, multi-institutional randomized clinical trials. Fisher, Distinguished Service Professor at the University of Pittsburgh who established a scientific approach to the study of breast cancer and shaped the landscape of cancer research more broadly, died Oct. 16 at the age of 101.

“Bernard Fisher was a titan. His research improved and extended the lives of untold numbers of women who suffered the scourge of breast cancer. His work overturned the dominant paradigm of cancer progression and, to the benefit of all, demonstrated the systemic nature of metastasis,” says Arthur S. Levine, the John and Gertrude Petersen Dean at Pitt Med and senior vice chancellor

for the health sciences.

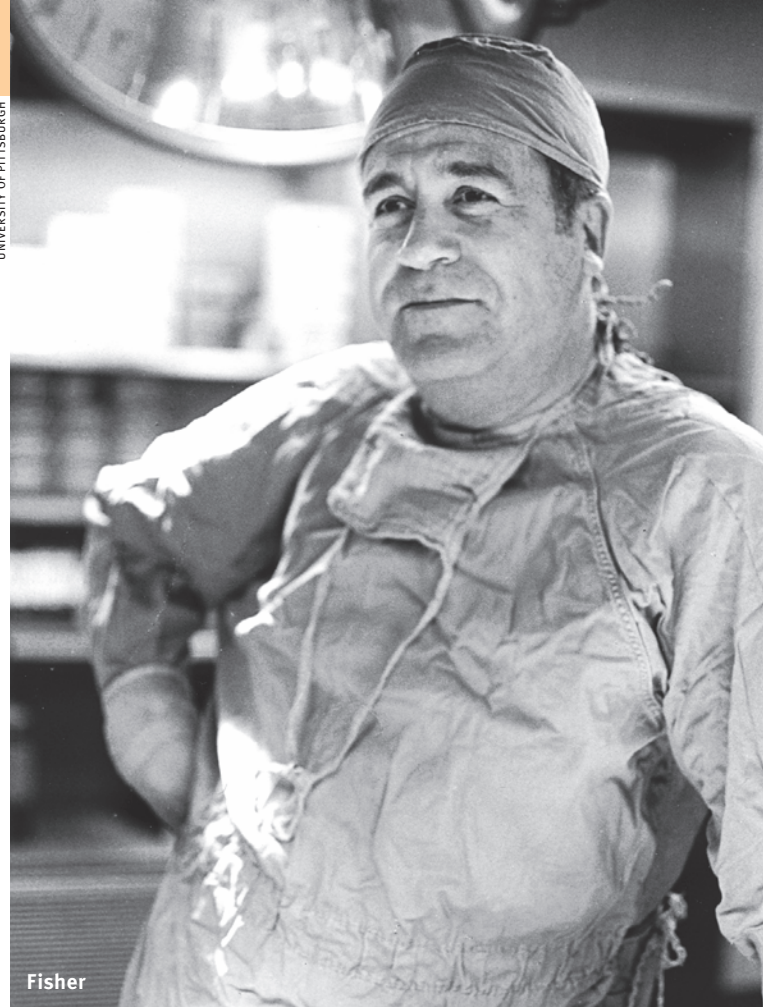
Born and raised in Pittsburgh, Fisher earned both his bachelor’s (’40) and MD (’43) from Pitt. Following his training as a surgeon, he joined Pitt’s Department of Surgery and established the University’s first Laboratory of Surgical Research.

“No clinical therapy should be determined by emotion or conviction—the determinant must be the scientific method,” Fisher said in 2009.

In 1958, Fisher attended an NIH meeting where he became a founding member and later chair (1967–1994) of the National Surgical Adjuvant Breast and Bowel Project (NSABP), a multi-institutional group that continues to conduct clinical trials on breast and colon cancers today. Fisher’s landmark clinical trials with the NSABP in the 1960s and ’70s provided a scientific basis for using less-extensive surgical treatments to effectively treat breast cancer.

“As a surgeon he was trying to reduce surgery—he always put the patient and the data first,” says Robert Ferris, director of the UPMC

UNIVERSITY OF PITTSBURGH



Fisher

Hillman Cancer Center.

“He delivered us from the age of tyranny when a single individual could dictate the therapy of a particular disease based on his own biased retrospective experience. All of oncology owes an enormous debt of gratitude,” says Norman Wolmark, director of the National Cancer Institute cooperative group on clinical trials, NSABP Foundation chair, and Pitt professor of surgery.

In the 1990s, Fisher demonstrated that the drug tamoxifen can prevent breast cancer in high-risk patients. That was the capstone of his career, he told *Pitt Med* in 2002. “Certainly, in 1958, when I began this journey, the idea of using an agent to try to prevent breast cancer was . . . science fiction,” he said.

Fisher received the Albert Lasker Award for Clinical Medical Research and the American Association for Cancer Research Award for Lifetime Achievement in Cancer Research. He served on the President’s Cancer Panel and the National Cancer Advisory Board.

“Bernard Fisher was one of the great medical pioneers of our time,” says Pitt Chancellor Patrick Gallagher.

Jeffrey A. Romoff, UPMC president and CEO, notes, “His advances are among the most important contributions ever made to women’s health.”

“The field of oncology has lost its noblest protagonist,” says Wolmark. ■

IN MEMORIAM

’40s

ROBERT L. BAKER
MD ’48
OCT. 13, 2019

ROBERT CHAMOVITZ
RES ’49, ’52
AUG. 12, 2019

’50s

THOMAS F. NEWCOMB
MD ’51
SEPT. 23, 2019

HAROLD R. HELLSTROM
MD ’52
OCT. 19, 2019

FRANK X. PAWLOSKY
MD ’53
AUG. 21, 2019

MARIO C. BATTIGELLI
FEL ’58
SEPT. 27, 2019

JOHN L. AMMER
MD ’59
AUG. 17, 2019

’60s

JOEL H. MERENSTEIN
MD ’60
SEPT. 27, 2019

HARVEY WEINTRAUB
RES ’64
OCT. 14, 2019

RONALD L. VINCENT
RES ’67, ’71
OCT. 3, 2019

ROBERT G. BRODOWS
MD ’68
SEPT. 29, 2019

’70s

JOHN DARYL KRISTOFIC
MD ’70
SEPT. 26, 2019

GARRET M. IHLER
MD ’76
AUG. 30, 2019

’80s

RICHARD L. LINDSEY JR.
RES ’80, FEL ’80
AUG. 8, 2019

LAWRENCE E. HERTZBERG
MD ’81
AUG. 26, 2019

FACULTY

MICHAEL J. PAINTER
RES ’66, ’68
OCT. 17, 2019

JAN D. SMITH
FEL ’67, ’69, RES ’71
SEPT. 6, 2019

R. MARK WEBB
RES ’81, ’84, ’85,
FEL ’85
SEPT. 18, 2019