

CLASS NOTES

Nocturia, or frequent waking at night to void the bladder, is extremely common, can be very disruptive to sleep, and, in the case of older patients, is a likely cause of many falls and fractures. Jeffrey Weiss (MD '78), who authored the first textbook on the subject, devised a now widely used classification scheme for this often-multifactorial condition to help physicians tailor treatments more effectively. Most recently, he's studied the nexus between nocturia and hypertension, finding that when blood pressure does not dip as it should during sleep, it's considered "a malignant form of hypertension," he says, and is associated with nocturia as the kidneys secrete extra sodium into the urine. "We are looking at sodium-restricted diets as treatment for both non-dipping hypertension and nocturia, as well as the use of certain diuretics to treat both problems." Weiss, who's chaired urology at SUNY Downstate College of Medicine since 2010, just stepped down from that position and is now pursuing a PhD from Ghent University in Belgium.

905 William Gregory Feero (PhD '96, MD '98) is the research director of the Maine-Dartmouth family medicine residency

program and associate professor of community and family medicine at the Geisel School of Medicine at Dartmouth College. He developed a program that identifies patients at high risk for common hereditary syndromes associated with cancers and provides them with precision care using a genetics-based risk assessment. Since starting in 2015, the program has tripled the number of referrals for cancer genetics services from clinics. Though precision medicine has yet to enter mainstream health care, Feero believes "it is absolutely inevitable we will move closer to using this approach to care for patients."

Working with economists and outcomes researchers, Jodi Beth Segal (MD '94), Johns Hopkins professor of medicine and associate director of the Center for Health Services and Outcomes Research, recently developed a new tool to measure the overuse of health-care resources like cancer screening or emergency department imaging. Segal hopes that the Overuse Index will reveal drivers of overuse and, ultimately, suggest appropriate points for intervention. Codirector of the Center for Drug Safety and Effectiveness at Hopkins, Segal leads a new program for predoctoral and post-

doctoral trainees studying pharmacoepidemiology. When asked about the most important outcome of the program, Segal responds like a true teacher: "Helping our students to have impact."



Segal

Clifford Eskey (MD '93) is the director of neuroradiology and the vice chair for radiology research at Dartmouth-Hitchcock Medical Center in Lebanon, New Hampshire. Eskey's practice primarily focuses on interventional neuroradiology, treating aneurysm and stroke patients (among others) with image-guided surgery. "Saving someone from major disability by restoring flow to a blocked cerebral artery is one of the most gratifying things that I get to do," he says. He's also been trying out new hobbies: "I'm gradually gaining expertise as an amateur pinball repairman," he says.

Timothy Witham (Neurological Surgery Resident '01) is professor of neurosurgery and orthopaedic surgery at Johns Hopkins University and the associate program director for its neurosurgery residency. He also directs the spinal medicine program at Johns Hopkins Bayview Medical Center. Witham's current research interests focus on improving spinal fusion outcomes by developing new methods using tissue engineering—research that allows him to work alongside biomechanical engineers. He's also interested in work-life balance as it applies to neurosurgeons. He will serve as the scientific program director for the Lumbar Spine Research Society's annual meeting in April.

William Dale (Internal Medicine Resident '02, Geriatric Medicine Fellow '03) is a geriatrician and palliative medicine physician who joined the City of Hope National Medical Center, Los Angeles, in 2017. He serves as the Arthur M. Coppola Family Chair of the Department of Supportive Care Medicine. Previously, at the University of Chicago (where he earned his MD as well as a PhD in health policy), Dale founded the Specialized Oncology Care & Research in the Elderly (SOCARE) Clinic, which he recently expanded to City of Hope. And his devotion to medicine reaches beyond the hospital: He and his wife are coproducers of The Elephant in the Room, a forthcoming film about a palliative care team working with terminally ill patients.

Michael Boland (MD '01) is an associate professor of ophthalmology at the Johns Hopkins Wilmer Eye Institute, where he was appointed residency program director in 2016. "It has been a distinct privilege," he says, "to be responsible for a program that trains the future leaders of our field." Boland is also the institute's information technology director, overseeing a



From left: Mario Ferretti, Rory Cooper, Rosemarie Cooper, and Eliana Ferretti.

system that hundreds of department faculty and staff use to track 250,000-plus patient visits annually. In a related role, he serves on the American Academy of Ophthalmology's Medical Information Technology Committee, where he has been able to help navigate the transition to electronic health records.

Some Einsteins of the rehabilitation world hung out at the Albert Einstein Hospital in São Paulo, Brazil, last fall. Pitt's Rory Cooper, whose titles include director of the Human Engineering Research Laboratories, was a keynote speaker at the Sixth International Brazilian Paralympic Conference. He and Rosemarie Cooper, Pitt assistant professor of rehabilitation science and technology, reunited with Pitt alumni Mario Ferretti (Sports Medicine Fellow '05), chair and professor of orthopedic surgery at Albert Einstein Hospital, and Eliana Ferretti, professor of occupational therapy at the Federal University of São Paulo, who earned her MS and PhD degrees in rehabilitation science under Rory Cooper's tutelage.

In October 2017, Kirsten Lin (MD '06) founded Family Matters Direct Primary Care, Pittsburgh's first direct primary care practice—meaning, among other things, patients typically pay physicians directly. "After some soul-searching and logistical preparation," says Lin, Family Matters was born—and alongside it, Direct Care Physicians of Pittsburgh, an organization that links prospective patients to such physicians in the area. Her new role grants Lin the opportunity to build closer relationships with her patients than modern primary care settings typically allow. She charges patients a flat monthly fee, ranging from \$38 to \$68, that allows her to bypass insurance

and grants patients access to her by phone and e-mail in addition to in-person visits, seven days a week.

Patricio Polanco (Surgery Resident '12, Surgical Oncology Fellow '14) is an assistant professor in the Division of Surgical Oncology at UT Southwestern Medical Center focusing on gastrointestinal cancers. Over the last five years Polanco's research team has published several peerreviewed papers supporting the use of perioperative chemo-radiation treatments in patients with pancreatic, stomach, and rectal cancers. Many of these treatments have been shown to improve the chances of survival in patients with these tumors. Polanco travels to his home country of Peru once a year with the Peruvian American Medical Society on its annual medical mission to the city of Ayacucho, where he provides surgery to lowincome Peruvian patients and surgical training to local surgeons.

Cara Masset, Rachel Mennies, Jon Kunitsky, Kelsey Sadlek, and Elaine Vitone

BITTER BLOCKER

PEIHUA JIANG

ary Poppins knows how to sweeten a raw deal. "Just a spoonful of sugar," she trills as she spins across the stage.

Molecular neurobiologist Peihua Jiang (Neurobiology PhD '01, Neurology Fellow '02) intends to best that umbrella-twirling nanny. Since 2016, Jiang has studied the perception of bitter flavors, intent on short-circuiting the sensation. "There are a lot of very effective drugs, but because of the awful taste, children will refuse to take those pills," he says. "If we can eliminate or reduce the bitter taste from pharmaceutical active ingredients—anti-malaria and anti-HIV drugs, for example—we may be able to help pediatric populations to take their life-saving pills more rapidly."

Now an associate member of the Monell Chemical Senses Center in Philadelphia, Jiang got his start in gustation—the study of taste—as a postdoc at Mount Sinai, working in the lab of Robert Margolskee. He was drawn toward the field because taste is the sense least studied. So far, he has untangled the structure and function of taste receptor proteins and genes. And he discovered the identity and function of certain adult taste stem cells; an ongoing five-year, \$1 million NIH-funded grant supports that work.

Jiang has also tackled the causal relationships among taste receptor structure, dietary choice, and metabolism. Modern humans may

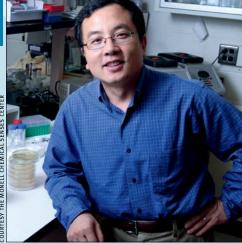
have been spared the imperative to experiment with novel—and potentially toxic—fare, but other species aren't so lucky. In a 2018 paper in *Molecular Ecology* on the array of bitter taste receptors found among Myotis bats, which live on every continent except Antarctica, he notes the hazard of overconsuming potentially toxic insects.

The giant panda's sweet tooth was the subject of a 2014 report in

PLOS ONE. "We tried to compare the panda receptor to the human receptor," he explains. "If we understand [the human sweet tooth], perhaps we can develop a way to reduce sugar intake."

More recently, Jiang has looked beyond the tongue, to chemosensors in the throat, sinuses, and even the gut, where they seem to detect parasitic infections and mediate inflammatory disorders. "If we identify these extra-oral receptors," he says, "we could target them to improve treatment of those diseases."

-Sharon Tregaskis



Jiang

SHELDON ADLER

JULY 13, 1934-NOV. 15, 2018

n the first day of class, a

roomful of Pitt medical students waited for their professor, a renowned kidney expert, to start lecturing. Instead, the expert, physician Sheldon Adler, handed out a case study involving a patient suffering from an allergic reaction following a kidney transplant. Their tasks? In small groups, determine learning objectives, consult medical librarians, share research, and collaborate to make a diagnosis and design treatments. He'd provide some guidance, but mostly it was up to them.

Adler was embracing a new trend in medical education in the 1980s called problem-based learning, which focused on self-directed Connamacher learning, critical thinking, and teamwork—not the typical rote memorization and competition for grades that med students expected.

"Students were no longer passively fed information, and they could understand material better," says Charles Reynolds III, geriatric psychiatrist and Pitt professor emeritus who worked with Adler to champion the pedagogy. Adler, then senior associate dean, spearheaded full implementation of the curriculum by 1992. Well liked among the professors, he still met resistance to change—from faculty and students. He responded with grace and humor; he would crack jokes about needing a hearse to haul away outdated ideas.

"We experienced a profound culture change thanks to Shelly's efforts," says Reynolds.

Adler also knew when to take a break from the tension for a stroll in the park, where he could name all the birds and trees.

Adler died in November, but his legacy continues. Since 2002, the Sheldon Adler Award for Innovation in Medical Education has recognized other teaching pioneers at Pitt Med. -Liberty Ferda

ROBERT CONNAMACHER

DEC. 20, 1933-NOV. 28, 2018

prof would stitch a cut on a frog's belly to demonstrate suturing techniques for a group of local high school students. Next, he would pass the needle to one of them, saying, Imagine you're a surgeon. This is your patient.

This was a typical moment in Robert Connamacher's time at Pitt from 1967 until his retirement in 2016. The PhD associate professor of family medicine wanted these teens-mostly African Americans—to see themselves as poten-

> tial doctors. There weren't many health professionals who looked like them, and he was dedicated to changing that. He ran the after-school Medical Explorers program (now Health Professions Prep), in which high schoolers took mini science courses and attended lectures by faculty of various ethnic backgrounds.

Connamacher supported a similar program for college graduates, the Summer Pre-medical Academic Enrichment Program (SPAEP).

"I had some doubts in college, but his encouragement solidified for me that I was on the right path," says Yunuen Valenzuela (MD '02), who attended SPAEP in 1995, landed admission to Pitt Med, and now practices in Florida, where fluent Spanish speakers like Valenzuela are invaluable.

Also active with the Student National Medical Association (SNMA), Connamacher showed support for that group by attending conferences all over the country—but only by train. He hated to fly, and sometimes uncertain rail schedules had him arriving a week early. He was eventually inducted into the national organization's Hall of Heroes.

J. Nadine Gracia (MD '02), a firstgeneration Haitian American and SNMA national president emeritus, met him when she was a first-year Pitt Med student and an officer in the med school's chapter of SNMA. Together they mentored Pitt undergrads through the Pre-Medical Organization for Minority Students. She fondly remembers walking across campus for meetings as he inquired about her studies and her life.

"You knew he was invested in your success," recalls Gracia, who later became deputy assistant secretary for minority health during the Obama administration. "He cared for students and considered them part of his extended family." —LF

HENRY MANKIN

OCT. 9, 1928-DEC. 22, 2018

hether instructing a classroom of fidgety elementary schoolers or Harvard medical students, Henry Mankin (MD '53) taught bone physiology the same way—assigning each cell type a theme from Sergei Prokofiev's Peter and the Wolf. "Every time you see this cell, you sing it this way," his son Keith Mankin (MD '88) remembers his father saying. Before long, the room would be in chorus.

Mankin, who died in December at age 90, was a world-renowned orthopaedic surgeon and chair of orthopaedic surgery at Massachusetts General Hospital and Harvard Medical School.

Kurt Weiss (Res '08) recalls being treated by Mankin for osteosarcoma as a kid. "When you were in the room with him as his patient, you were his whole universe," Weiss says. After Weiss pursued orthopaedics himself, he learned of his doctor and mentor's significant contributions to the field. "I remember thinking, Holy mackerel. This guy is brilliant."

Those contributions included research on Gaucher disease and spinal disorders, as well as the active, dynamic nature of cartilage. Mankin also cofounded the Musculoskeletal Tumor Society and was a champion for women and underrepresented groups in medicine, winning the 2004 Diversity Award from the American Academy of Orthopaedic Surgeons.

Freddie Fu (MD '77) remembers his friend and mentor Mankin, who grew up in Squirrel Hill, as "really a true, blue-collar, down-to-earth, funny Pittsburgh person" who loved to teach.

'You teach someone, they continue to teach what you say, and you never disappear," Keith Mankin recalls his father saying. "You live forever."

—Prachi Patel

MEMORIAM

'40s RALPH F. WALDO MD '48 OCT. 31, 2018

'50s DONALD G. BIRRELL RES '51, RES '55 DEC. 6, 2018

GILBERT L. ASHOR MD '54 FEB. 6, 2018

DAVID A. VERMEIRE MD '54 OCT. 18, 2018

DONALD R. KOEHLER MD '55 DEC. 29, 2018

CHARLES A. COLTMAN JR. MD '56 NOV. 28, 2018

WILLIAM T. FOLLETTE **RES** '56 JAN. 31, 2018

JOHN W. LOFTIS MD '56 NOV. 12, 2018

HERBERT F. CRONIN MD '57

AUG. 17, 2018 HAROLD GLICK MD '57 JAN. 9, 2018

F. GENE BRAUN MD '58 OCT. 28, 2018

BRET RUDY: A HIGHER BAR

BY SHARON TREGASKIS

n the early 1990s, many pediatricians figured kids whose symptoms pointed to HIV lacked the emotional maturity and resilience to cope with a fatal diagnosis—so they opted not to even test for the disease.

Bret Rudy (MD '85) thought otherwise. As a fellow in pediatrics at the University of Pennsylvania, he launched a dedicated clinic at Children's Hospital of Philadelphia (CHOP).

NORMAN N. KRESH MD '58, RES '59, RES '63 OCT. 27, 2018

'60sCHESTER M. BERSCHLING
RES '60, '62, '64
DEC. 29, 2018

GERALD I. KAUFER MD '63 OCT. 22, 2018

JOHN WHITAKER EWING MD '64 NOV. 27, 2018

*70s GILMORE M. SANES JR. MD '70 OCT. 13, 2018

KENNETH M. STANKO MD '77, FEL '83 OCT. 25, 2018

'80sDIANNA L. BOURKE
PHD '85
OCT. 28, 2018

EDWARD E. LONGABAUGH MD '89 OCT. 12, 2018

FACULTY ANTHONY M. HARRISON RES '65 JAN. 28, 2019 "Being quite frank, there was a juxtaposition of the kids who were infected through transfusions and perinatal exposure and an emerging group of teens who acquired HIV through sexual transmission," says Rudy, now a professor of pediatrics at New York University. "There were still people talking about 'innocent' and 'noninnocent' victims."

Funding was nonexistent, so Rudy recruited volunteers—including social workers, nurses, psychologists, and fellow physicians—to stay after hours to staff the clinic a few evenings each week. Rudy was intent on providing comprehensive care in a setting where every kid felt safe and dignified—includ-

ing those counting on survival sex to secure such necessities as food or housing and those whose outlook had been profoundly altered by their experiences as survivors of violent crime. "Our job was to find resources so that we could help them break down the social barriers that would prevent them from taking care of their health and looking forward to their future," says Rudy. "We never gave up on anyone, no matter how bad the situation."

Rudy later joined the Centers for AIDS Research, served on the Ryan White Title IV Strategic Planning Committee, and joined the White House Advisory Committee on Adolescents for the Office of National AIDS Policy. As chair of Project ACCESS, he led development of a national social marketing campaign promoting HIV counseling and testing in teens. And, all the while, he ran clinical trials to develop treatment protocols tailored to teens and young adults. Recent papers he's coauthored include a comparative analysis of partner notification programs for youth living with HIV, an overview of the continuum of care available to them, and a report on the biomarkers that distinguish effective viral suppression among young people.

Now executive hospital director and senior vice president for NYU Langone Hospital—Brooklyn, Rudy credits his early experiences launching CHOP's Adolescent HIV Initiative, which is celebrating its 25th year, with propel-

ling him into other leadership roles. "You start to see the bigger picture to impact more lives and give other people opportunity."

Since 2016, Rudy has overseen a transformation of operations at NYU's Brooklyn outpost, intent on matching quality of care in the borough with what patients receive from NYU's flagship medical center in Manhattan. "By 2020, Brooklyn will be the third largest city in the country," he says, "about the same size as Houston." Already, the hospital has added ambulatory pediatric and surgical oncology services as well as trauma and stroke centers; it has also implemented an electronic health records system that unites the hospital with the Family Health Centers at NYU Langone's 35 school-based clinics and affiliated homeless health-care centers. "It's amazing to see some of the young physicians and nurses who are really committed to what we're doing in Brooklyn," says Rudy, "who really love the diversity of patients we serve, who bring so much energy and creativity to their jobs.

Rudy traces his own leadership style to the example set by the late, beloved Pitt professor Charles Watson. "When he walked ... through a hospital, his whole emphasis was on how you're respectful to the patient, the staff, the aides. That's something I've taken with me: Set the bar high for yourself, so everyone around you sets their bar a little higher."

