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The
Science of
SLEEP

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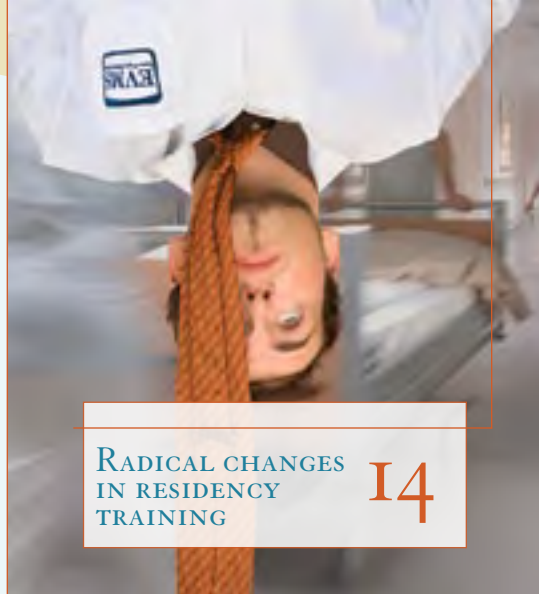
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34 Graduate was on the front lines during H1N1 scare



from the president



As we enter a new academic year, it is evident that change is upon us.

This change is clearly visible with the opening of the new education and research building (*see page 9*). This building represents EVMS' commitment to meet the health-care needs of Hampton Roads. One example of that is in our expanded class size. Over the next few years the new building will provide us the space to increase physician assistant enrollment by 60 percent and MD enrollment by 30 percent.

Other campus additions include the newly opened sleep medicine facility (*see page 28*), offering a full range of diagnostic services and treatment for a wide array of sleep disorders. At EVMS, we are committed to staying on the leading edge of this field.

Changes that might not be as visible focus on graduate medical education, in response to new requirements issued by the Accreditation Council for Graduate Medical Education. Patient safety is at the heart of all the new requirements (*see page 14*).

For some of our students, change has brought them to our door. They were following other career paths when they discovered their passion for medicine or health care (*see page 20*).

Throughout all of these changes, we are still committed to training the next generation of health-care professionals, researching treatments for Hampton Roads' most pressing health needs and providing high-quality patient care.

Harry T. Lester

President

Teaching. Discovering. Caring.™

NEW BOOKSTORE IS CENTERPIECE OF RENOVATED STUDENT SPACE

The rounded glass window front of the Matthews EVMS Bookstore is a welcoming sight at the heart of the new Hampton Roads Community Foundation Student Center in Lewis Hall. But it is the wafting scent of fresh brewed coffee that draws in passersby. After all, this isn't just a place to buy textbooks and school supplies anymore.

Recently re-opened, the EVMS Bookstore is a student Mecca where one can find EVMS merchandise, food and beverages. According to Mark R. Babashanian, vice president for administration and finance, the new bookstore space is not only significantly larger, but is more accessible. It also includes a café that provides food and drinks for students and staff.



Hours of Operation

Monday - Friday 7:30 a.m. to 7 p.m.

Saturday 8 a.m. until noon

"We have also expanded the hours of operation to better match student schedules," Mr. Babashanian explains. "This will allow the bookstore to function more efficiently and will make it more convenient for students."

The relocation of the EVMS Bookstore was part of a major renovation of Lewis Hall intended to make the space more student friendly as the school

prepares for larger classes. The bookstore is now a centerpiece of the renovated space, which provides a large student lounge and recreation area.

"We have much more to offer now in our brand-new space," says Carrie N. Chester, manager of the EVMS Bookstore. "We hope that students will like our new spacious look and find everything they need and more." □

Dr. Abuhamad named president of American Institute of Ultrasound in Medicine

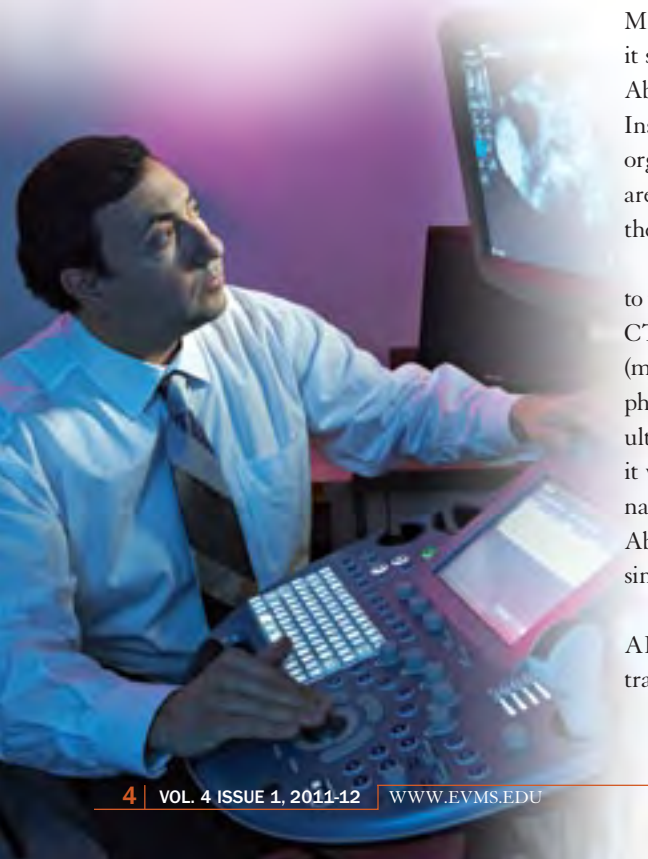
"Ultrasound first!" says Alfred Z. Abuhamad, MD, professor of obstetrics and gynecology. If it sounds like a rallying cry, it is. In April, Dr. Abuhamad was named president of the American Institute of Ultrasound in Medicine (AIUM), an organization of nearly 9,000 members from all areas of medicine who are dedicated to advancing the use of ultrasound.

Dr. Abuhamad would like to move ultrasound to the front line of diagnostic imaging — ahead of CT (computerized tomography) scans and MRIs (magnetic resonance imaging). He notes that if physicians and other medical practitioners used ultrasound ahead of other imaging technologies, it would save a tremendous amount of money nationally. Not only is ultrasound cheaper, Dr. Abuhamad explains, it's also safer than CT scans since it carries no radiation risk.

Dr. Abuhamad also plans to continue an AIUM initiative to develop performance and training guidelines for health-care practitioners

who use ultrasound for specific medical tasks. Ultrasound can be used to guide a variety of procedures from joint injections to fluid aspirations to the placement of IV lines. In October 2010, the AIUM invited representatives from more than 40 medical and nursing organizations to a forum in Orlando, Fla., to discuss these focused applications of ultrasound. Task forces have since begun to develop practice guidelines.

During his 22 years of AIUM membership, Dr. Abuhamad has served as chair of several AIUM committees, including its Ultrasound Practice Accreditation Council. He is planning to expand the lectures, webinars and continuing education opportunities offered through the AIUM website and intends to invite members of other medical specialty associations, such as emergency medicine and urology, to join the AIUM. "Anybody who does ultrasound should consider AIUM their second home," he says. □



EVMS collaborating on research that *targets COPD*

Mortality rates for most common illnesses are falling in the United States with one glaring exception: Chronic Obstructive Pulmonary Disease (COPD).

Eastern Virginia Medical School has joined a three-state effort that utilizes free clinics to better diagnose the lung disorder, targeting low-income populations where disease rates are most prevalent. The project, led by free-clinic associations and the North Carolina COPD Taskforce, also aims to help people quit smoking, the most common cause of COPD. Funding comes through the National Heart, Lung and Blood Institute, part of the National Institutes of Health (NIH).

“Our goal is to decrease the burden of suffering and intervene with treatment as early as possible,” says Christine C. Matson, MD, professor and chair of family and community medicine. “We want to direct limited resources to people with the greatest need, to make the biggest possible difference.”

COPD is a progressive disease that interferes with a person’s ability to breathe. The most common forms are chronic bronchitis and emphysema. More than 12 million Americans have been diagnosed; many more are unaware they have it. The disease is the third leading cause of death in the country, according to the most recent statistics from the Centers for Disease Control and Prevention.

A one-year grant, announced this spring, will provide \$4,000 to each of nine clinics in Virginia, North Carolina and South Carolina. Project participants are finalizing the list of clinics, which will include one in the Hampton Roads area and two others in the state. The campaign also will target surrounding communities and providers, such as primary-care practices, health departments and the local media.

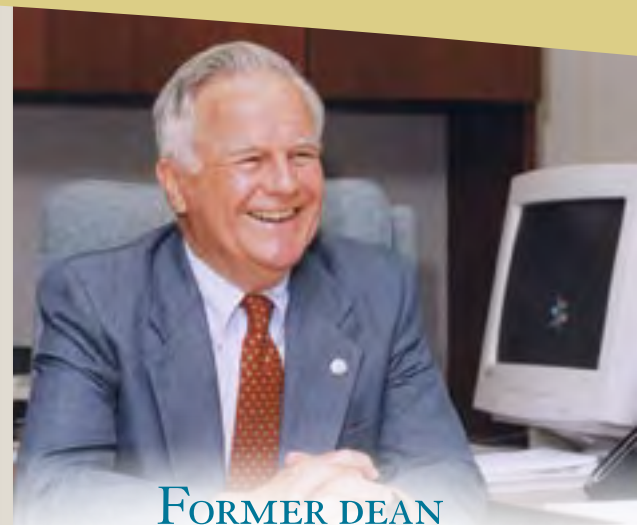
With guidance from partners such as EVMS, clinics will set up processes to test for COPD and perform pulmonary function exams on smokers. Clinics also will receive free educational materials, spirometers and peak-flow meters to measure lung health. Diagnosed patients will receive treatment or referrals; medication, vaccination, pulmonary rehabilitation, oxygen therapy and surgery are among the options.

Meanwhile, clinics will provide smokers with information on statewide toll-free quit lines. Quit Now Virginia (1.800.QUIT.NOW or 1.800.784.8669) is available 24 hours a day and offers self-help materials, counseling support and direction to local resources.

EVMS is an ideal partner because of its “strength in combining traditional health-care and public-health efforts,” says Roy A. Pleasants, PharmD, co-chair of the North Carolina COPD Task Force and a faculty member at the Duke University School of Medicine. “This is exactly what we are trying to accomplish with our project.”

COPD has no cure — only symptom relief — and coughing, wheezing, chest tightness and excess mucus production increase over time. Many patients develop depression and anxiety due to the stress of living with the illness, and their treatment costs can quickly spiral. Mostly due to higher smoking rates in that population, COPD is five times more common in people living in poverty than among those who earn more than \$75,000 a year, according to the NIH.

“If we can get people into treatment and teach them how to monitor their status at home, we could step up therapies as soon as their symptoms worsen,” Dr. Matson says. “If we can get people to quit smoking, we could decrease the progression of the disease — and ideally avoid it altogether.” □



FORMER DEAN AND EARLY FACULTY MEMBER DIES

James E. Etheridge Jr., MD, who had the unique distinction of serving as dean and provost of Eastern Virginia Medical School on two occasions, passed away May 27 following a long illness.

“Dr. Etheridge was a kind and compassionate man who invested much of his personal and professional energy in nurturing this young school and helping it achieve its full potential,” says Dean and Provost Gerald J. Pepe, PhD, who considered Dr. Etheridge a mentor and friend.

A pediatric neurologist, Dr. Etheridge was the medical school’s fourth faculty member. He founded and chaired the Department of Neurology at EVMS and led the division of pediatric neurology at Children’s Hospital of The King’s Daughters.

He was dean and provost first between 1989 and 1993 and then again in an interim capacity between 1999 and 2001.

As dean, Dr. Etheridge helped guide the school’s MD program to its first full seven-year accreditation from the Liaison Committee on Medical Education in 1991.

Dr. Etheridge received a number of honors. EVMS presented him with an honorary degree and the Dean’s Faculty Achievement Award for Institutional Service.

The school’s first Distinguished Professorship honors Dr. Etheridge, and an endowed scholarship honors him and another physician for their decades of service to St. Mary’s Infant Home.

He is survived by his wife of 55 years, Jacqueline Etheridge. □



NASA TAPS *EVMS* researchers TO SAFEGUARD MARS-BOUND ASTRONAUTS

Among the many obstacles to sending astronauts to Mars is determining how best to protect them from the radiation they would encounter on the way.

“When it comes to travel in space, we have a lot of experience with low-earth orbit and moon travel, but not deep space,” says Richard A. Britten, PhD, associate professor of radiation oncology and biophysics.

As a radiation biologist, Dr. Britten has developed clinical applications in his work. Indeed, he is involved in a project to increase the efficacy of the radiation used in cancer treatment. But his talents also have attracted funding from NASA. He received his second grant from the space agency last year to examine the effects of galactic cosmic radiation on brain function.

Space radiation is so different from the radiation that exists on earth that our knowledge of terrestrial radiation cannot be applied to cosmic radiation. Dr. Britten’s research will help fill a gap in NASA’s understanding of how best to send humans to Mars.

Dr. Britten’s EVMS team, which includes O. John Semmes, PhD, professor of microbiology and molecular cell biology; Julius O. Nyalwidhe, PhD, assistant professor of microbiology and molecular cell biology; and Gyorgy Lonart, PhD, associate professor of pathology and anatomy, determined that even small doses of galactic cosmic radiation can interfere with

Even small doses of galactic cosmic radiation can interfere with cognitive tasks that require spatial memory and navigation.

cognitive tasks that require spatial memory and navigation. In experiments, rats that had been exposed to radiation similar to that found in space — radiation that included large, heavily charged (Hze) particles — had difficulty completing a maze they were previously able to master.

“It seems as if they forget,” Dr. Britten says. “Then it seems as if they get confused. They look around in the same place over and over again.”

With the \$777,030 grant from NASA, Dr. Britten’s team hopes to identify precisely how radiation exposure disrupts normal neurocognitive function. One hypothesis had been that cell death caused loss of memory and brain function, but this explanation has been discarded. Instead, it appears that the radiation interferes with the release of neuropeptides, or small molecules composed of amino acids, in the hippocampus region of the brain.

Dr. Britten is working to better understand this interruption to the normal functioning of the brain with a process called proteomics — the study of how proteins are expressed within cells. EVMS is a world leader in this field. Dr. Britten’s goal is to identify which proteins are affected by Hze radiation and how those changes disrupt neural transmission. This, in turn, will lead to a better understanding of the mechanics that underlie memory loss and malfunction. □

Heart disease research focuses on role of the immune system

The immune system and the inflammation it produces protect us. However, if left unchecked, these same guardians can prove harmful.

An EVMS team of researchers led by scientist Elena V. Galkina, PhD, assistant professor of microbiology and molecular cell biology, has received a \$1.7 million grant from the National Institutes of Health (NIH) to study atherosclerosis, a disease where the immune response can be detrimental. Their work may help identify new ways to battle heart disease.

Dr. Galkina and her colleagues know that atherosclerosis, the major pathological process that leads to heart attacks, is linked to an immune response against components of lipoproteins and the arterial wall. Dr. Galkina's research is focusing on how subsets of T lymphocytes, namely T helper 17 (Th17) cells and T regulatory (Treg) cells, impact inflammation in blood vessels during the early stages of the disease.

While Th17 cells may trigger the immune response, Tregs are responsible for reining in the immune system and preventing further damage to the artery.

"When plaque builds in the vessels, the body instigates an immune response, which causes inflammation," explains Dr. Galkina. Unfortunately, this process is not very well controlled by the immune system and results in chronic long-term inflammation that harms the vessel wall.

Dr. Galkina and her team found inconsistencies in the levels of the immune cells in rodents and in tissue samples donated by coronary artery disease patients treated at Sentara Norfolk General's Heart Hospital.

"In atherosclerotic rodents and coronary artery disease patients, we noticed elevated levels of Th17 cells but low levels of Treg cells, so we decided to look at the role of these particular cells in atherosclerosis," says Matthew J. Butcher, a PhD candidate and member of Dr. Galkina's laboratory.

"We know that Tregs are critical to dampening inflammation and we know that this balance gets tipped toward the inflammatory side in atherosclerosis," says Dr. Galkina. "What we need to determine is what mechanism tips

the scale in one direction or another. We also need to see if they reciprocally regulate each other."

"Basically," Dr. Galkina says, "a pro-inflammatory environment is like a brush fire and Tregs are like water. If there are plenty of Tregs in the artery, they would quickly squelch the immune response. However, if there aren't enough Tregs present in the artery, it would be akin to trying to douse an inferno with a squirt gun."

According to the Centers for Disease Control and Prevention, nearly 785,000 Americans had a heart attack last year. In addition, according to the most recent American Heart Association report, 16.3 million Americans currently have coronary heart disease and 7.9 million Americans have had a heart attack in the past.

In addition to better understanding the role of different T cell subsets and their reciprocal regulation in the immune response during atherosclerosis, Dr. Galkina hopes her research will facilitate new approaches toward the prevention and treatment of the disease. □



Scientist Elena Galkina, PhD, is using a \$1.7 million NIH grant to study atherosclerosis. Assisting her are, left, research associate Raaj Talauliker and doctoral student Matthew Butcher.



Paul F. Aravich, PhD, professor of pathology and anatomy, discusses the human brain at Community Care Day.

EVMS gives back at Community Care Day

On Saturday, April 9, brains were on the menu at the Maury High School Cafeteria — as were glaucoma screenings, skin-cancer screenings and letter writing for the troops.

All were part of the annual EVMS Community Care Day conducted by medical and health-professions students and faculty.

Held in the past at the YMCA, this year's change in venue provided space for additional health screenings and activities and for the first time included the master of physician assistant program's Health Fair University, normally held as a separate event.

"This event was not only of great benefit to all

those that volunteered and attended but it was the best example I have seen of EVMS students coming together on one team to serve the community we live in," says Matthew T. Strand, Master of Physician Assistant Class of 2012. "It was an honor to be involved with Community Care Day this year and I hope, in the future, the model we put together this year is continued for the benefit of all."

Maury High School students also participated through poster presentations judged by EVMS faculty and students, introducing the high schoolers to the world of medicine.

"From the humanistic perspective, it allows us as medical students to practice what we came to

medical school for and what we love to do — touch people's lives," says Ryan M. Barnette, a third-year medical student who organized the event. "From the more strategic perspective, it introduces our institution to the people of our community."

Mr. Barnette thinks Community Care Day can help EVMS build a stronger relationship with Norfolk residents. "As we grow here at EVMS, we hope they feel a sense of pride in our presence and a commitment to stand strong with us into the future," he says. □

Visit www.evms.edu/magazine to view photos from the event.

EVMS *residency alum* **APPOINTED CHAIR OF UROLOGY**

When Kurt A. McCammon, MD, was selecting a school for his post-graduate medical training in the early 1990s, one name kept surfacing — Eastern Virginia Medical School. Based on his research, the young doctor opted for EVMS. It was definitely the right choice.

Not only did he complete his internship, residency and a



Kurt A. McCammon, MD

fellowship at EVMS, he stayed on as an instructor and moved up the ranks to eventually become an associate professor. Recently named chair of urology, Dr. McCammon says, "I came to EVMS and stayed because the urology department has always been on the forefront. It is the top reconstructive urology department in the



New lab space on the building's fourth floor will house the Leroy T. Canoles Jr. Cancer Research Center, where scientists will focus on the cancers that take the greatest toll in Hampton Roads.

New building opens doors *for class, research expansions*

The paint is dry and the furniture assembled in the new EVMS education and research building, a transformative addition to the school and the region.

As the first new construction on campus in a decade, the building represents the school's commitment to meet the health-care needs of Hampton Roads and the state. Increased class sizes in the health professions and medical programs will ensure that EVMS is doing its part to offset an expected physician shortage in the coming years.

The building also allows for a strengthened research program, particularly studies related to cancer. The Leroy T. Canoles Jr. Cancer Research Center will occupy the fourth floor and will bring state-of-the-art equipment and techniques to bear on the kinds of cancer that most affect the community, such as prostate, kidney, breast and pancreatic cancer. □

Want to see more? Go to www.evms.edu/magazine for a peek inside the building.

The new building was designed and built to LEED Silver standards for environmental impact and conservation. Details such as the materials used and even the windows are intended to minimize the building's effect on the environment.

country.”

In announcing his appointment as chair, Dean Gerald J. Pepe, PhD, said, “Dr. McCammon brings the leadership skills and expertise to further enhance the goals and mission of the department and its involvement in EVMS’ academic programs.”

Dr. McCammon, who follows Donald F. Lynch Jr., MD, as chair, says he leads with the philosophy that “the best leaders are the ones who lead from behind.” He plans to strengthen

the department and increase the number and the diversity of residents.

“I am most proud of the residents and fellows we train and the relationships we have with them. Many come back to us throughout their medical careers,” he says.

Known internationally among his colleagues for his academic excellence, Dr. McCammon is developing a reconstructive center of excellence in Nairobi in conjunction with the American Urological Association. Additionally,

he is involved in establishing a clinic for the uninsured in Hampton Roads.

The newly appointed chair credits others who have contributed to his success, including Paul F. Schellhammer, MD, professor of urology and his mentor during his residency, and Gerald H. Jordan, MD, professor of urology and his mentor during his fellowship training. Both are former EVMS department chairs. He also recognizes Lynn M. Vass, academic coordinator of urology, as “the glue that holds the department together.” □

Graduating Master of Physician Assistant students celebrate after their White Coat Ceremony, held the night before commencement.

COMMENCEMENT

marks important milestone for the school

EVMS shined the spotlight on its inaugural class and its latest graduates at the 2011 commencement ceremony.

Marcus L. Martin, MD, a member of the school's first MD class, returned to give the commencement address. As Dr. Martin spoke about himself and his 22 classmates, he looked out over a crowd of more than 3,000 gathered to celebrate the achievements of the latest class of 259 graduates. The latest graduating class included more students in health professions programs than the MD program.

As if to emphasize that fact, the school marked the graduation of its 5,000th student, shining a literal spotlight on Micah D. McDonald, a member of the 2011 physician assistant class.

"That's a remarkable achievement for a homegrown medical school that started out on a shoestring budget with an initial class of 24 students," said EVMS President Harry T. Lester as the audience applauded Mr. McDonald and his classmates.



Keynote speaker Marcus L. Martin, MD, graduated in EVMS' first class of medical students. He has since risen through the ranks to become a vice president at the University of Virginia.

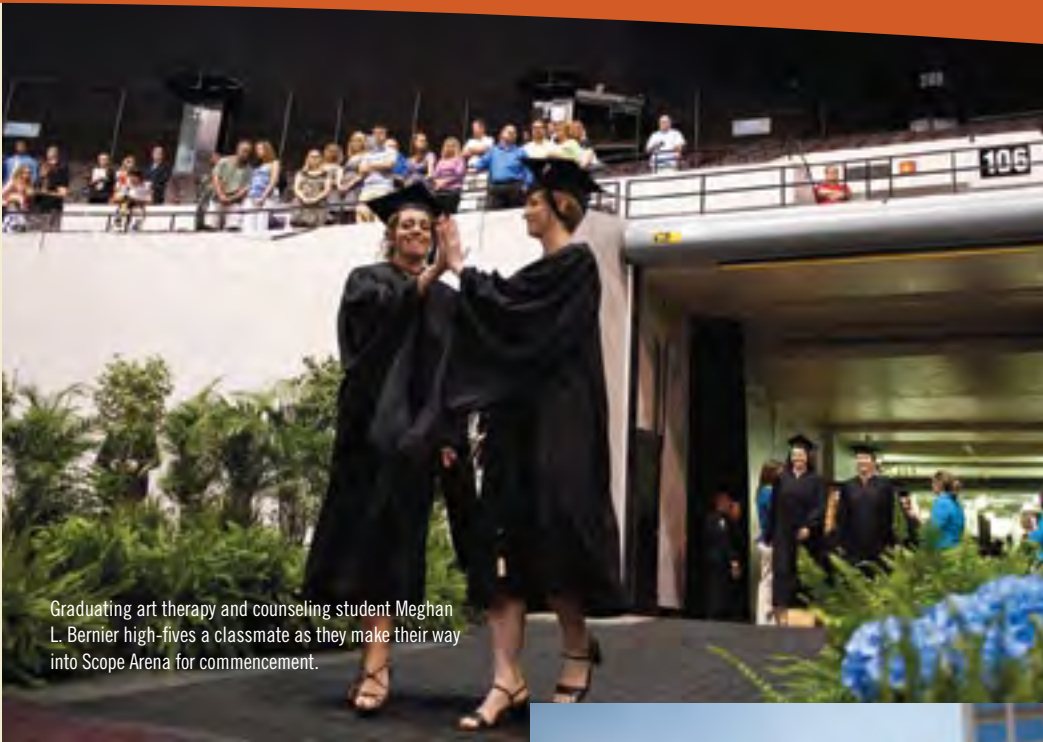
In his address, Dr. Martin, an emergency physician and now chief officer for diversity and equity at the University of Virginia,

advised the graduates "to look beyond to find those things that are not readily obvious."

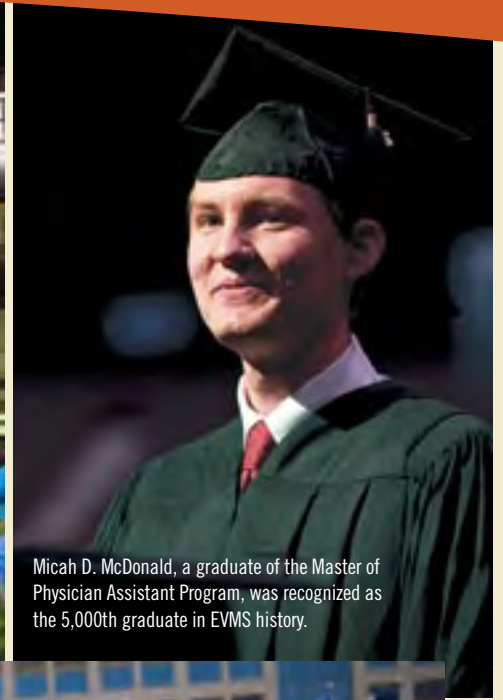
He stressed the importance of not overlooking the important things in life such as commitment to community, mentoring relationships and opportunities to make health care accessible and affordable.

"Success is measured not just in achievements but in lessons learned, lives touched and moments shared along the way," he said. "Temporal symbols of success, although gratifying, pale in comparison with the true achievements of life: the shaping of faith, character and valued relationships with family, friends and colleagues who have invested in us along the way."

Michael Peters sat with a whole row of family to support his wife, Amy E. Erwin, a member of the physician assistant class. "I'm so proud and excited for her," he said. "I know how hard she worked. To have completed it — after studying so much and the time lost



Graduating art therapy and counseling student Meghan L. Bernier high-fives a classmate as they make their way into Scope Arena for commencement.



Micah D. McDonald, a graduate of the Master of Physician Assistant Program, was recognized as the 5,000th graduate in EVMS history.

with family and friends — it’s awesome.”

A sign amidst the sea of proud families and friends was small, but readable from across the other side of the Scope. “MD. Much Deserved,” it said. It was held by the family of Heather M. Soloria.

“I’m really excited,” said Dr. Soloria as she celebrated with family following the ceremony. “It’s been my lifelong dream to be a physician and to have my family here with me is wonderful.”

While many EVMS graduates will continue to live and work in Hampton Roads, others like Dr. Soloria will serve elsewhere. Several days before graduation, Dr. Soloria received her naval commission and would soon be on her way to San Diego.

In his closing remarks, Dr. Martin said, “Today marks the recognition of your success at EVMS. But I tell you the hard road continues. We are all students for life.”

Medical graduate Danae J. Campbell, MD, who will study radiology at Jackson Memorial Hospital in Miami, echoed that sentiment after the ceremony.

“I’m so excited,” Dr. Campbell said. “I’m really going to miss EVMS, but it was a long four years and I’m so glad to be done with school. The learning never ends, it just won’t be in classes.” □



Medical graduate Naima M. Malik celebrated with family after the commencement ceremony.



EVMS graduates destined for service in the armed forces are honored each year at a special ceremony aboard the U.S.S. Wisconsin in downtown Norfolk, during which they are also commissioned as military officers.

Occupational Health opens “Nursing Nook”

There’s a new addition to the occupational health suite inside Andrews Hall — a cheery room with pastel-colored walls, a comfortable glider chair and soothing lighting. This is the “Nursing Nook,” a lactation room where employees who have returned from maternity leave can come to pump and refrigerate milk during the hours they are separated from their babies.

Lisa W. Lee, RN, director of occupational health, oversaw the transformation of a little-used exam room into a cozy space where women can find the privacy and simple necessities needed for pumping. The renovation began

with a paint job. Then, she learned that the Consortium for Infant and Child Health (CINCH) had received grant money to make workplaces more breast-feeding-friendly. CINCH helped Ms. Lee buy a hospital-grade pump for the room. This high-quality pump allows women to pump more milk in less time. Individually owned tubing kits allow for multiple users of the pump.



Megan M. Christopher, director of corporate and foundation relations, was one of the first women to use the room. “It made me feel right at home and positive about the challenging transition from being a mother to a working mother,” she says. “It made me feel like EVMS truly cares about our employees’ well being and that of their families.” □

MEET JANE E. STORER: *EVMS Values Award winner for excellence*



Jane E. Storer has helped thousands of people since she began working at EVMS in March of 2009, and she is not a physician or health professional. Ms. Storer is the receptionist at Andrews Hall. Her friendly, helpful nature puts patients at ease and her smiling face has become a daily fixture for those who work in the building. □

To learn more about Ms. Storer, view her video profile at www.evms.edu/magazine.

EVMS recognizes faculty, staff, students and residents that are living the core values of excellence, collegiality and integrity.

CINCH director receives WHRO Community Impact Award

Amy C. Paulson, instructor of pediatrics and director of the Consortium for Infant and Child Health (CINCH), was honored in May with a WHRO Community Impact Award for her work with the coalition. Mrs. Paulson’s award, given to unsung heroes working at the grassroots level, was in the regionalism category. This category recognizes an individual who shows a commitment to the region through cooperative or collaborative projects.

“It’s what my role is about: to help people discover there’s power in community,” Mrs. Paulson says. The public-health problems that are the focus of CINCH’s work — childhood obesity, asthma and access to health insurance — demand a regional solution. “Kids don’t just stop having health problems at the city line,” she observes.

In its fight against asthma, CINCH has trained nurses in nine local school districts to become nationally certified asthma educators. There are now 20 nurses, seven of whom are nationally certified, who can serve as experts within their own school district.

CINCH also is piloting a program in four cities to support school districts in developing a



CINCH Director Amy Paulson receives her community impact award from Bob Blue of Dominion Virginia Power.

consistent method to measure BMI (body mass index) in schoolchildren. This method will enable school systems to more efficiently and accurately collect BMI. This data will support schools and the community in understanding what actions and programs are most effective to combat obesity, as well as build towards a regional approach to obesity.

WHRO, in partnership with Dominion Virginia Power, awarded each honoree a \$1,000 donation to the charity of his or her choosing. Mrs. Paulson’s choice: CINCH, of course. □

HOPE FOR *breast cancer patients* IN HAMPTON ROADS

to your health

In 2010, more than 207,000 women were diagnosed with invasive breast cancer. Eric C. Feliberti, MD, surgical oncologist with EVMS Health Services, is helping women navigate this disease as the director of the region's first multidisciplinary EVMS Princess Anne Breast Center.

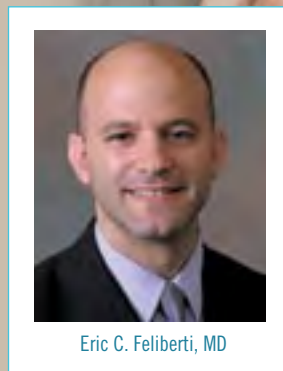
How is breast cancer treated surgically?

Breast cancer is usually treated with one of two operations: a total mastectomy, which removes all the breast tissue, or breast-conservation therapy, which involves removing only the part of the breast with the cancer followed by radiation. Standard breast-cancer surgery leaves a void within the breast.

As the breast heals, several undesirable problems can arise as a result of this void. These include pulling of the nipple, disfiguring the shape of the breast or scarring of the skin causing a caved-in defect. These complications can lead to lower self-esteem and decreased sexuality.

What is oncoplastic breast surgery?

Oncoplastic breast surgery is an innovative technique that improves the cosmetic result of breast cancer surgery. It combines the integrity of a cancer operation with the aesthetic techniques of plastic



Eric C. Feliberti, MD

surgery. The result is a personalized approach that treats the tumor while it preserves or improves the appearance of the breast.

How does this differ from traditional surgery?

Unlike traditional breast cancer surgery, oncoplastic surgery removes the cancer in such a way that the shape of the breast is maintained.

By incorporating techniques used by plastic surgeons, oncoplastic surgery results in a better appearance while treating the cancer. These techniques include lifting the breast and elevating the nipple for a more youthful appearance. Tumors can also be removed while performing a breast reduction. This approach results in a higher likelihood that a woman will choose to preserve her breast and is associated with a better self-image.

What are the benefits of oncoplastic surgery?

Aside from improved appearance, the surgical techniques have a second benefit — wider surgical margins. Breast cancers are best treated by removing a small rim of healthy tissue surrounding the tumor to ensure it has been completely removed. This extra tissue around the tumor is called the margin, and the best chance of a cure is achieved when a one-centimeter margin can be obtained. Borrowing techniques used by plastic surgeons, oncoplastic breast surgery allows the surgeon to take wider margins of normal tissue and then reshape the breast to preserve its appearance.

Oncoplastic breast surgery is becoming the standard for breast cancer surgery. Patients can feel good that their cancer is being treated and feel better with how they look. □

To learn more about EVMS Princess Anne Breast Center, visit www.evms.edu/magazine or call 757.689.8139.

A man in a white lab coat and a patterned tie is hanging upside down from a horizontal bar in a hospital hallway. The hallway is blurred, showing other people in the background. The man's face is looking towards the camera.

Radical changes have turned residency training **up** **side** **down**

In July, EVMS and medical schools across the country implemented substantial changes in residency-training programs to meet new requirements issued by the Accreditation Council for Graduate Medical Education (ACGME).

Linda R. Archer, PhD, EVMS associate dean for graduate medical education, worked with

EVMS program directors, leaders at affiliated hospitals, residents and the financial services department for more than two years to develop the implementation plan and best practices to meet the requirements.

The changes affect scheduling and service models, teaching and supervision, in addition to new standardized procedures for transition of care. The focus of all the requirements is patient safety.

How the ACGME requirements affect resident on-call hours and supervision has received the most attention.

“Training for physicians is moving from mentorship to a traditional educational model,” Dr. Archer says. “The consensus was that residents need a longer transition time from being supervised to being on their own.”

Previously, first-year residents could work a maximum of 24 continuous hours, plus six hours for patient handovers. The maximum work hours now must not exceed 16 continuous hours. The other significant change is that first-

year residents require direct supervision of patient care activities during their initial period of training.

“Essentially, first-year residents are not taking call at all and the senior residents and faculty have picked it up,” Dr. Archer says. “It is a significant transition — turning the existing residency training model upside down. It’s a culture change.”

Within three to five years, ACGME will require medical schools to submit self-studies regarding implementation of best practices and will make site visits to ensure compliance.

Many of the changes have been discussed in patient-safety circles for more than a quarter of a century, spurred by the landmark Libby Zion medical malpractice case.

“It is a significant transition – turning the existing residency model

upside down.
It’s a culture change.”

First-year internal-medicine resident Rouzbeh Shams, MD, consults with a senior resident while on duty at Sentara Norfolk General Hospital.

Residents offer varying react



ions to the changes.



Residents Mala Ashok, MD, left, and Carol R. Dwan, MD, confer at EVMS' Ghent Family Practice in an area designated for resident-physician interaction.

In 1984, Ms. Zion was 18 years old when she died at a New York hospital. Her father, a lawyer and a *New York Times* writer, vigilantly pursued a lawsuit alleging that resident fatigue and improper supervision led to her death. The decade-long case prompted institutional examination of resident call hours and supervision.

Dr. Archer says that the revised requirements also resulted from the evolution of the patient population over the years, requiring first-year residents to care for increasingly critically ill people. Twenty years ago, she explains, patients recovering from minor surgery would recuperate in the hospital. Today, because of changes in the insurance industry, those same patients are discharged on the day of surgery, leaving only the very sick in the hospital.

While older physicians recall living in the hospital 24 hours a day for seven days a week during their training, society takes a different view of such a schedule — particularly in the wake of malpractice cases. Problems in other industries, such as air traffic control, also have revealed the troubling issue of human error resulting from fatigue.

Alertness-management and fatigue-mitigation specialists have addressed those factors, seeking new methods to supplement current suggestions that include “strategic napping” and caffeine consumption to combat exhaustion.

Residents offer varying reactions to the changes.

Fourth-year internal-medicine resident T. Brad Murray, MD, left, and Susan B. Murray, MD, a first-year resident in the combined internal-medicine and family-medicine program, discuss scheduling with second-year resident Christopher M. Mulla, MD, at Sentara Norfolk General Hospital.



“We go into medicine because

“There’s a concern that their education is being shortened and that they will not have the same breadth of experience as their predecessors,” Dr. Archer says. “They worry that they will be required to leave the hospital and miss incredible teaching cases.”

Ursula M. Kelly, MD, a fourth-year chief resident in internal medicine, understands that sentiment.

“Some of my very favorite memories of residency happened in hour 25. I knew that I had made it through the ICU (Intensive Care Unit) by myself and walked out of the hospital with a feeling of confidence. I worry what of that kind of experience they will miss,” she says. “Everyone has been wondering how different programs are going to accommodate the changes and what their lives are going to be like. Everyone has a different opinion. As a whole, people don’t like change.”

Internal medicine resident Anthony F. Fam, MD, has heard similar opinions as he completes his first year — also known as an internship.



Neelofar Wajahat, MD, chief resident at EVMS Ghent Family Medicine, waits to consult with attending physician Sahira A. Humadi, MD.



Attending physician Jennifer E. Burgart, MD, left, consults with second-year resident Mala Ashok, MD, at EVMS Ghent Family Medicine.



Second-year family-medicine resident Trey H. Leaven, MD, discusses patient treatment options with Ghent Family Medicine attending physician Sahira A. Humadi, MD.

e we want to become

doctors and

healers.”

were manageable but did result in senior residents taking on more work to compensate for times when the first-year residents aren't there.

“Physician fatigue is an important issue, but in order to get the training, you need to be [in the hospital],” Dr. Boggs says. Long hours in the hospital are what medical students anticipate, she adds.

“We all sign on for this,” Dr. Boggs says. “We go into medicine because we want to become doctors and healers. We're all striving to be good physicians and whatever that takes, we're going to do it. I've studied really hard, but most of my education is learning by seeing patients, one on one.”

Dr. Archer emphasizes that the bottom line of GME requirement changes is to improve patient safety.

“Patients are not going to see any changes to the high quality of care that they have always received,” Dr. Archer says. “The changes in training requirements were made in response to concerns regarding fatigue and its potential effects on the provision of care. Reduced duty hours and increased supervision will serve to enhance patient care.” □

“The 16-hour shift is a step in the right direction, but I think that goes a little too far,” he says. “It makes things easier for the interns and leaves more responsibility for the residents. It also requires more sign-offs that can lead to a loss of information.” He adds that care teams are working to find the best, most efficient transition standards.

Jody P. Boggs, MD, a chief resident serving her fourth year in internal medicine, says that while she understands the importance of addressing the issue of physician fatigue, she thinks the ACGME requirements go too far. She says that at Sentara Norfolk General Hospital changes to duty hours were instituted before the July deadline to work out the logistics and smooth out any snags. The changes



Course Corrections:



Some people are born to be health-care providers. They dress in green scrubs for Halloween as children and take pre-med courses as undergraduates. They prepare for the Medical College Admissions Test (MCAT) and then apply to medical school. Step by step, year by year, they march toward their chosen profession.

Other people take the long way around.

Consider Mark W. Eakes, MD, who entered medicine after spending 20 years in the Navy, or Beth A. Klug, who dreamed of medicine while she taught preschool. Sami G. Tahhan, MD, studied dentistry before he studied





Changing Careers to Enter **Medical & Health Professions**

medicine, and Joanna H. Tarr, MDiv, MS, an ordained Baptist minister, served as a hospital chaplain long before she considered becoming an art therapist. Lori J. Wood prepared to become a lawyer before discovering the field of ophthalmic technology, and Anton N. Quist entered medicine in his 40s after a successful career in professional bike racing.



At first glance, these six latecomers to the fields of medicine and health professions share little in common. But each of them is unusually determined. Changing careers required years of perseverance, sacrifice and focus on the end goal.



Mark W. Eakes, MD, Class of 2011, always thought he'd become a physician. But first, he took a 20-year detour as an officer in the U.S. Navy. As a high school student in San Antonio, Texas, Dr. Eakes considered medical school until he was accepted into the U.S. Naval Academy. Even then, medicine was a fall-back plan for him.

He thought he could quit the Naval Academy after a couple of years if he didn't like it, return to San Antonio and attend a local college as a pre-med major. But Plan B remained just that for the next two decades. After graduating from the Naval Academy in 1986, Dr. Eakes began his career, eventually serving on three ships, completing three full deployments and earning a master's degree in mechanical engineering.

In 1999, Dr. Eakes realized he had an opportunity to follow his dream. The Navy sent him to Hampton where he began taking prerequisite courses

for medical school. He also completed an emergency medical services (EMS) course in Chesapeake and worked for the Chesapeake EMS Auxiliary to see what medicine was like "up close and personal" and to decide if he really wanted to make the change. At the time, Dr. Eakes was married with four children.

After a long discussion with his wife in April 2004, Dr. Eakes finalized plans to retire from the Navy in 2006 and apply to medical school.

"It was a risk in that I had closed the door on my career with no guarantee of entry into medical school," he says. It turned out to be a well-calculated risk; EVMS accepted him early into the combined MD/MPH program. Five years later, Dr. Eakes — pictured below with his wife, seven children, son-in-law and grandson — is in the midst of the Portsmouth Family Medicine residency program.



From Naval Officer to Medicine: Mark W. Eakes, MD



From Preschool to Med School: Beth A. Klug

Beth A. Klug was 35 years old, the mother of four children and a part-time teacher at her two youngest children's preschool when she began to imagine a career in health care.

"I knew it would be a few short years until they were in school full day, so I started exploring several different career paths, including nursing, physician assistant, surgical tech and medical school," she says.

It was her husband who nudged her toward medicine. "He said to ignore all outside influences," recalls Mrs. Klug, now a fourth-year medical student. "He asked, 'If you could choose any career that you wanted, what would you choose?' I said what was truly in my heart, 'I've always wanted to be a doctor.'"

Like many non-traditional students, Mrs. Klug realized she had several years of prerequisites to make up — including completion of an unfinished bachelor's degree.

"I had to retake some of the basic science courses," she says. "Then I had to take chemistry and organic chemistry for the first time."

In 2006, she took the MCAT and was wait-listed at EVMS. A year later — after completing the Masters in Biomedical Sciences program — she entered medical school.

When she began her studies as a medical student, Mrs. Klug's children were ages 7, 9, 11 and 17. Family members and formal childcare programs provided care for the younger children when needed, but all in all, it has been manageable.

"Honestly, it has been less difficult than I thought to juggle it all," Mrs. Klug says. "My husband and I do not give up or get frazzled when things get tough. We forge ahead and make or find a solution." She adds, "My children have learned the value of compromise, hard work and good communication. We cherish time with each other, whether it is studying together or playing together."

As a teenager, Sami G. Tahhan, MD, assistant professor of internal medicine, knew exactly how long it took to become a doctor — too long. He had watched from a distance while his older brother finished four years of medical school and seven years of internship, residency and fellowship. The commitment of that many years didn't appeal to Dr. Tahhan. "I was not too excited about that," he recalls.

During his undergraduate studies as a math major at the University of Pennsylvania, Dr. Tahhan considered medicine but decided that much of what he sought in a profession could be achieved as a dentist and with less time spent in training. He entered the University of Connecticut School of Dental Medicine.

But Dr. Tahhan didn't count on the strong pull he felt toward medicine. At the University of Connecticut, the dental school shares a combined curriculum with the medical school.

"It really was half-way through my second year of dental school that I got exposed to a whole lot of medicine," Dr. Tahhan says. In courses with his medical school classmates, Dr. Tahhan discovered that medicine was "very intellectually appealing." Indeed, he says, "I fell in love with medical school." And, at that point, the years needed to become a practicing physician no longer mattered.

His epiphany led Dr. Tahhan to retool his professional education. His completed coursework made him a strong applicant to medical school. He left dental school early and enrolled at EVMS in 1995. Dr. Tahhan now sees patients and teaches as an EVMS assistant professor of internal medicine.

"I enjoy the balance of teaching and practice," he says. In a nod to his parents, both professors of French literature, he adds, "I have the teaching gene."



From Dentistry to Medicine: Sami G. Tahhan, MD



From Chaplain to Art Therapist: Joanna H. Tarr

The close relationship between a counselor and a client, or a pastor and a parishioner, is mediated with words. Through talk, a person heals. But images can aid the healing process, too — as Joanna Tarr, a May Art Therapy and Counseling graduate knows.

Mrs. Tarr majored in social work at Baylor University in Waco, Texas, and then trained as a minister at Baptist Theological Seminary in Richmond. She worked first as a youth minister in Powhatan, Va., and then as a hospital chaplain in Ft. Worth, Texas. In 2006, she became a Navy chaplain, and her service included a tour in the Middle East and the Horn of Africa.

But in her mid 30s, she was ready for a change. Her husband was also in the Navy, and it seemed impractical to start a family with both of them on active duty. She decided to leave the Navy and seek a new career.

She admits to some frustration with her role as chaplain. “I was tired of talking about things,” she recalls. “I wanted to take away the pressure of having the [right] words.” Yet she was uncertain what direction her career search should take. Serendipitously, two friends in the same week — one in Texas and one in Virginia — both suggested that Mrs. Tarr explore becoming an art therapist.

The long-time friends knew that as an art therapist, Mrs. Tarr could draw upon her considerable counseling experience. They also knew Mrs. Tarr was passionate about art in high school. But Mrs. Tarr was uncertain. Although she had created art as a teenager, she had long since “shut down” that part of her life, she says.

“I was clueless it was even a profession,” she remembers. While talking with EVMS faculty in the Art Therapy and Counseling program, Mrs. Tarr described her interests and background and asked, “Do you think it’s a good match?” She was told art therapists come from many different backgrounds.

She was a good match. Mrs. Tarr entered the program as a full-time student in 2009 and graduated in May.

“I think my previous chaplain experience gives me an ease with all kinds of people,” she explains. “I also have an awareness of the spiritual aspect and religious influence in people’s lives, which I think gives me a richer understanding of the clients I work with and a unique perspective.”



From Paralegal to Ophthalmic Technology: Lori J. Wood

Lori J. Wood, director of the Ophthalmic Technology Program, thought she knew her ultimate career goal: to become a lawyer. She earned a paralegal certificate at night while working days for an attorney. “I really loved law,” she recalls. “I loved the complexity of it, and I loved working with people.”

But as she began to explore her options for earning a bachelor’s degree, she became less certain. “It took me about six months of research and looking before I decided I wanted to be an optometrist,” Mrs. Wood says. “I would be helping people with their vision and making a difference in someone’s life.”

After moving to Norfolk, she searched for pre-med courses in Hampton Roads and came across the joint EVMS/Old Dominion University program. Graduates of this 22-month program gain an extensive knowledge of the ocular system, are proficient in the operation of visual instrumentation and develop effective communication skills in working with patients.

Mrs. Wood completed the program and pursued a BS in health sciences with an emphasis in ophthalmic technology. “I figured I could still apply to

optometry school with that degree, or I could apply to law school if I changed my mind about the health-science field,” she says.

But she didn’t change her mind. She loved the program from the first day and graduated in 1998 at the age of 34. Interested in becoming an educator, Mrs. Wood asked her teacher how to become an instructor in an Ophthalmic Technology Program. “Since there were only seven programs in the country at the time — now there are only five — she said someone had to either leave or die for there to be an opening, and she didn’t plan on doing either real soon.”

So Mrs. Wood went into private practice for three years. “Then one day,” she says, “my instructor called me and said, ‘Do you have your resume ready? I’m leaving to pursue other things.’” That was in early 2002. Mrs. Wood has been director of the Ophthalmic Technology Program ever since.



From Cycling to Medicine: Anton N. Quist

At age 43, Anton N. Quist is a member of the medical class of 2013 at EVMS. Although he is the son of a doctor and a nurse, he didn't turn to medicine until after he entered his first career and found success as an elite athlete.

Born in Great Britain and raised in his father's native Ghana, Mr. Quist came to the United States to study engineering at Harvard and stumbled upon a new passion during a cycling trip in Ireland. After graduation in 1992, he accepted a job at a management-consulting firm in McLean, Va. But his first passion was cycling.

For several years, with a peak from 1998 to 2004, his primary focus was bike racing, Mr. Quist recalls. His specialty was track (or velodrome) sprinting, which he started racing in 1998. He eventually raced for the U.S. National Team twice — the 2003 World Championships and 2004 World Cup. In the summer of 2004, he won a national championship in the 1K time trial.

In 2005, Mr. Quist left racing and began rethinking his career. "I didn't realize how much I was working to support my cycling until I was working to work," he recalls.

A book on career aptitudes pointed Mr. Quist toward medicine. "But it didn't seem possible," he says. "It seemed like a very long stretch." Given his age and the time it takes to become a physician, he considered other careers in the health professions. He spoke with officials at several schools. Eventually, he decided it was worth the time and the work.

Four years after starting his quest for a new career, Mr. Quist entered EVMS in 2009. Eventually, he would like his practice of medicine to have a global impact. In the short-term, however, he's focused on school but still cycles for pleasure in Norfolk. "Fortunately there are no velodromes nearby to tempt me away from school duties, so I stick to the road," he says. □

Read more "course corrections" online at www.evms.edu/magazine.

The Science of Sleep

EVMS PHYSICIANS UNRAVEL THE MYSTERIES OF SLEEP

According to the National Sleep Foundation, nearly one in five adults suffers from excessive daytime sleepiness. Until a few years ago, 47-year-old Bob S. was one of them.

“I was a classic case,” recalls the Virginia Beach lawyer. “If I weren’t physically active, I was nodding off. I was in a bad mood much of the time. I was waking up multiple times a night and not even realizing it, snoring like a bear, driving my wife crazy.”

Finally, at his wife’s urging, Bob sought help from his primary-care doctor, who sent him to the sleep medicine experts at Eastern Virginia Medical School. A thorough physical examination, medical history and sophisticated overnight sleep study uncovered Bob’s problem — obstructive sleep apnea (OSA), one of the most common sleep disorders in the world.



Obstructive Sleep Apnea

“There are about 15 million Americans with sleep apnea, and obstructive sleep apnea is by far the most common type,” says EVMS associate professor and sleep medicine specialist Robert D. Vorona, MD, medical director of the newly opened EVMS Sleep Medicine facility. OSA occurs when the muscles in the back of the throat that support the soft palate, uvula, tonsils and tongue relax too much to allow normal breathing. The airway narrows or closes for 10 to 20 seconds, which triggers the brain to briefly arouse the sleeper, reopening the airway.

The new EVMS Sleep Center, located at Fort Norfolk Plaza, is outfitted much like a hotel, with a large bed and full private bathroom in each of four sleep-study rooms.

“Patients with obstructive sleep apnea typically end up waking up over and over during the night because of these pauses and repeated attempts to breathe,” says Dr. Vorona. “We see it most often in overweight, middle-aged adults.”

We are really just beginning to understand sleep disorders.



Robert Vorona, MD, medical director of the EVMS Sleep Center at Fort Norfolk, shows a patient some of the treatment options for individuals diagnosed with a sleep disorder.

Bob fit the profile of an OSA patient perfectly. By his own admission, he was at least 80 pounds over his ideal weight. The thickness in his neck contributed to the nighttime obstruction of his airway. “Dr. Vorona said I had ‘Godzilla apnea,’” says Bob, referring to the severity of his case.

But the condition is no joke. Without treatment, OSA and many other sleep-disrupting disorders can not only make patients excessively tired, affecting their work and personal lives, but over time can also raise the risk for mood disorders, accidents, heart attacks and strokes. To address the problem, the EVMS Sleep Medicine team offers a full range of diagnostic services and treatments for a wide array of sleep disorders including OSA, chronic insomnia, restless leg syndrome and excessive daytime sleepiness (narcolepsy). They also research, diagnose and treat more obscure sleep problems, known collectively as parasomnias. These can include conditions such as teeth grinding, sleep walking, nocturnal seizures and REM sleep behavioral disorder, wherein patients may unknowingly punch or kick in their sleep.

“We are really just beginning to understand sleep disorders and the impact they can have on patients’ lives,” says Dr. Vorona, who is a fellow of the American Academy of Sleep Medicine. “Dreaming sleep (REM sleep) wasn’t even described until the 1950s. So sleep medicine is a relatively young field compared to cardiology or endocrinology. At EVMS, we are committed to staying on the leading edge of this field.”

Sleep Medicine at EVMS

In conjunction with Sentara Norfolk General Hospital, the EVMS Division of Sleep Medicine has been helping patients with sleep problems since 1980. In 1986, the division became the first in Virginia, and the second on the east coast, to be accredited by the American Academy of Sleep Medicine.

The Division of Sleep Medicine is staffed by a team of medical experts who are true sleep scientists with extensive training in sleep disorders



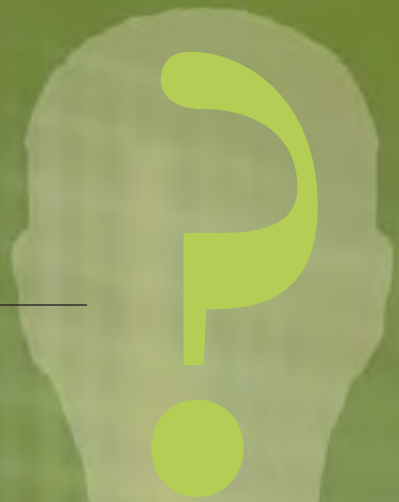
Visitors to the new EVMS Sleep Center at Fort Norfolk Plaza are greeted by a relaxing waterfall sculpture in the lobby. The office also includes convenient parking in an adjacent garage.

and related conditions. All are physician educators as faculty members at EVMS and hold positions in such diverse departments as internal medicine, pathology and anatomy, otolaryngology-head and neck surgery and psychiatry. Led by J. Catesby Ware, PhD, professor and division chief, the group also includes Dr. Vorona and Nancy Fishback, MD, professor and chair of pathology and anatomy, both of whom are board-certified sleep medicine physicians, and Maria Winn and Patricia Benson, both family nurse practitioners.

Now for the first time, EVMS can conduct high-tech sleep studies on site in its own sleep facility, a four-bedroom center where patients can be comfortably evaluated overnight and/or examined and tested during the day. Not only is it convenient for patients, but by making it easier to conduct sleep research, the new facility will also help EVMS sleep scientists to better understand sleep problems and develop new, more effective methods for treating them.

“There is something about teaching and doing research that allows us to give something extra to patients,” says Dr. Vorona. “There is just nothing like it to keep you on your toes and ensure that you really know your field. It definitely does inform me when I am caring for patients.”

**“There is something
about teaching and doing
research that allows us to
give something
extra to patients.”**



Anyone can develop OSA; however, certain factors increase the risk including:

- **Excess weight.** More than half of those with OSA are overweight.
- **Neck circumference.** A neck circumference greater than 17 inches (43 centimeters) for men and 15 inches (38 centimeters) for women is associated with an increased risk of OSA.
- **High blood pressure.**
- **A narrowed airway,** either because of genetics or because of enlarged tonsils or adenoids.
- **Chronic nasal congestion.**
- **Diabetes.** OSA is three times more common in people who have diabetes.
- **Gender.** In general, men are twice as likely to have sleep apnea.
- **Race.** Among people under age 35, OSA is more common in African-Americans, Hispanics and Pacific Islanders.
- **Age.** Sleep apnea occurs two to three times more often in adults older than 65.
- **Menopause.** A woman’s risk appears to increase after menopause.
- **A family history** of sleep apnea. If you have family members with sleep apnea, you may be at increased risk.
- **Alcohol, sedative or tranquilizer use.** These substances relax the muscles in your throat.
- **Smoking.** Smokers are nearly three times more likely to have OSA.

Sleep technician Jim F. Chapman monitors a patient during a recent sleep study in the new EVMS Sleep Center.



Signs and symptoms of obstructive sleep apnea:



- Excessive daytime sleepiness (hypersomnia)
- Loud snoring
- Observed episodes of breathing cessation during sleep
- Abrupt awakenings accompanied by shortness of breath
- Dry mouth or sore throat in the morning
- Morning headache
- Frequent urination at night
- Difficulty in staying asleep (insomnia)

Sleep Study

Patients who are referred to EVMS for evaluation of a sleep disorder undergo a thorough physical examination and medical history, fill out a sleep questionnaire and discuss appropriate testing with a physician. Because it offers an eight-hour window into a patient's nighttime habits, a sleep study, or polysomnogram, is often the most effective way for doctors to make an accurate diagnosis of certain kinds of disorders.

Patients arrive at the state-of-the-art EVMS sleep facility two hours before their normal bedtime to allow time to be fitted with an assortment of monitoring devices before going to bed in their hotel-like room. Each room has a private bathroom and is designed to facilitate relaxation and comfortable sleep. While patients sleep, technicians monitor multiple bodily functions, including eye movements, brain waves, heart rate and rhythm, muscle function, air flow through the nose and mouth, respiratory effort and oxygen levels.

In the morning, the sensors are removed, and patients can either shower at the sleep facility or return home.

“The sensors give us a great deal of vital data about the quality of the patient’s sleep,” explains Dr. Vorona. “Patients come back approximately two weeks after the study, and we make our treatment plan. There are effective treatments for OSA, narcolepsy, restless leg syndrome, insomnia. In most cases, we are able to find the problem and treat patients effectively.”

In Bob’s case, the treatment was a Continuous Positive Airway Pressure machine, or CPAP, which uses air pressure to keep the airway from collapsing and closing and waking the patient. Bob straps his mask on when he is ready to sleep and wakes up feeling refreshed and rested.

“The very first night I used it, I woke up around four or five in the morning, feeling better than I had in a long, long time,” recalls Bob of his first experience with the CPAP nearly four years ago. “I remember thinking ‘This is how you’re supposed to feel!’ My mood is better; I have more energy; my relationship with my wife has improved. You don’t realize how much these things are related to getting a good night’s sleep. I hate to think how drowsy I was before.”

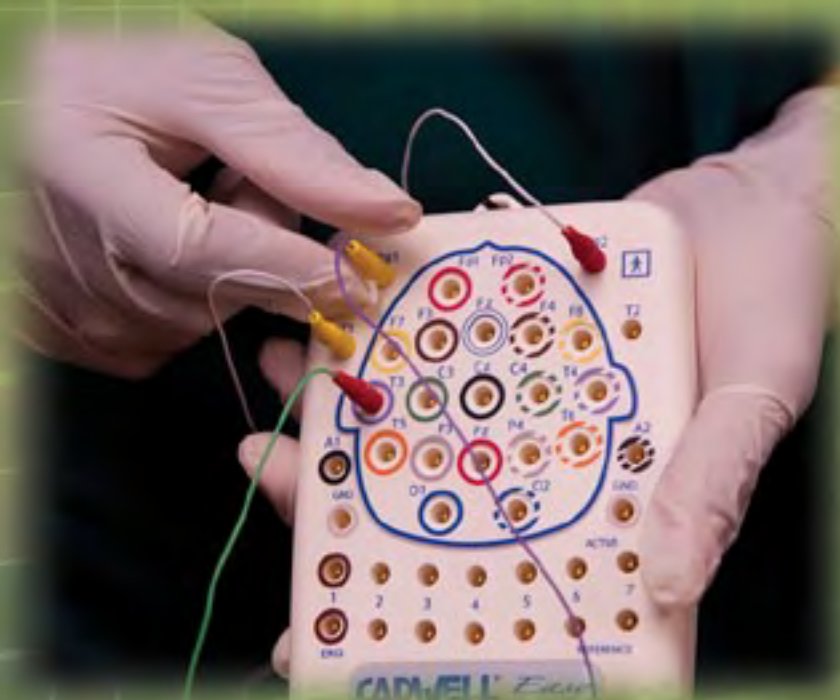
“There are so many benefits to finding and treating sleep disorders,” says Dr. Vorona. “The data suggest that treatment can reduce car crash risks, may lower blood pressure and even cut the risk of cardiac events and mortality. There is no question that it can have a dramatic impact on a patient’s quality of life.” □

“The sensors give us a great deal of vital data about the quality of the patient’s sleep.”

Potential Complications

Untreated sleep apnea is considered a serious medical condition. Complications may include:

- **Cardiovascular problems.** About half the people with sleep apnea develop high blood pressure (hypertension), which raises the risk of heart failure and stroke. Patients with sleep apnea are also much more likely to develop abnormal heart rhythms, such as atrial fibrillation.
- **Daytime fatigue.** People with sleep apnea often experience severe daytime drowsiness, fatigue and irritability. They may have difficulty concentrating and find themselves falling asleep at work, in front of the TV or even behind the wheel.
- **Complications with medications and surgery.** People with sleep apnea may be more likely to experience complications after major surgery because they’re prone to breathing problems, especially when sedated and lying on their backs.
- **Sleep-deprived partners.** It is not uncommon for a partner to choose to sleep in another room. Many bed partners of people who snore are sleep-deprived as well.
- **Memory problems,** morning headaches or mood swings.



A technician plugs in leads from a variety of sensors placed on the scalp and body to monitor brain waves and muscle movement during sleep. Doctors use that information to help them diagnose sleep problems.

For more information on common sleep disorders, visit www.evms.edu/magazine.

MPH education PREPARES ALUM for pandemic

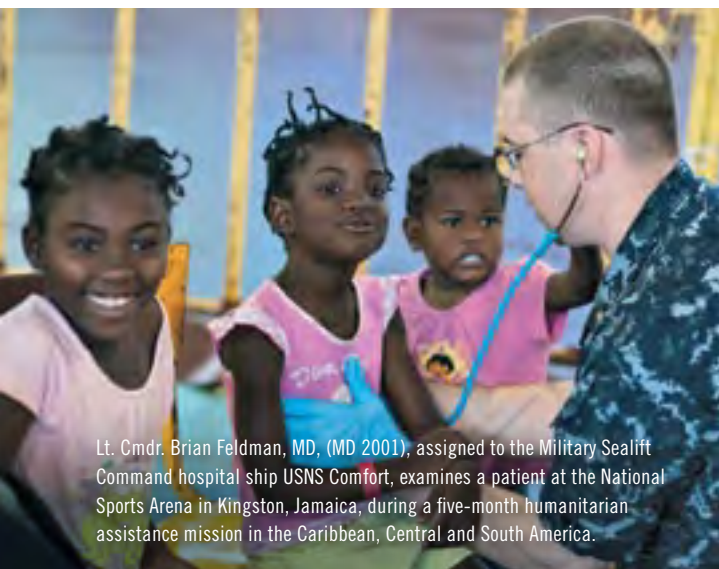
In 2009, two years after earning a Master of Public Health degree from EVMS, Cristi A. Carlton, MPH, found herself at the forefront of the H1N1 pandemic as an epidemiologist with the Division of Immunization at the Michigan Department of Community Health (MDCH) in Lansing.

It was a challenging and exciting time as she worked to educate the public and interact with health-care providers as a leader of the MDCH Flu Education Workgroup and Flu Advisory Board. But she was ready.

“I had a very good base in public health,” says Ms. Carlton, who worked with the Project Immunize Virginia Coalition and the Consortium for Infant and Child Health’s Obesity Prevention and Immunization Service Providers Workgroups while she was a student. “I felt like I was well prepared by EVMS for what I had to do. It was an intense and interesting experience. There had been planning for so long, and for it to actually happen, well, it was a very exciting time.”

Ms. Carlton, a Michigan native, had originally planned to pursue medicine, but a study-abroad program through Michigan State University and Regent’s College London led her to public health.

“One component of the program was comparing the British National Health Service to our health care system in the US,” says Ms. Carlton. “We discussed allocation of health-care



Lt. Cmdr. Brian Feldman, MD, (MD 2001), assigned to the Military Sealift Command hospital ship USNS Comfort, examines a patient at the National Sports Arena in Kingston, Jamaica, during a five-month humanitarian assistance mission in the Caribbean, Central and South America.

CLASS NOTES

- Troy M. Glembot, MD (MD 1991), has been designated a Certified Physician Executive (CPE) by the Certifying Commission in Medical Management. The designation recognizes Dr. Glembot for educational achievements, demonstrated stature as a physician and for medical management experience. Dr. Glembot completed an MBA at The George Washington University in May 2010. He has been medical director for the Bariatric Program at Winchester (Va.) Medical Center since 2006.
- Lawrence M. Gorzelnik, MD (MD 1996), has been elected president of the New Jersey Society of Oral and Maxillofacial Surgeons.
- Robert L. Sterling Jr., MD (MD 2001), is looking forward to the second birthday of his daughter, Claire. □

Log on to www.evmsAlumni.com to submit your news and to read about your classmates.

resources and access to care. This changed my focus to a program and policy level rather than the individual patient level.”

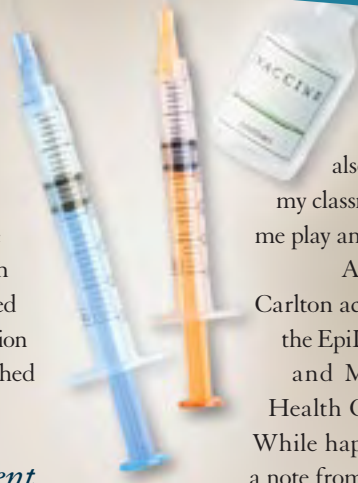
She was drawn to EVMS because she wanted to attend a school smaller than Michigan State University where she received a degree in human biology. A family connection and familiarity with Hampton Roads clinched her decision to attend EVMS.

“I really liked the involvement EVMS has with the community and the different partnerships the school has with other entities. It really helped prepare me for a job in public health.”

CRISTI A. CARLTON, MPH

Ms. Carlton served as class vice president for the MPH program. The job provided a unique perspective on how vital EVMS is to the community.

“I really liked the involvement EVMS has with the community and the different partnerships the school has with other entities,” Ms. Carlton says. “It really helped prepare me for a job in public health. It was great to work with Dr. [David] Matson [director of the MPH program] and other staff



within the program. It also helped me get to know my classmates better and helped me play an active role at EVMS.”

After graduation, Ms. Carlton accepted a position with the EpiData Center at the Navy and Marine Corps Public Health Center in Portsmouth. While happy there, she received a note from a family member that changed her life.

“I wasn’t looking for a job, but my grandfather found a posting in Michigan and sent it to me. I decided to apply for it because it had a good mix of what I did in Virginia with Project Immunize Virginia and the EpiData Center,” Ms. Carlton says.

She started her new job in January 2009, and the pandemic hit in April, putting her in the midst of one of the biggest national health-care crises in recent history. Since that time, she has continued influenza-related work. Recent career highlights include presentations on developing targeted influenza vaccination messages at the National Immunization Conference in Washington, D.C., and at the Infection Disease Society of America’s Seasonal and Pandemic Influenza Conference in Arlington.

In her spare time, Ms. Carlton studies photography and is training to run a half marathon. □

MD ALUMNI ASSOCIATION launches scholarship

This fall, a new \$5,000 merit-based scholarship sponsored by the Medical Alumni Association was awarded to a rising second-year medical student with a proven record of academic excellence, community service and leadership.

The first recipient, Alexis E. Pitts, was introduced at the MD Alumni Reunion Weekend banquet in August.

Ms. Pitts was selected from general applications processed through the financial aid office. A scholarship committee within the 14-member MD Alumni Association Board of Directors reviewed the applications. In addition to evidence of scholarly distinction and active community service, the committee considered narratives written by each candidate that explain what makes him or her the ideal recipient.

“The alumni were eager to hear the student’s story and see up-close-and-personal the face of the future,” Melissa W. Lang, director of alumni relations, says. “It provides a platform to let our alumni know about the opportunities to support their talented successors.”

Providing finances to stellar students is an important goal for members of the MD Alumni Association. Most of them have walked in the shoes of current students who struggle to pay tuition and hope to fulfill a dream of becoming a physician.

According to the Association of American Medical Colleges, the average educational debt for the class of 2010 exceeded \$160,000.

“It’s an unbelievable amount of money, and the alumni have all been there,” Mrs. Lang says. “They feel passionate about easing the burden for those remarkable students who match the EVMS mission to serve the community.”

The MD Alumni Association Scholarship will be an endowed fund. The goal of the board is to raise \$125,000 over the next five years so that the scholarship is funded in perpetuity through accrued interest. □

If you would like to support the scholarship fund, contact the Office of Development at 757.446.6070.

ALUMNI INFORMATION

Send your class notes and news to Alumni@evms.edu

SAVE THE DATE:

October 15, 2011

EVMS Chalet at Virginia Wine Festival
Purchase tickets for a day of enjoying the regions premier wines at the 2011 Town Point Virginia Wine Festival in Town Point Park. Admission to the EVMS Chalet entitles you to hors d’oeuvres, games, prizes and more.

October 28, 2011

Annual School of Health Professions Alumni Banquet, EVMS campus, 6 p.m.

Have you updated your Alumni profile lately? Visit www.evmsAlumni.com to make sure your information is current.

Welcoming reception introduces new Glennan Center director



EVMS held a reception mid-summer to welcome Robert Palmer, MD, as director of the Glennan Center for Geriatrics and Gerontology. Dr. Palmer previously worked at the University of Pittsburgh and the Cleveland Clinic. Above, Dr. Palmer speaks with B. Thomas Mansbach, a member of the EVMS Foundation Board of Trustees.

‘OUTSTANDING’ PHILANTHROPY AWARDS

An organization and a couple are being recognized for their outstanding efforts with top awards from the Association of Fundraising Professionals (AFP) - Hampton Roads Chapter.

The Norfolk Southern Foundation, the fund-raising arm of Hampton Roads-based Norfolk Southern Corporation, and local philanthropists Paul O. and Susan B. Hirschbiel were nominated by EVMS in advance of the AFP's 2011 National Philanthropy Day this fall.

“When thinking about outstanding philanthropists who are making a difference in Hampton Roads, the Norfolk Southern Foundation and the Hirschbiels were among the natural front runners,” says EVMS Development Director and former local AFP President Connie L. McKenzie. “Not only has their impact for EVMS and the broader community been substantial, but they also lead by example.”

“We are deeply honored to have been nominated for this significant award by EVMS,”

says Mr. Hirschbiel, a member of the EVMS Board of Trustees since 2008 and honoree of the Outstanding Volunteer Fundraiser award, along with his wife.

The Hirschbiels, who were recently named in *Inside Business*' "Power List," have dedicated their time to non-profit fundraising since returning to the area from financial careers in New York nearly 14 years ago. Their effort supports numerous arts and education efforts throughout the commonwealth. The couple recently hosted a reception to attract potential EVMS donors and have helped raise more than \$121,000; although, as their award nomination states, “the amount of time they have given to the school is worth much more than that.”

The Norfolk Southern Foundation is receiving the Outstanding Foundation Award. The foundation's fund-raising relationship with EVMS dates back nearly 30 years, and Executive Director Katheryn N. Fletcher says it is a natural

fit with the organization's mission to improve communities within its 22-state territory.

“Our employees obviously benefit from the skills of the physicians who are trained at EVMS,” says Ms. Fletcher. “And, of course, there is a great community benefit to having such a high-quality medical school here.” Norfolk Southern Foundation's \$750,000 grant to EVMS included a \$250,000 challenge grant to encourage donations from Norfolk Southern employees. The foundation supports other worthy causes in the community, including the Virginia Arts Festival, various scholarship programs, the Elizabeth River Project and the Foodbank of Southeastern Virginia — just to name a few.

The honored recipients will receive their awards at the National Philanthropy Day celebration on November 16 at the Norfolk Waterside Marriott. □

Virginia Gentlemen Foundation SUPPORTS ALS RESEARCH with \$50,000 grant

When Josh Thompson was diagnosed in 2007 with amyotrophic lateral sclerosis (ALS), commonly known as Lou Gehrig's Disease, it did more than inspire an outpouring of community support; it also inspired the mission of the then newly formed Virginia Gentlemen Foundation, a non-profit young men's organization of which Thompson's other son, Chris, is a founding member.

Josh's diagnosis prompted the Virginia Gentlemen to launch the popular "JT Walks" and other highly successful fund raisers, bringing in close to \$4 million since 2007. This year, that money, along with a gift from Josh's family — his father is EVMS Board of Visitors member Bruce L. Thompson — helped

provide a \$50,000 grant to fund stem-cell research being conducted by Earl W. Godfrey, PhD, professor of pathology and anatomy; Jerry L. Nadler, MD, chair of internal medicine; and Roy Ogle, PhD, of LifeNet Health.

"Our work utilizes rats with a genetic mutation known to cause ALS in a small percentage of human patients," Dr. Godfrey says. By injecting fatty tissue-derived stem cells into the spinal cords of these rats and using anti-inflammatory drugs developed in Dr. Nadler's lab, the team hopes to neutralize toxicity and slow down the degeneration of motor neurons that leads to paralysis in ALS patients. The work has implications for those with the familial form and for those whose ALS is of unknown origin.

The Virginia Gentlemen Foundation helped launch the project with an initial grant of \$25,000 in 2010. Dr. Godfrey says the group's financial support is vital to pursuing this line of research. Chairman Benjamin Davenport says the group — as well as the Thompson family — is encouraged by the EVMS research.

"We firmly believe in the work that Dr. Godfrey and his team are doing at EVMS," says Mr. Davenport, who recently toured the EVMS research facility with other members. "We are so impressed with the advances that have been made in the last two years, and we want to see it continue. Our goal is to find a cure for Josh and others like him."

In addition to funding medical research, the Virginia Gentlemen Foundation has provided transportation assistance to ALS patients and families, made substantial donations to the local chapter of the ALSA and built JT's Grommet Island Beach Park & Playground, the nation's first fully accessible beachside playground, which opened in 2009 at the Virginia Beach oceanfront. □

For more information about the Virginia Gentlemen Foundation, go to www.evms.edu/magazine.



Jerry L. Nadler, MD, chair of internal medicine; Earl W. Godfrey, PhD, professor of pathology and anatomy; and EVMS President Harry T. Lester at an event hosted by the Virginia Gentlemen Foundation.



Joseph A. Aloï, MD, left, and Terri W. Babineau, MD, of EVMS, pose with George Y. Birdsong, MD, chair of the Obici Healthcare Foundation.

Obici Healthcare Foundation grants support projects benefitting the underserved

Eastern Virginia Medical School is reaching out to patients in Western Tidewater thanks to a pair of grants from the Obici Healthcare Foundation.

Totaling more than \$250,000, the grants will provide educational opportunities to medical students and residents and will reinforce EVMS' efforts to help some of the region's most underserved patients.

The first grant for \$75,000 will open the door for EVMS medical students and residents to provide much-needed care at the Western Tidewater Free Clinic, a vital resource for health care in an underserved, rural area. Terri W. Babineau, MD, assistant dean for community outreach at EVMS, is the project's leader. Dr. Babineau is also one of the founders of the Western Tidewater Free Clinic, which has cared for the poor and uninsured since 2007.

"Taking primary-care residents to the clinic, as well as having medical students rotate through, will enable us to serve more patients," Dr. Babineau says. "But we also hope that exposing these [medical] residents and students to the clinical practice of medicine in a rural setting will attract more of them to eventually establish practices in this area, where access is so limited."

EVMS' partnership with the Western Tidewater Free Clinic to bring additional medical providers to Suffolk is a true demonstration of collaboration and community commitment, says Obici Healthcare Foundation Executive Director Gina Pitrone.

Ms. Pitrone says the foundation enthusiastically supports the free-clinic project as well as another EVMS initiative — the EVMS Strelitz Diabetes Center's effort to strengthen diabetes care and prevention in the Suffolk area.

"This area has the unfortunate distinction of having the highest mortality rate related to diabetes in the state of Virginia," says Joseph A. Aloï, MD, associate professor of internal medicine and clinical director of the Strelitz Diabetes Center. He leads the project supported by the \$185,000 grant. The funds will be used to establish a community-based diabetic-screening program and fund a phone-management system with a diabetes educator to provide simple interventions and connect patients with community resources. The project also will involve more of the area's health-care providers in the fight against diabetes through Internet-based continuing medical education, as well as other materials.

Dr. Aloï and his team hope to screen 500 people for diabetes and related problems, such as high cholesterol and hypertension, in partnership with area hospitals and clinics over the next year. □

IN FOCUS

Photos from Community Care Day, the Mike Cavish Golf Tournament, the EVMS Golf Classic and Cookout for the Cure.





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1. Art therapy and counseling student Sarah J. Julsrud paints a masterpiece at Maury High School. 2. EVMS students prepare care packages for the troops at Community Care Day April 9. 3. The team from the American Diabetes Association brought a different flair to this year's cookout, serving diabetes-friendly fare such as spring rolls. 4. Golfers from Team Fellini's celebrate an on-target putt during the annual Mike Cavish Memorial Golf Tournament and Dinner, benefiting the EVMS Strelitz Diabetes Center. 5. Phillip Titzer of the Edgar Lomax Company presents the cookout's People's Choice Award to the team from ILA Local 1248. Also pictured are WVEC news anchor Regina Mobley, EVMS Senior Vice President and Chief of Staff Claudia Keenan and Tommy Little, international vice president of the Port of Hampton Roads ILA/AFL-CIO. 6. The cookout's not just for noshing; activities like face painting ensure kids have fun, too. 7. The Cavish tournament, now in its 13th year, raised nearly \$30,000 for the EVMS Strelitz Diabetes Center, a favorite cause of the late Norfolk restaurateur and event namesake, Mike Cavish. 8. The team from Towne Insurance, led by Brad Moses, second from right, was among the field at the EVMS Golf Classic, which benefits the school's Annual Fund. Other team members, from left, were Mike Hoesly, Jack Miles and, at right, David Thiel.

Ribbon-Cutting Ceremony - September 22

The future of health-care education & research has arrived. EVMS is inviting supporters and dignitaries to officially open the new education and research building. The event begins at 6 p.m. Program begins at 6:30 p.m.

3rd Annual HP Alumni Association Banquet/ Officer Induction - October 28

The School of Health Professions host its third annual Alumni Association Banquet on Friday, October 28. There will also be tours of the new building.

Candle Light Vigil- December 1

The EVMS AIDS Resource Center will join forces with Norfolk State University and other local community organizations to honor World AIDS Day.

CORRECTION

In a Spring 2011 story about local "Health Care Heroes" who were honored by the publication *Inside Business* for community involvement, we inadvertently left out local ophthalmologist Roger W. Newsom, MD (MD 1992).

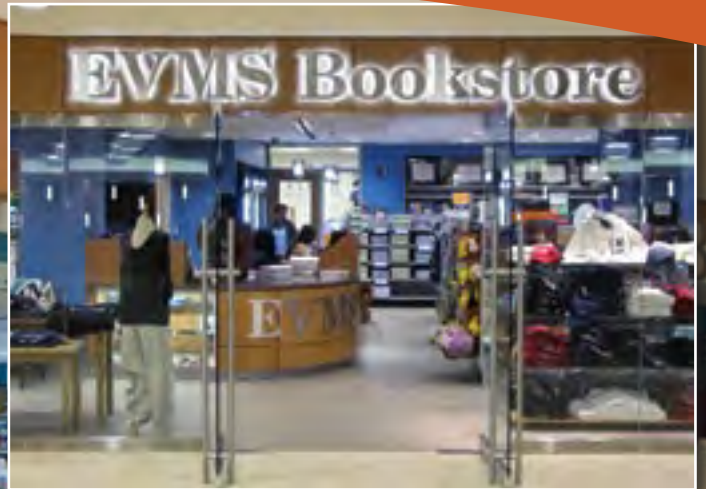
Our apologies to Dr. Newsom. Congratulations to him and to all the EVMS heroes! □

EVMS

Eastern Virginia Medical School

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VISIT THE NEW LOCATION OF THE EVMS BOOKSTORE

Hours of Operation

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Saturday 8 a.m. until noon



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Visit the bookstore online: www.webmedbooks.com/EVMS