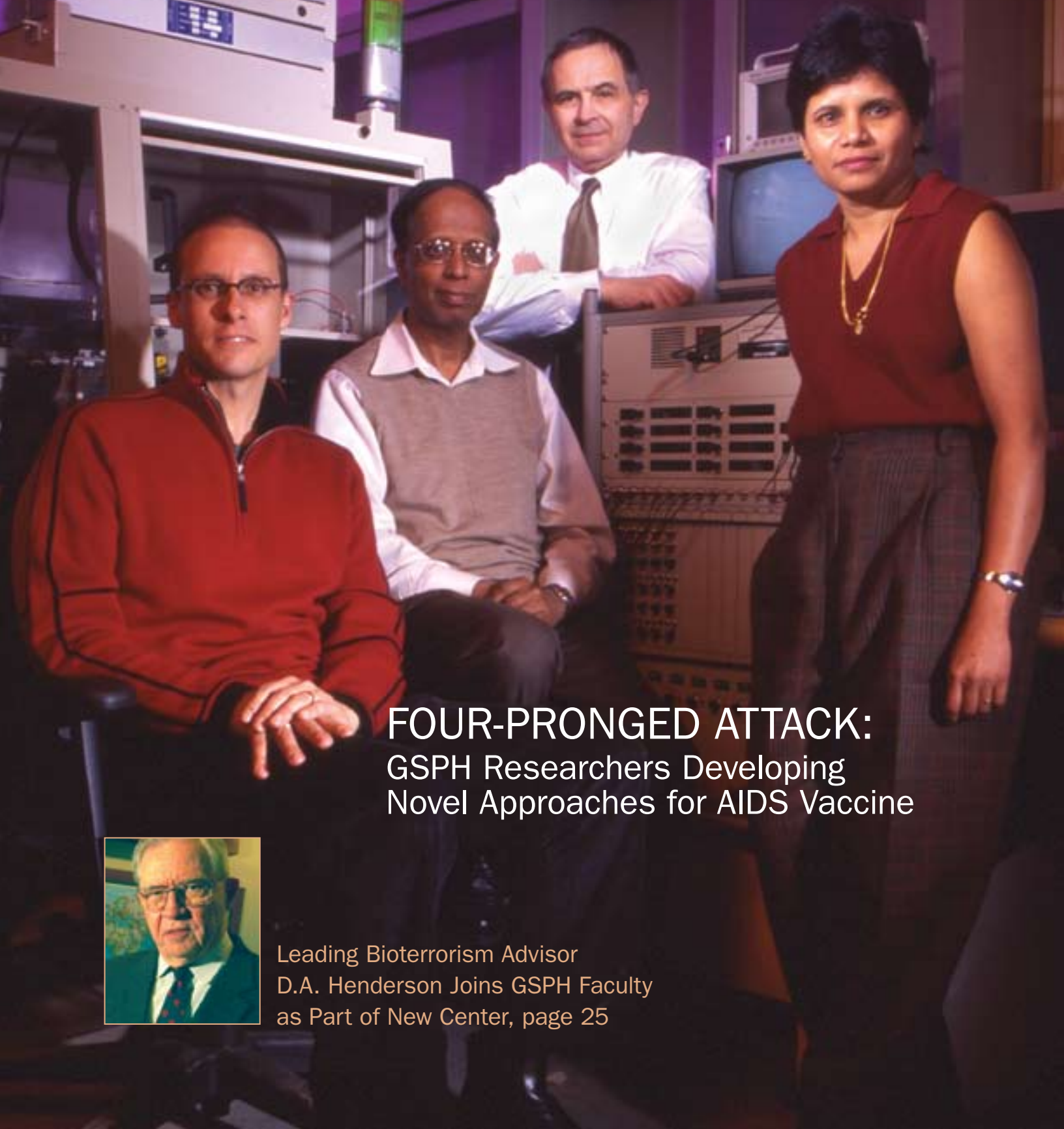


PublicHealth

UNIVERSITY OF PITTSBURGH GRADUATE SCHOOL OF PUBLIC HEALTH

SPRING 2004



FOUR-PRONGED ATTACK: GSPH Researchers Developing Novel Approaches for AIDS Vaccine



Leading Bioterrorism Advisor
D.A. Henderson Joins GSPH Faculty
as Part of New Center, page 25

PublicHealth

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Dean's Message



Bernard D. Goldstein

“The coming year
promises to be
an eventful one.”

I am pleased to be able to share with you once again the many exciting and influential happenings taking place at the Graduate School of Public Health.

In this issue, we not only look ahead to where new cutting-edge research is leading us, but we also take a moment to look back at one of the true pioneers of our school, William Hammon. The original chair of our Departments of Infectious Diseases and Microbiology and Epidemiology, Hammon's work on poliovirus 50 years ago played a major role in the eventual development of the vaccine by Jonas Salk and others.

I was reminded recently of the value and influence of Hammon's teaching in particular, and of the teaching vocation in general, through a letter I received from GSPH alumnus Imam Z.E. Imam of Egypt. He writes, "My whole scientific life was built on the knowledge and experience I gained in your school." While a student at GSPH, Imam published four papers with Hammon, including two on the then-esoteric subject of West Nile virus. This distinguished graduate has been a mentor in Egypt for 110 PhD and MS students in microbiology—a reminder that we are part of a chain. Hammon's efforts almost half a century ago influenced Imam's notable public health successes and will ripple through the years as they impact Imam's students. As we annually rededicate ourselves to teaching, his letter is a good reminder of the long-term consequences of excellence in education, for which we are always striving at GSPH.

Imam's letter also serves as a reminder of our school's extensive history in global health. We plan to build on this history in the coming year by recruiting a director of a global health program, which over time may well expand into a department. Meryl Karol and Ron LaPorte are spearheading this effort, which draws on the participation of the many faculty members already involved in global health activities. As part of this effort, we will be launching an annual lecture series in global health established in honor of recently deceased longtime faculty member Dr. John C. Cutler. Keep watching GSPH publications and our Web site, www.publichealth.pitt.edu, for more information about this and other important events.

The coming year promises to be an eventful one at GSPH as we celebrate two significant anniversaries. On April 1, the Pitt Men's Study will begin its 20th year in the study of the natural history of AIDS in gay men. Throughout the year our Department of Infectious Diseases and Microbiology will be conducting a number of events to commemorate this study and its national parent study, the Multicenter AIDS Cohort Study. And in January the Center for Minority Health kicked off a yearlong celebration of its 10th anniversary with the National Minority Health Leadership Summit and gala. The fall issue of *PublicHealth* will highlight the many events associated with both of these important celebrations throughout the year. Again, keep checking our Web site throughout the year for event details.

I hope you enjoy this issue and will continue to join with us in creating a healthier world.

Bernard D. Goldstein, Dean

On the Cutting Edge

A Sampling of Innovative Research

Physical Activity Higher for Older Women in Walkable Neighborhoods

Older women are likely to get more physical activity if they live near places they like to visit and in more walkable neighborhoods, according to a report published by GSPH researchers in the September 2003 issue of the *American Journal of Health Promotion*.

Lead author **Wendy King**, a doctoral student working with **Andrea Kriska**, associate professor of epidemiology, said older women who feel their neighborhoods are favorable for walking are as much as 100 percent more physically active than those who see their neighborhoods as unfavorable. "In addition, women who live near facilities and services like parks, trails, or shops have considerably higher levels of activity than those whose homes are not within walking distance to such sites," King said.

Data for the study was harvested from 149 Pittsburgh women with an average age of 74. Most lived in suburban or urban neighborhoods with low crime rates. The women wore pedometers to gauge their daily footsteps. The participants reported walking levels, leisure time physical activity, and neighborhood environmental features in interviews and questionnaires.

Women who lived within 20 minutes walking distance of a park; a biking or walking trail; or a department, discount, or hardware store, and who lived in a neighborhood considered walkable had higher pedometer readings and higher total physical activity scores on questionnaires.



"This study has great implications for the health of older women, who make up one of the least active groups in the United States," said Kriska, who is co-author and senior investigator for the study. "With the growing epidemic of inactivity and obesity, experts are stressing the need for more exercise. But here we show that older women, the group that most needs to heed this advice, are encountering environmental barriers that prevent them from getting that exercise.

"An understanding of the environmental factors that influence walkability," Kriska added, "can help guide future policy and design decisions for the purpose of creating a more favorable, 'active' environment in communities, schools, and workplaces."

King, W.C., J. Brach, S. Belle, R. Killingsworth, M. Fenton, and A.M. Kriska. "The Relationship between the Convenience of Destinations and Walking Levels in Older Women." *American Journal of Health Promotion* 18, no. 1 (2003): 74-82.

Self-Care in Older Adults with Chronic Diseases

A recent set of presentations by GSPH researchers described self-care patterns in older adults suffering from chronic diseases. The presentations were made at the Gerontological Society of America's annual meeting in November 2003 in San Diego, Calif.

Professor of Public Health and Anthropology **Myrna Silverman** reported on the responses of 396 older Black adults and 440 older White adults to questions on self-care for osteoarthritis and heart disease in a presentation titled "Comparison of Self-Care Behavior by Disease, Race, and Gender: A Typical Day and a Bad Day."

The study revealed that because of the nature of the disease, self-care for osteoarthritis was more symptom-driven. Osteoarthritis respondents used a greater amount and variety of self-care than did heart disease respondents. On a typical day, both groups reported a lot of medication use, but osteoarthritis patients used more over-the-counter medications, vitamins, and minerals, while heart disease patients used more prescription medications. On a bad day, both groups limited activities and rested more, but heart disease respondents were more likely to consult with others, including health professionals.

There also were significant differences according to gender and race. For example, on a typical day, Black women with osteoarthritis tended to use more proactive behaviors, such as hot and cold treatments and salves, while White men rested.

In a companion presentation titled "Correlates of Self-Care Use for Chronic Disease among Older Adults: Comparison of Osteoarthritis and Heart Disease,"



Silverman discussed the results of a sample of 552 older adults with osteoarthritis and 576 with heart disease in terms of the breadth of self-care.

The findings suggest that self-care use varies by disease. For older adults with osteoarthritis, self-care use was determined by the level of overt symptoms, such as pain. In older adults with heart disease, which has few overt symptoms but poses a longer-term threat to life, general health perceptions, self-care knowledge, and other self-motivating factors played more of a role in encouraging self-care.

Silverman, Myrna, Donald Musa, Jeff Jozwiak, Jennifer King, Idethia Shevon Harvey, and Jean Nutini. "Comparison of Self-Care Behavior by Disease, Race, and Gender: A Typical Day and a Bad Day." Paper presented at the 56th Annual Scientific Meeting of the Gerontological Society of America, San Diego, Calif., November 2003.

Animal Model Shows Promise for SARS Vaccine

Researchers from Pitt's School of Medicine and GSPH, working with the Centers for Disease Control and Prevention, caught the world's attention in early December after they revealed a possible vaccine breakthrough against the deadly Severe Acute Respiratory Syndrome (SARS). Study results appeared in a research letter in the December 6, 2003, issue of *The Lancet*. This was the first published work on the development of a SARS vaccine.

The vaccine development came only a few months after the SARS coronavirus was identified and its gene sequence mapped.

Project leader Andrea Gambotto, assistant professor of surgery and medicine at Pitt, said that when the vaccine was injected in rhesus

macaques, it stimulated an immune reaction to the virus that causes SARS. "It is our hope that this research will lead to a protective vaccine against SARS," Gambotto said.

Simon Barratt-Boyes, assistant professor in the Department of Infectious Diseases and Microbiology at GSPH, and **Adam Soloff**, a GSPH student in Barratt-Boyes' lab, also worked on the study.

Research will next continue on ferrets because, unlike monkeys, ferrets display physical symptoms when exposed to the SARS virus. Human clinical trials are being planned for the near future in Pittsburgh as part of an initiative at Pitt's Molecular Medicine Institute, according to Gambotto.

SARS emerged last year in China and is a threatening and deadly infectious disease that quickly spread worldwide.

Gao, Wentao, Azaibi Tamin, Adam Soloff, Leonardo D'Aiuto, Edward Nwanegbo, Paul D Robbins, William J Bellini, Simon Barratt-Boyes, and Andrea Gambotto. "Effects of a SARS-Associated Coronavirus Vaccine in Monkeys." *The Lancet* 362 (December 6, 2003): 1895-96.



Predicting Quality of Life for Nursing Home Residents

When it comes to gathering information on resident quality of life in the nation's nursing homes, policy makers and regulators should counterbalance existing data that focuses on clinical care by speaking to the residents themselves to see how they view their world.

Howard B. Degenholtz, assistant professor of health policy and management and associate director of research at the Center for Bioethics and Health Law, was the lead author of a study analyzing existing data to predict nursing home residents' quality of life. He presented the paper in November 2003 at the Gerontological Society of America's 55th Annual Scientific Meeting in San Diego, Calif.

The study, intended to address shortcomings in currently available sources of data predicting quality of life, was carried out at 101 nursing homes in California, Florida, Minnesota, New Jersey, New York, and Maryland. Participants consisted of 2,282 residents, ranging in age from 65 to 109, who were able to carry on a conversation with researchers. Residents' physical function, length of stay, gender, visual impairment, bladder continence, and depression were found to be influencing factors of quality of life.

The study also found that quality of life is higher in nursing facilities with a higher ratio of activities staff to residents. Further research is needed to determine whether increasing the number of activities personnel will lead to an improvement in quality of life.

Degenholtz, Howard B., Rosalie A. Kane, Robert L. Kane, Boris Bershady, and Kristen Kling. "Indicators of QOL: Does Extant Data from OSCAR and the MDS Offer Clues? Using Extant Data to Predict Nursing Facility Residents' Quality of Life." *The Gerontologist* 43, Special Issue 1 (2003): 511.

Healthy Hearts Key to Shining Golden Years

Keeping one's heart healthy can make the difference between longer quality of life or golden years tarnished by sickness and disease, according to a paper published by University of Pittsburgh researchers in the October 27, 2003, issue of the *Archives of Internal Medicine*.

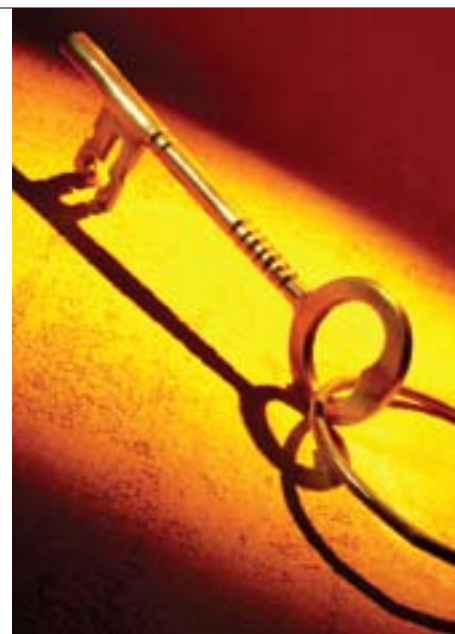
"Older healthy people can maintain better-than-average quality of life, with lower rates of physical and cognitive decline, when they refrain from smoking, lower their blood lipids, watch blood pressure, and avoid obesity through diet and exercise," said **Anne B. Newman**, the study's principal investigator and associate professor of geriatric medicine and epidemiology at the University of Pittsburgh. "Our study is a picture of what the future of older people could be like—the ideal golden years—if they keep heart disease risk factors in check," Newman said.

The results were from a multisite observational study, part of the Cardiovascular Health Study, which analyzed data on 2,932 participants. The participants qualified as healthy, or free of major life-threatening disease, and having normal physical and cognitive function.

After eight years, 48 percent of the participants had aged successfully, meaning they had remained free of incident cancer, cardiovascular disease, chronic obstructive pulmonary disease, and new and persistent physical disability or cognitive decline.

Men and women ages 65–69 with low cardiovascular disease risk factors averaged 15–16 additional years of health and function while those age 85 and older with low risk saw four to five additional such years.

Men and women with high risk factors averaged one to two additional years of health and function.



"Those who began the study at a younger age, without subclinical cardiovascular disease, without diabetes, without hypertension, were most likely to age successfully through the eight years," said Newman. "This tells us that in order to have a good quality of life during old age, with minimal disease and disability, healthy senior citizens should pay strict attention to controlling cardiovascular risk factors."

Newman, Anne B., Alice M. Arnold, Barbara L. Naydeck, Linda P. Fried, Gregory L. Burke, Paul Enright, John Gottdiener, Calvin Hirsch, Daniel O'Leary, and Russell Tracy. " 'Successful Aging': Effect of Subclinical Cardiovascular Disease." *Archives of Internal Medicine* 163 (2003): 2315–22.

High Blood Pressure, Diabetes During Pregnancy Raises Risk of Heart Disease after Delivery

A recent GSPH study suggests that pregnant women with gestational diabetes, preeclampsia, and high blood pressure have higher levels of heart disease risk factors as soon as two years after their children are born. The study was presented at the American Diabetes Association's 63rd Scientific Sessions in New Orleans, La. **Zsolt Bosnyak** led the study while he was a GSPH postdoctoral fellow. Bosnyak is now with the National Centre for Diabetes Care in Budapest, Hungary.

"Our study points to the importance of monitoring women who have had gestational diabetes, preeclampsia, and pregnancy-related hypertension because these conditions can leave these women with insulin resistance or continued high blood pressure after delivery, putting them at risk for subsequent cardiovascular disease," Bosnyak said.

Gestational diabetes appears during pregnancy and then goes away, but may return permanently later. Preeclampsia is a condition in which high blood pressure is accompanied by protein in the urine. The tendency for insulin resistance to lead to diabetes and heart disease has been confirmed in recent work in people with diabetes at the University of Pittsburgh.



Trevor Orchard, co-investigator and GSPH epidemiology professor, said that women who have had a pregnancy complicated by diabetes, preeclampsia, and/or high blood pressure should consider modifying their lifestyles to reduce risk.

"Stop smoking, exercise, and cut back generally on the calories so you lose weight or maintain a steady weight if you are not overweight. Eating more fruit, vegetables, and whole grains, and less of foods containing a lot of fat or simple sugars," Orchard said, "are simple steps that can greatly improve health and reduce risk of heart disease."

Bosnyak, Zsolt, Trevor J. Orchard, Nancy Silvers, and Tina Costacou. "Post Partum Insulin Resistance and Cardiovascular (CV) Risk in Women with Pregnancy Induced Disturbances." Presented at the American Diabetes Association's 63rd Scientific Sessions, June 2003.

Cholesterol-Lowering Drugs May Reduce Risk of Breast Cancer in Older Women

A GSPH-led study found that older women who took cholesterol-lowering drugs saw their risk of breast cancer reduced by 60 to 70 percent in a seven-year period. The study was published in the October 2003 issue of the *Journal of Women's Health*.

Data was evaluated on 7,528 White women age 65 years and older who participated in the Study of Osteoporotic Fractures at sites in Pittsburgh; Baltimore, Md.; Minnesota; and Portland, Ore. Researchers followed the results for seven

years. Investigators adjusted for body mass index and other such risk factors for breast cancer such as the age at menarche, age at first birth, number of offspring, physical activity, and alcohol use.

A total of 234 cases of breast cancer, representing 3.3 percent of the study sample, were reported among the 6,952 participants who reported no use of lipid-lowering drugs; six cases (2.1 percent) among the 284 women who used statins; and four cases (1.3 percent) among the 292 who used nonstatin lipid-lowering drugs. The combined group of lipid-lowering drug users had a 68 percent reduction in the risk of breast cancer.

"There is a statistically significant difference in the percentage of breast cancer events between women who used lipid-lowering drugs and those who did not, and these findings have important public health implications given the widespread use of these medications today," said study author and lead investigator **Jane A. Cauley**, associate professor of epidemiology.

"Our findings need confirmation by other, larger studies involving more women and randomized clinical trials before we can recommend therapeutic interventions to prevent breast cancer with these agents," Cauley said.

Cauley, J.A., J.M. Zmuda, L.-Y. Lui, T.A. Hillier, R.B. Ness, K.L. Stone, S.R. Cummings, and D.C. Bauer. "Lipid-Lowering Drug Use and Breast Cancer in Older Women: A Prospective Study." *Journal of Women's Health* 12, no. 8 (October 2003): 749–756.

Unsung Hero of the War on Polio



William Hammon

“I’m standing on the shoulders of giants,” says Charles Rinaldo, paraphrasing Sir Isaac Newton. Rinaldo is the fourth chair of the Department of Infectious Diseases and Microbiology. One of the giants to whom Rinaldo is referring is the department’s first chair, William McDowall Hammon.

Hammon was a major figure in the war on polio in the early 1950s. (Rinaldo refers to him as one of the “Big Three” along with Jonas Salk at Pitt’s medical school and Albert Sabin of the University of Cincinnati.) But Hammon’s contributions were eclipsed in the public eye by Salk, and then Sabin, and subsequently forgotten by all but a few. Last year—the 50th anniversary of Hammon’s important breakthrough in fighting polio—Rinaldo decided to learn more about Hammon’s legacy. The result is a narrative article, expected to be published in 2004, that places Hammon’s achievements in the context of public health history.

Thomas Parran, founding dean and former U.S. Surgeon General, recruited the best and the brightest to head up the six new departments of the school. At age 45, Hammon, then on the faculty at the University of California at Berkeley, had already achieved eminence as an epidemiologist and microbiologist. A graduate of Harvard University’s medical and public health schools, Hammon and John Enders, a colleague and future Nobel laureate, had developed the first vaccine for feline panleukopenia before Hammon turned his attention to the poliovirus.

As Rinaldo delved into Hammon’s published journal articles, he found himself impressed by the keenness of Hammon’s intellect as well as by his scientific discipline. The logic for his approach to combating the polio epidemic was laid out in a 1949 speech Hammon made at the annual meeting of the American Academy of Pediatrics. “Hammon based his reasoning that antibody was protective against polio on his post-war research in the Pacific Island of Guam,” writes Rinaldo. “He noted that the last reported outbreak of poliomyelitis in Guam was in 1899.

An outbreak of poliomyelitis in 1948 on the island was restricted to Americans. He found that serum from indigenous Guamanians had neutralizing antibodies to poliovirus. He reasoned that this immunity was due to natural infection with viruses that persisted in Guam, and was protecting the children from developing the disease.”

Hammon developed a hypothesis involving passive immunization to temporarily prevent infection through the administration of gamma globulin shots in the early phase of an outbreak. The role of antibodies in immunity to poliovirus was still uncertain. Hammon’s supposition was that while passive immunity would not prevent infection, it would prevent clinical disease and could possibly confer long-lasting immunity such as he found in the children in Guam. Hammon made his case and in 1951 began the first field trial of 5,000 children to test his theory. His study would eventually provide the first evidence that antibodies to poliovirus could prevent the disease in humans.

“The placebo-controlled clinical trial was new to the field, and this particular one where he used the gamma globulin for polio was very important to set the stage for Salk to use an inactivated virus vaccine to induce such antibodies, which then provided permanent protection instead of temporary protection,” says Rinaldo. “The scientific discipline of his approach stands as a major legacy. He was a true classic research scientist. He would not do a study without every single control in place and without the right numbers of individuals to give you the proper answers.”

Rinaldo notes that Hammon insisted on a one-to-one match of vaccine to placebo. “His study on passive immunity to poliovirus would be one of the first major

double blind, placebo-controlled clinical trials,” he writes. “Such trials are the standard today. Other important factors Hammon carefully addressed included the type of control inoculum (autoclaved Knox gelatin), source and dosage of gamma globulin from pretested Red Cross pools, public school locations to allow for large numbers of subjects, specific site of administration of the injections in the right buttock, utmost statistical rigor applied by Anthony Ciocco, Chairman of Biostatistics at the GSPH, a written informed consent, selection of a relatively restricted geographical area, approval by the local population and medical community, publicity and preparation of the clinics, and finally, follow-up studies.”

Hammon would mount three clinical trials between September 1951 and July 1952, enrolling and vaccinating an astounding 54,772 children with encouraging results. In the meantime, Salk was beginning his first clinical trial with the inactivated vaccine that would become the treatment of choice, until it was replaced in 1961 by Sabin’s live attenuated oral vaccine. Still, the gamma globulin field trials made a significant contribution in polio prevention, demonstrating, as Hammon wrote, “that a very low concentration of antibodies will protect man.”

For Rinaldo, as he followed Hammon’s story through journal articles, oral history, and even in the popular press, there was a “natural affinity” to his predecessor. “There were a lot of parallels with the polio story of the late 1940s and early 1950s to what I’ve seen in my career with HIV and AIDS,” he says. “I look to history to help me look to the future.”



L-R: Charles Rinaldo, Velpandi Ayyavoo, Simon Barratt-Boyes, and Phalguni Gupta

Four-Pronged Attack

GSPH Researchers Developing Novel Approaches for AIDS Vaccine

Velpandi Ayyavoo was a new graduate student in microbiology at India's Madurai Kamaraj University in 1985 when a visitor from the Centers for Disease Control and Prevention (CDC) gave a talk on HIV that would change the course of her career. "I was a bacteria person," says Ayyavoo, assistant professor of infectious diseases and microbiology (IDM). "The thing that really caught my attention was how very small the virus genome is compared to other viruses. It was so small, but it makes this devastating amount of damage."

These days, Ayyavoo is trying to mitigate the damage the nine-gene HIV

virus can inflict on humans by developing a DNA-based vaccine. She is one of four IDM investigators testing novel approaches in the race to create an effective AIDS vaccine.

Ayyavoo is focused on the use of accessory genes as part of the vaccine component. In earlier research she explored the role of the smaller accessory genes at a time when more attention was focused on understanding HIV's major structural genes. The accessory genes were once considered to be less important because, in cell culture, they didn't seem to affect virus replication. "But the virus is so small," she says. "It's not

going to carry something which is not of any use." Today, thanks to Ayyavoo and others, more is known about the role that accessory genes play in suppressing the host immune system so that the virus can establish itself and replicate. Now part of her challenge is to modify the accessory genes so that they are no longer immunosuppressive. "That's the innovative part," she says, "working with these accessory genes that are naturally immunosuppressors and turning them into immunogens."

Ayyavoo's research is funded through the National Institutes of Health (NIH).

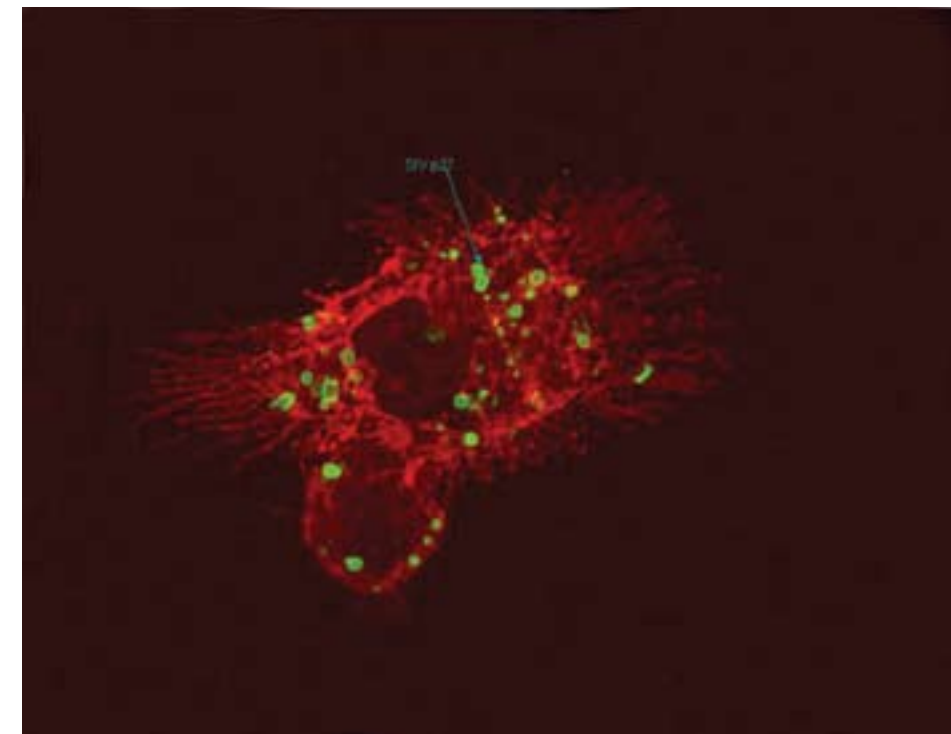
Bacterial Approach

For the past 10 years, Phalguni Gupta, assistant chair and professor of IDM, has been working on the bacterial and viral pathogenesis and sexual transmission of HIV. "Drugs are cutting mortality and people are living longer—but for third world countries these drugs are not an option. The vaccine is the way to go," he says. "For me, it's even more compelling because the vaccine will be used in endemic areas. In India, the number of people with HIV already is 4.5 million."

Unlike many experimental approaches to an AIDS vaccine, which are intended to produce a systemic immunization in the blood, Gupta's strategy takes a reverse tactic. "Since the virus infection spreads from the mucosal surface of the genital tract or gastrointestinal surface to regional lymph nodes," says Gupta, "the best vaccine would be the one that can restrict the virus at the port of entry. My approach is to make a vaccine whose primary job is to induce mucosal immunity."

The vehicle for Gupta's vaccine is a bacteria, *Clostridia perfringens*, normally found in the intestines. A small percentage of *C. perfringens* produces an enterotoxin, cpe, which, if ingested via contaminated food can cause mild food poisoning. For the vaccine, the cytotoxic portion of the cpe gene is replaced with the HIV gene, but the gene promoter is left intact. The result is a vector that expresses high levels of HIV in the inclusion body of the gene's cytoplasm. "The beauty of this," Gupta says, "is that when this clostridium is ingested, it will not be digested by acids because it is protected in this inclusion body. It will be delivered to the small intestine where the dendritic cells will pick up the antigen and induce a virus-specific mucosal immune response."

Gupta touts this bacteria-based vaccine as an attractive model: "It holds great promise for a practical vaccine against



Phalguni Gupta's Research

HIV due to its safety, low cost, and easy administration."

For this project, Gupta is principal investigator on a grant funded through the American Foundation for AIDS Research (amfAR). His collaborators are Yue Chen, IDM research assistant professor, and Bruce McClane, professor of molecular genetics and biochemistry in the School of Medicine.

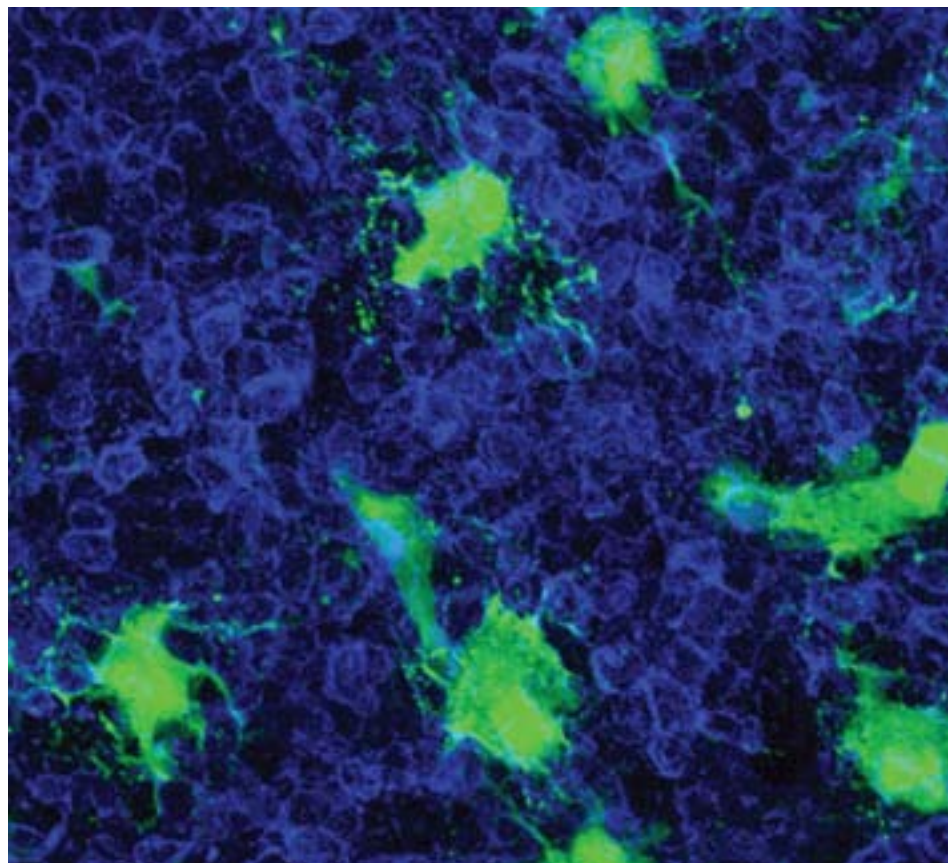
Adenoviral Vector

"I started from an immunologic standpoint," says Simon Barratt-Boyes, assistant professor of IDM, "where we were looking at the function of dendritic cells." Dendritic cells are important in stimulating immune responses. In fact, they're essential for taking a virus and processing it into peptides, and then presenting them to T-cells. But there's a catch—they're very rare, occurring at a concentration of .1 percent in the blood. "In the mid-'90s, people found that if they took blood cells and cultured them

with certain growth factors, they could generate this dendritic cell in culture and get reasonable numbers of them," says Barratt-Boyes. That technique stirred interest in using dendritic cells with a viral system to boost an immune response. In Barratt-Boyes' case, because he is a veterinarian by training, he's working with SIV, the simian cousin of HIV.

Barratt-Boyes works with the adenovirus—the virus that causes the common cold and can infect a wide range of cells. Barratt-Boyes inactivates the virus so that it can't replicate and engineers it to contain a foreign gene—in this case the Gag (group antigen) gene, which is an important SIV structural gene. As with the other vaccine designs, the idea is to acquaint the immune system with an antigen so that the body recognizes it and can mount a response.

"What's different from what we're doing is the use of a viral vector to put genes into cells," says Barratt-Boyes. "A lot



Simon Barratt-Boyes' Research

of people have been putting protein components into cells or peptides on the surface. We've thought that if you used a virus, you could get expression of a full component of proteins and genes in the cell without having to manufacture them as protein, which is a bit more difficult. If you start breaking things down into peptides, then you limit the amount of antigen that the cell is presenting. So by making the gene right in the cell, you allow the cell to express the full protein and decide which regions of it are going to induce an immune response."

Barratt-Boyes' research is funded through the NIH.

Apoptotic Cell-Based Model

Charles Rinaldo, professor and chair of IDM, is developing a vaccine that works as a partner to antiviral drug

therapy. "I'm mostly interested in an immunotherapeutic vaccine to enhance immunity in a person who already has the virus," Rinaldo says. "We know now with the new antiviral drugs that you can control HIV infection much better. That's been the miracle of the past decade. But the virus is still there. When you go off the drugs, usually due to their toxicity, it roars right back within a few weeks and starts the disease progression again." The HIV virus is so deadly because it suppresses the host's immunity. Antiviral drugs alone cannot eradicate the virus. Nor can the patient's immune system. "We hope that we can manipulate the immune system to be a better partner in this scheme," says Rinaldo.

Like Barratt-Boyes, Rinaldo is intrigued with the idea of a dendritic cell booster. In his approach, dendritic cells in a test

tube are fed apoptotic (dying) cells, which have been infected with the patient's own virus. The dendritic cells engulf and digest the apoptotic cells. Rinaldo calls this a "designer" vaccine, using an autologous virus rather than a common lab strain. The theory is that when the dendritic cells are injected back into the patient, they will turn on the T-cells and enable them to kill virus-infected cells more efficiently.

Rinaldo believes that this approach is a "supercharged" version of what Mother Nature does. "This gives us a broader range of targets for the immune system to recognize," he says. "The apoptotic cells have all the proteins the virus makes, not just what you find in the virus particle. This gives us even more forms of antigen, more forms of the virus that the body can recognize, by using this infected dead cell."

Rinaldo is principal investigator on an NIH program project grant. Ayyavoo (collaborating with Louis Faló, professor and chair of dermatology) and Barratt-Boyes (collaborating with Andrea Gambotto, assistant professor of surgery and medicine) are leading related projects in the grant. A phase 1 clinical trial is also under way by Rinaldo in collaboration with Sharon Riddler, assistant professor of medicine and IDM; Nancy Connolly, fellow in medicine; and Theresa Whiteside, professor of pathology. The trial studies how dendritic cells engineered with pieces of virus protein are tolerated by HIV-infected patients. This is a prelude to a clinical trial using dendritic cells fed with HIV-infected apoptotic cells.

"Any vaccine has distinct advantages and disadvantages," says Rinaldo. "We're taking several approaches because we're not sure which one is going to be best. The collaborative approach at Pitt—the ability of all of us to use each other's expertise and resources to help each other—has been a tremendous advantage."

Newly Elected Officers Lead Alumni Society

William T. Green Jr. (MPH '01) is becoming a familiar face in GSPH halls. In his first months as president of the GSPH Alumni Society, Green paid visits to department chairs and leaders of centers to ask them this question: How can the Alumni Society be of service to you? "Then I listened," he says.

Green was elected president under by-laws newly ratified on June 19, 2003, at the Alumni Society's annual meeting. He replaces Immediate Past President Michael D. Shankle (MPH '96), director of Internet communications and outreach and a youth HIV/AIDS prevention research specialist in the Department of Infectious Diseases and Microbiology. The full executive committee slate includes: Interim Vice President and Member-at-Large Rosemarie G. Ramos (MPH '03), graduate student researcher in the Department of Environmental and Occupational Health; Secretary/Treasurer Linda M. Fowler (DrPH '97), administrator for long-term care at the Charles M. Morris Nursing and Rehabilitation Center of the Jewish Association on Aging; Corresponding Secretary Kristi M. Riccio (MPH '02), research assistant in the Department of Behavioral and Community Health Sciences; and Member-at-Large Monisha Tarneja (MPH '00), project director, UPMC/Western Psychiatric Institute and Clinic.

A professor emeritus of orthopaedic surgery at the University of Pittsburgh School of Medicine, Green graduated from Harvard Medical School in 1960. In the late 1960s, he spent two years at the National Institute of Arthritis and Metabolic Diseases, where his research

on the growth of articular cartilage cells and tissue helped to lay a foundation for today's field of tissue engineering. At that time, he was a senior surgeon in the U.S. Public Health Service. (His current rank is medical director.) Green joined Pitt's medical school faculty in 1970. From 1977 to 1992, he was director of the Department of Physical Medicine at Children's Hospital of Pittsburgh (CHP), also serving from 1979 to 1989 as director of CHP's Department of Orthopaedics. In 1988, Green's interest in the pressure of rising costs on health-care delivery led him to the executive Master of Business Administration program at Pitt's Joseph M. Katz Graduate School of Business. In 1997, Green retired from orthopaedic surgery. That was the same year that he enrolled as an MPH student. "I decided that rather than retire from something," he says, "I would retire to something."

Green is well suited for his role as GSPH Alumni Society president. Chronically curious, he says he enjoys learning about things: "I think the easiest way to learn about something is to get involved." He's held most of the lay positions in the Episcopal Diocese of Pittsburgh, he says. He's been active in the Eastern Orthopaedic Association, the American Academy of Orthopaedic Surgeons, the Pennsylvania Orthopaedic Society, Allegheny County Medical Society, and the Tissue Engineering Society International. Green actively supported his wife Dorothy when she was president of the Pittsburgh chapter of the Organization of Chinese Americans. She returns the favor, accompanying him to meetings of the GSPH Alumni Society.



GSPH Alumni Society President Bill Green accepts the GSPH banner awarded by the Pitt Alumni Association in recognition of the society's recent achievements in a number of areas, including communication, membership, and programs.

Green has been working to implement new by-laws, including defining the roles of the various executive positions as well as meeting with people who have expressed an interest in being involved with the society. Last May, the society was awarded banner status by the University of Pittsburgh Alumni Association. Green intends to "keep the banner going" by meeting the standards for involvement set by the alumni association. Finally, he hopes to improve communications to, from, and among alumni.

"We hope that alumni would become involved, and we hope that they would let us know how we can do things for them," he says. "It's a two-way relationship."

IDM Professor Studies Genetics of Malaria in Western Kenya

A National Institutes of Health-funded research grant on the genetic and immunological basis of malaria and HIV/malaria co-infection in children up to 3 years of age is translating into better clinical care for some malaria-infected children in western Kenya. Douglas J. Perkins, assistant professor of infectious diseases and microbiology, heads the Severe Malarial Anemia (SMA) Project, with laboratories located in Kisumu and Siaya, Kenya, and at GSPH. Severe malarial anemia is one of the leading causes of death among children world wide, and particularly in young children in western Kenya.

The project is a collaboration between Perkins' group at GSPH and the Kenya Medical Research Institute (KEMRI) with a field station just outside the city of Kisumu, on the eastern shores of Lake Victoria. Perkins' group has also built a state-of-the-art lab behind the pediatrics wing of the Siaya District Hospital, located in the countryside approximately 75 minutes away from Kisumu.

The Siaya region has one of the highest rates of malaria transmission in the world. With equatorial temperatures and seasonal rains, conditions are prime there for mosquitoes. But the rural district is one of the poorest regions in Kenya. Mosquito control measures are limited. Insecticide spraying, at best, occurs at the level of individual households where someone buys a can of insecticide. Insecticide-sprayed bed netting, which could lessen the chance of being bitten by an infected mosquito during the night, is too expensive for most people in the economically depressed region. For some, the choice is between buying insecticide and being able to put food on the table.



Perkins, right, and John Michael Ong'echa, the on-site supervisor for the Severe Malarial Anemia Project, at a field station in Kenya.

Participants in the SMA Project are given a mosquito net for taking part in the research study.

It's a given in this area that every child gets malaria—often at a very young age. “One of the things that has been written in textbooks for a long time about malaria is that the mother imparts some immunity to the child, so that the child is protected against malaria for the first six months of life,” says Perkins. “And we're simply

not seeing that at all.” Studies from an area adjacent to Siaya show a peak distribution of malaria between three months and 18 months of age. One of the grimmest statistics is a childhood mortality rate from malaria of 20–22 percent. “The number of malaria deaths and HIV/malaria co-infected deaths is probably even higher than the numbers suggest,” Perkins says, “because many people do not make it to the hospital and their children die at home.”



Lab employees study the genetic and immunological basis of malaria and HIV/malaria co-infection in children in western Kenya as part of Perkins' Severe Malarial Anemia (SMA) Project.

Even for the children who do make it to the hospital, appropriate treatment can be limited by the lack of equipment and supplies. “The state of things when we arrived was complete chaos and disarray,” says Perkins. “Children would come in, and we could not get a hemoglobin measure taken to even find out if they were anemic.” Children with severe anemia present with respiratory distress; protocol calls for a blood transfusion. “But there's a very big shortage of blood,” he says. “In order to have enough blood, it requires an organized, orchestrated event. They do have blood drives there, but they're relatively infrequent. The blood for the hospital where we work is acquired from the city of Kisumu. And there are just simple organizational issues such as someone was supposed to pick up the blood but there wasn't a vehicle. Another issue is a high rate of HIV infectivity. There are so many children that need to be transfused that there's simply not enough blood.”

The Siaya District Hospital serves a rural population of 1.1 million people. Its pediatric ward has room for 43 children—although in peak malaria season as many as 30 to 40 children a day are admitted. It's a busy hospital—overburdened and poorly equipped. The roof over the one-story pediatrics ward was falling off. During tropical rains the ward

would flood. “There was no ceiling; the toilets didn't flush; the water didn't run,” says Perkins. So they fixed the roof, painted the ceiling and walls, and installed a clean source of water and proper sanitation. “Before we could enroll any of the patients, we had to improve the infrastructure, train the staff, and get all of the equipment in place.”

The natural history of malaria in holoendemic areas, Perkins says, is that children who survive the repeated infections begin to develop some immunity. “If every child gets malaria, it's disappointing that 20 percent die,” he says. “But you could look at it the other way—80 percent live. What's the difference between those two groups?” He believes that the acquisition of immunity is rooted in genetics. “We're trying to identify the specific genes and the way those genes look in individuals that are dying from the disease versus those that are acquiring immunity and being healthy. What we're finding out is that there are some important polymorphisms in some of the immune response genes that seem to regulate disease severity.”

Perkins' Siaya lab is equipped to run clinical diagnostic tests. “If you want to understand the genetic underpinnings of the disease, you need a well characterized population—a good phenotype, if you will,” says Perkins. “One of the

arguments we've made is that if we are going to study the genetics of malaria, we need to do a good clinical work-up on all these children.” Now when a child with malaria comes to the Siaya District Hospital, hematological work-ups are done. After the child has been treated and released, they are visited in 14 days to make sure they have cleared their infection. “A lot of these kids would die after they left the hospital, probably from undiagnosed bacteremia. Since there was no blood culture available, no one realized they also had bacteremia. And they would go home and die.” Under Perkins' project, all children receive a blood culture, and if they have not recovered after the initial course of treatment, they're seen again every seven days until they improve.

“The people here are very poor. They, in fact, have greater expectations than we can deliver, which is disappointing,” says Perkins. “But we have made a lot of positive changes. And we've done that under the context of a research study. We've combined research with humanitarian efforts to try to improve the environment.”



The newly renovated pediatric ward at Siaya District Hospital in Siaya, Kenya.

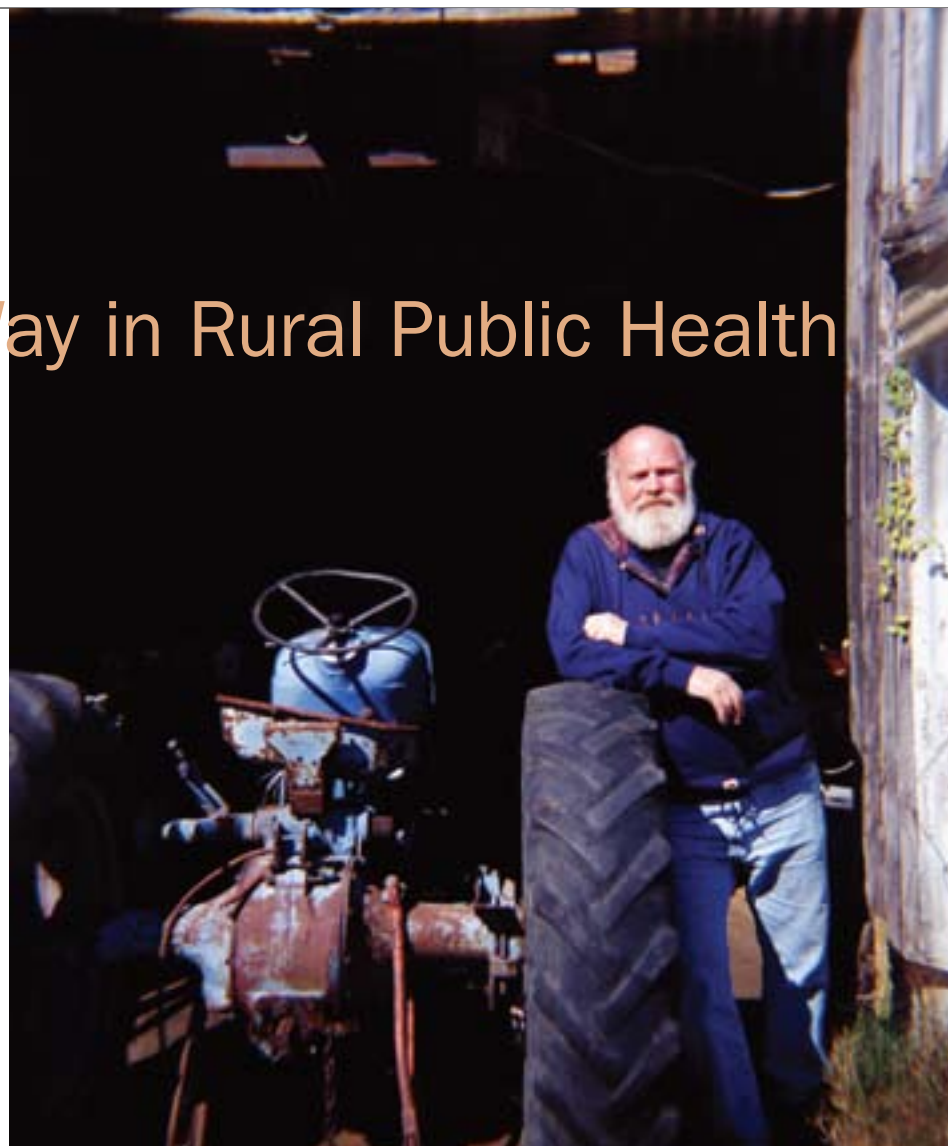
Leading the Way in Rural Public Health

In bimonthly conference calls, the members of the rural interest subgroup of the Health Resources and Services Administration's Public Health Training Centers (PHTC) began talking about what was missing. Much attention had been focused on access to care for rural populations, but often to the exclusion of broader public health initiatives. "Very few people were looking at things like disease surveillance, for example, or health education in rural areas," says Michael B. Meit, director of the University of Pittsburgh Center for Rural Health Practice (CRHP). "These are things that we do well in public health but really haven't applied to that specific population."

That may change. Last September, CRHP hosted a two-day Rural Public Health Research Agenda Meeting in Pittsburgh. More than 60 invited public health researchers, national organization representatives, and practitioners from as far away as Hawaii gathered to identify and articulate areas of public health research that can influence policy and practice and impact the health of rural populations.

"We need to ensure that people recognize there is a problem so that the resources necessary to deal with the problem will be targeted toward that effort," said GSPH Dean Bernard D. Goldstein. "Our hope is that policy makers and funders will incorporate the difference between rural and urban populations alongside gender and ethnicity when studying ways to promote healthy lives."

Prior to the meeting, the PHTC rural interest group designated six areas important for research: workforce development and competency enhancement; rural public health preparedness; rural public health infrastructure; access to care and safety-net support; environmental health issues; and rural health disparities. "Then we identified people



with an interest and expertise in each of those areas to develop working papers to get the ball rolling prior to the meeting," says Meit.

Two keynote addresses were presented at the meeting. Shawna L. Mercer, senior service fellow at the Centers for Disease Control and Prevention, delivered a speech the first day titled "Participatory Action Research in Rural Settings." On the second day, Larry Gamm, professor of health policy and management, Texas A&M University School of Rural Public Health, addressed the group on "Rural Healthy People 2010."

In breakout sessions, participants discussed and refined the working papers in their areas of interest. "We've taken all of the input from the meeting and

edited the papers," says Meit. The six papers will be published in 2004 in a booklet to be distributed to schools of public health, government agencies, private foundations, and other institutions as a way of stimulating research. "We intend to produce a high quality document in a timely manner," says Meit. "This was a huge event for us—a major national event in which we were the lead organization. For a young center, it's important to have these types of successes. We are quite proud of this effort."

GSPH's Center for Rural Health Practice was established in 2002 to identify health issues that impact rural communities and connect University of Pittsburgh colleges and schools to rural health practice and resources. It is located at the University of Pittsburgh at Bradford.

HPI's Governance Briefings Offer Unique Opportunity to Region's Hospital Trustees and Executives

"There is not one hospital board in the United States that does not 'mean well,' " guest speaker Kenneth Kaufman told the audience of hospital trustees, health-care and foundation executives, and University faculty at last September's Health Policy Institute's (HPI) Governance Briefing. "However, there is a big gap between 'meaning well' and 'doing well,' which needs to be bridged. Hospitals and their boards can only do well if they have a certain level of competence and capability." Kaufman, managing partner of KaufmanHall, a firm providing strategic financial advisory services to healthcare organizations, went on to discuss the responsibility of the board concerning capital formation.

Kaufman's talk was just what HPI's Advisory Council had in mind six years ago when it recognized a need for continuing governance education for the leaders of regional healthcare organizations who are facing increasingly complex challenges. "The HPI Governance Briefings fill an important niche," says Dee Delaney, who is a frequent attendee at the briefings. Delaney is executive director of the FISA Foundation and a member of HPI's Advisory Council. "Hospital trustees who attend gain an increased awareness of the significance of their fiduciary responsibility. This is especially important in this era when both for-profit and nonprofit organizations are undergoing greater scrutiny."

HPI brings in local and national speakers to discuss the critical responsibilities of hospital trustees, including strategic planning, fiscal and quality oversight, hiring and evaluating the chief executive officer, self-assessment, and the selection of future members. "Our first purpose is to provide the education," says Samuel A. Friede, manager of the Governance Initiative and visiting assistant professor of health policy and management. "There are no other such forums in this community where trustees and executives can interact on a regular basis. We have arranged the meeting room in a very congenial fashion. People have a chance to grab a bite to eat and interact. Our Advisory Council saw not only the need for education but also a need for dialogue among organization leaders."

In addition to informal socializing, some of the dialogue also takes place during the hearty Q&A session that follows the presentation. "I can tell you they do ask good questions," says David Hunter, former CEO of the Hunter Group, a performance improvement and interim management company for hospitals and health systems in St. Petersburg, Fla. Hunter, a 1969 GSPH hospital administration alum and member of the national advisory committee for the Department of Health Policy and Management, has been a speaker at Governance Briefings twice, most recently on October 10, 2003, when he discussed "The Board's Role in Organizational Success."

"And it's not just questions and answers," Hunter says. "There's some debate going on there—people making their points, agreeing or disagreeing, pushing the speakers on what they're talking about. The program is a repository of knowledge. It provides an important and valuable service for the healthcare executives and board members in your region."

The Governance Briefings are held six times a year at the University Club. They are free, thanks to the generosity of Health Policy Institute's funders. Attendance is limited to facilitate discussion and interaction. To register, contact Friede at 412-624-6104, or download a registration form at www.healthpolicyinstitute.pitt.edu/2004governance.html.



New Scholarship Fund Honors Edgar Duncan's Distinguished Career

The jazzy beat of the Roger Barbour Jazz Quartet reverberated through the Twentieth Century Club on October 28, 2003, as a crowd beyond anyone's reckoning poured through the double doors of the ballroom. But it wasn't good music or the promise of food, drink, and dancing that drew the crowd of more than 250. They were there for a single purpose—to celebrate the distinguished career of Edgar Duncan.

Surrounded by family, friends, and colleagues, Duncan and his wife Lauraine quietly and modestly looked on as Dean Bernard D. Goldstein; Philip Hallen, president emeritus of the Maurice Falk Medical Fund; and Loren Roth, associate senior vice chancellor of the health sciences, showered praise upon Duncan for his more than 20 years of service to the Graduate School of Public Health and for his amazing career of firsts.

"If something is going to change, someone has to do it first," Duncan has said. And do it first he has, throughout his 71 years.

Duncan graduated as the first African American valedictorian at Monessen High School in 1950. He then attended Duquesne University, from which he graduated magna cum laude as the first African American graduate from Duquesne's pharmacy program. He followed this accomplishment by becoming the first African American graduate of GSPH. He served several years in the U.S. Public Health Service's (USPHS) Commissioned Officers Corps, the first African American pharmacist in that role, and in so doing became the first African American chief pharmacist at a USPHS hospital. In 1972, he ascended to the rank of assistant U.S. surgeon general, the first pharmacist promoted to the post. He eventually returned to Pittsburgh, where he joined GSPH in 1982. He was the first GSPH graduate



Surrounded by family, the Duncans commemorate Edgar's distinguished career with friends and colleagues at a celebration in October.

to serve in the school's senior administration, and he did so in such positions as associate dean for academic affairs and interim director of the Center for Minority Health. He started and directed the Public Health Career Opportunity Program for minority and disadvantaged students at Pitt, and he went on to earn a PhD in higher education administration from Pitt in 1990.

Most recently, at age 71, Duncan directed Pitt's Partners in Education Consortium, a four-year-old program for middle school, high school, and college students aimed at increasing the numbers of underrepresented minorities in the health sciences.

The celebration honoring Duncan served not only to recognize his many personal and professional achievements, but also to launch the Dr. Edgar & Lauraine Duncan Endowed Fund for Student Resources. This fund will offer permanent financial support to deserving GSPH master's or doctoral students who have demonstrated need, with priority given to the disadvantaged.

"It's with great pleasure that we begin this fund in honor of a man who has contributed so much to society and to GSPH," Dean Goldstein said.

Duncan credits his wife of 49 years with raising their three sons and sending them to Harvard, Dartmouth, and Yale, where they have earned a combined seven postsecondary degrees. "My wife has been with me through all of the trials and successes," Duncan said, "so I thought [the fund] should also bear her name."

To make a contribution to the Duncan fund, send your check payable to the University of Pittsburgh—Duncan Fund to:

University of Pittsburgh
Graduate School of Public Health
Karen Crenshaw
Director of Development
A661 Crabtree Hall
130 DeSoto Street
Pittsburgh, PA 15261

To make a gift by credit card, or with any questions, please call 412-624-5639 or e-mail crenshaw@pitt.edu.

Center Launches Yearlong Celebration of 'A Decade of Minority Health'

At a black-tie gala in January, the Center for Minority Health launched a yearlong celebration of its 10th anniversary and "A Decade of Minority Health." In addition to serving as a springboard for events and activities throughout the year, the event accomplished several significant objectives. For starters, six honorees were recognized for their dedication to the elimination of racial and ethnic disparities in health. Honorees included George Board, vice president of the Division of Community Health Services for UPMC; Philip Hallen, president emeritus of the Maurice Falk Medical Fund; Julius Jones, retired president and CEO of the YMCA of Pittsburgh; Donald Mattison, senior advisor to the directors of the National Institute of Child Health and Human Development and the Center for Research for Mothers and Children, and former GSPH dean; Michael Watson, representing the Richard King Mellon Foundation; and Nancy D. Washington, retired assistant to the chancellor of the University of Pittsburgh.

The gala also recognized the impressive range of support received since the center's establishment in 1994, including the award of \$6 million from the National Institutes of Health designating the center as a Center of Excellence in Partnerships, Outreach, Research, and Training, as well as funding from:

University of Pittsburgh
The Pittsburgh Foundation
The Heinz Endowments
DSF Charitable Foundation
Staunton Farm Foundation
POISE Foundation
Pennsylvania Department of Health
Highmark Blue Cross Blue Shield
Gateway Health Plan
Pfizer Pharmaceuticals
Judith L. Davenport



Honorees (L-R) Michael Watson, Donald Mattison, George Board, Nancy D. Washington, and Philip Hallen, with CMH Director Stephen Thomas

The center also used this occasion to announce a \$10 million campaign to catapult the center into the future and to ensure a sound fiscal foundation to continue the public health education campaign designed to eliminate racial and ethnic health disparities by the year 2010. "Ten years ago a seed was planted, and tonight we take pleasure to honor the people who nourished the soil with hope and resources in the belief that a Center for Minority Health could make a meaningful contribution toward the goal of diversity and the promotion of health and prevention of disease for all citizens in the commonwealth," said Stephen B. Thomas, CMH director and Philip Hallen Professor of Community Health and Social Justice.

The gala is just one of a host of events planned for the upcoming year to celebrate the center's 10th anniversary. Other events include a celebration of National Minority Health Month (April), which will involve several



Pediatric Surgeon Ed Barksdale and Kecia Graham

community-based health promotion activities focused on the seven health disparity priority areas (infant mortality, cancer, heart disease, HIV/AIDS, diabetes, immunization, and mental health). Additionally, April 7 has been designated the Center for Minority Health Night at the Pittsburgh Pirates game.

Profile



Baker with chef Art "Mr. Food" Ginsburg

Here She Comes, Miss America ...

Before she married WTAE-TV news anchor Scott Baker last August, Nicole Johnson Baker had him spend a day wearing an insulin pump so he would understand a little of her day-to-day experience as a diabetic. That's what happens when you marry a crusader.

Baker, a former Miss America who has traveled the world as a spokesperson for diabetes issues, is in her first year as a student in the Department of Behavioral and Community Health Sciences. While graduate school keeps her busy, Baker continues to maintain an impressive professional life as a public speaker and lobbyist. In addition, she is co-author of two cookbooks published by the American Diabetes Association: *Mr. Food's Quick & Easy Diabetic Cooking* and *Mr. Food Every Day's a Holiday Diabetic Cookbook*. In 2001 she published her autobiography, *Living with Diabetes*.

Baker was 19 years old—with a blood sugar so high she was on the verge of slipping into a coma—when she was finally diagnosed with type 1 diabetes. "I had all the common signs and symptoms of diabetes—excessive fatigue, unquenchable thirst, frequent urination, moodiness, blurry vision, and a dramatic change in weight that was unexplainable," she says. "A middle-class American family should have a working knowledge of all major chronic conditions. Yet we didn't, and I almost died as a result of it. It's a testimony to the work we have to do in public health."

The diagnosis was devastating for Baker at the time. "One of the things I say to folks when I'm speaking is that those feelings of devastation are normal," she says. "Almost 11 years later, I still have days when I wake up and, no matter what I do, I can't get it right. My blood sugar's not cooperating and I'm blue and down and slip into the 'why me' syndrome. I guess that's the human side of it."

Baker credits her participation in the Miss America program for bringing her to terms with her disease. Through the community service component of the competition, she began to promote diabetes awareness and slowly learned to talk about her own struggles. "What people don't realize is that I started out at 18 being incredibly shy—too shy to enroll in speech class," she says. "Miss America gave me an outlet where I learned to present my thoughts and ideas. That helped me to come to terms with living with the disease."

Learning to live with diabetes may have been Baker's biggest challenge, but it's also been the biggest lesson, shaping the course and direction of her life. "Everyone has a challenge," she says. "Everyone has an obstacle. And you have a choice in how you face it."

Bernard Fisher Presents 2003 Thomas Parran Lecture

Bernard Fisher, distinguished service professor at the University of Pittsburgh School of Medicine, offered an engaging speech to a packed audience in the GSPH auditorium on October 31, 2003. The occasion was the 2003 Thomas Parran Lecture. In his talk, titled "Forty Years of Breast Cancer Research: Footprints and Thoughts from the Journey," Fisher offered a thoughtful exploration of his contributions to the management of breast cancer against the social and political challenges he faced. "Science doesn't exist isolated in the universe," he pointed out, quoting NOVA executive producer Paula Apsell. "Science is a human enterprise; it's a product of human beings bounded by cultural, religious, social, and economic contexts."

As a young surgeon and researcher, Fisher left "footprints" in the areas of liver regeneration, physiology of hypothermia, and tumor immunology. He was also involved early on in kidney transplantation, performing almost 100 kidney transplants in the 1960s. But it was an invitation in October 1957 to attend a meeting in Washington, D.C., that would give definitive shape to his career. The meeting was called to discuss the possibility of testing a novel approach in breast cancer treatment with a national clinical trial. This clinical trial would later give rise to the National Surgical Adjuvant Breast and Bowel Project (NSABP), which to date has enrolled more than 60,000 men and women in breast and colorectal clinical trials at more than 200 research sites and has led the way in changing how breast cancer is treated and prevented.

"When I went home and thought about this trial, there were two things that attracted my attention," said Fisher,



Dean Bernard D. Goldstein, left, thanks Bernard Fisher, cofounder and former chair of the National Surgical Adjuvant Breast and Bowel Project (NSABP), for delivering the 2003 Parran Lecture in October.

cofounder and former chair of NSABP. "First of all, they were talking about tumor metastases, and not very many people had much knowledge about the phenomenon. And secondly, they were talking about clinical trials. Those two things have really dictated the course of my life since that time."

"Dr. Fisher is not only highly respected here at the University of Pittsburgh, but internationally for his work on breast cancer research and with the NSABP," said GSPH Dean Bernard D. Goldstein. "He has profoundly influenced the research taking place at GSPH and

the University, and has undoubtedly impacted the careers of many of our faculty. Hosting a speaker of his caliber is a fitting tribute to the lecture series' namesake, Dr. Thomas Parran, who was one of the preeminent public health practitioners of his time."

The Thomas Parran Lecture was first given in 1963 to honor GSPH's founding dean. Parran, U.S. Surgeon General from 1936 to 1948, was known for his work in syphilis control and for his leadership in international health affairs. He was named GSPH's dean in 1948.

News

DSF Charitable Foundation Funds Two-Year Grant to Center for Minority Health

In November 2003, the DSF Charitable Foundation approved a grant of \$200,000 over two years to support implementation of the church-based component of the Center for Minority Health's Lay Health Advisor Program. In announcing the award, DSF Executive Director J. Nicholas Beldecos stated that it is the foundation's

hope that the initiative, as part of CMH's Black Family Health Project, would not only benefit local communities, but will "... serve as a replicable model of excellence in community-based health promotion that will benefit the nation." CMH Director Stephen B. Thomas expressed deep appreciation to the DSF Charitable Foundation's board for its generous gift and for its commitment to supporting minority health promotion and prevention.



John M. Arthur/Duquesne Light Fellowship Awarded

Aimin Zhang has received the John M. Arthur/Duquesne Light Company Fellowship, which includes a stipend of \$32,820 in support of his full-time position in the Occupational Medicine Residency Program in the Department of Environmental and Occupational Health (EOH). Established in 1989 by the Duquesne Light Co. in honor of its retired chair, John M. Arthur, the award supports a fellowship in radiation health at GSPH.

Zhang received his MPH from GSPH in April 2000. He also holds an MD from Xuzhou Medical College, Xuzhou, Jiangsu, People's Republic of China, and an MSc from Beijing University of Chinese Medicine and Pharmacy. He served as a visiting assistant professor in EOH prior to receiving this fellowship.

POISE Foundation supports Healthy Class of 2010 Program

The Center for Minority Health (CMH) announced receipt of a generous grant from the POISE Endowment Fund of the POISE Foundation. Funds will support the Healthy Class of 2010 initiative, a cooperative program with the Pittsburgh Public Schools, and will be used to purchase pedometers to enable tracking of program participant activity. Founded in 1980, the POISE Foundation develops and enhances the participation of African American philanthropists in the economic and social development of the Black community in the greater Pittsburgh region. This grant to CMH is part of the foundation's initiative to promote changes in and improve community health.



Lewis H. Kuller

Hershey Endowment Awarded to JD/MHA Student

The Department of Health Policy & Management has awarded JD/MHA student Mark Faccenda the Nathan Hershey Endowment Award for 2003-04. Faccenda received his bachelor's degree in biology from Pennsylvania State University in 1995, and he is scheduled to complete his JD and MHA degrees in 2005. He was the 2003 recipient of the Jonas Salk Health Fellowship, and he has served as a visiting scholar to the Pennsylvania House of Representatives, where he conducted legislative and economic research for members of the House and Senate through the Legislative Office for Research Liaison.

The Nathan Hershey Endowment in Health Administration enables gifted students of exceptional promise to pursue the field of health administration. It is awarded to an MHA student who has demonstrated merit in academic achievement and potential to contribute to the profession of healthcare administration and policy following graduation.

Three PhD Students Named Kuller Scholars

Following on the heels of the incredibly successful launch of the Lewis H. Kuller Scholarship Fund almost a year ago, which raised more than \$100,000 for deserving epidemiology students, the Department of Epidemiology has awarded the first Lewis H. Kuller Scholarships to three PhD students.

Kuller Scholar Vanisha Brown received a tuition and stipend award to support her doctoral study of physical activity epidemiology beginning in fall 2004. Brown earned her BS in health and physical education and her MPH in epidemiology and biostatistics, both from Florida A&M University.

Awards from the Kuller Fund were also given to Katherine Berger and Xiao Hui Xu for tuition and stipends. Berger will focus her studies on women's health epidemiology. She holds a BA in biology and chemistry from Whitman College in Walla Walla, Wash., and an MPH in epidemiology from Emory University. Xu earned a BMed in medicine from Zhejiang University and an MMed in environmental toxicology from Fudan University, both in the People's Republic of China. He is studying environmental epidemiology, chronic disease epidemiology, and molecular epidemiology.

Pitt and UPMC Form New Development Foundation

Pitt and UPMC have joined forces to create a unified fundraising organization. The University of Pittsburgh and UPMC Medical and Health Sciences Foundation will raise philanthropic funds on behalf of the University of Pittsburgh's schools of the health sciences and the medical center. Through the new foundation, donors will be offered options to support research or clinical care in a particular disease or treatment area, (i.e., cancer,

heart disease, diabetes, etc.) or for specific types of projects involving patient care, basic science, education, or capital development throughout the University and UPMC.



Clyde B. Jones III

Clyde B. Jones III has been appointed the chief development officer to lead the new organization. Jones, a native of Washington, Pa., served most recently as director of development for New York-Presbyterian Hospital and Weill Medical College of Cornell University. He is considered one of the leading fundraisers for academic medicine in the country, with 15 years of development experience, including annual campaigns, special events, major gifts, and corporate and foundation gifts.

"The University of Pittsburgh's schools of the health sciences combined with the clinical programs at UPMC present an exciting and unparalleled opportunity for development," says Jones. "Building support for the high quality clinical programs, medical research, and educational endeavors here is both a privilege and an exciting challenge."

Development activities at GSPH will continue to be handled by Karen Crenshaw, director of development. If you would like more information about the new foundation, or about giving to GSPH, please contact her at 412-624-5639 or crenshaw@pitt.edu.

Roundup

Check Out the Latest GSPH News

The University Center for Social and Urban Research (UCSUR) awarded Steven D. Manners Faculty Development Awards to six University faculty members, including **Pamela Peele**, Department of Health Policy & Management, and **Jeannette Trauth**, Department of Behavioral and Community Health Sciences. The annual awards are intended to support faculty members and their research and to improve the research infrastructure at the University. They were established in memory of UCSUR's assistant director, who died in September 2000.

A new interdisciplinary certificate program in emergency preparedness and disaster response will answer the nation's call to improve the infrastructure of public health. Housed jointly in the Departments of Environmental and Occupational Health and Behavioral and Community Health Sciences, as well as at the Center for Public Health Preparedness, the program draws on University and local resources, including the Allegheny County Health Department, the Biomedical Security Institute, the Pennsylvania Region 13 Metropolitan Medical Response System, and the Real-time Outbreak Disease Surveillance System.

Department of Behavioral and Community Health Sciences (BCHS)

Robert Goodman is the new chair of the Department of Behavioral and Community Health Sciences. Formerly the Usdin Family Professor in Community Health Sciences at Tulane University, Goodman is an internationally recognized social and behavioral scientist known for advancing the theoretical and conceptual understanding of community structures and processes as these become vehicles for public health interventions. He is a member of the

Institute of Medicine's Committee on Educating Public Health Professionals for the 21st Century, has served as editor-in-chief of the *American Journal of Health Promotion*, and was recently named to Who's Who in the Health Sciences.

At a special luncheon in October, the Caring Foundation awarded **Edmund Ricci** the 2003 Caring Acts of Kindness Award. This award is given to Caring Foundation partners who have made a long-term commitment to improving the lives of the region's children, adults, families, and communities. Ricci, the previous chair of BCHS, is working on a new program in evaluation research.

In recognition of her significant contributions to psychiatry, Professor Emerita **Elsie Broussard** has been named a Distinguished Life Fellow of the American Psychiatric Association (APA).



Karen Peterson poses with Ed Ricci at her retirement party in August.

On August 27, 2003, the GSPH community celebrated the career of **Karen Peterson**, who retired at the end of July after 31 years of service to GSPH and the University. Peterson most recently served as assistant professor, coordinator

of the MPH and DrPH programs, and associate chair of educational programs in BCHS. She also held a secondary appointment in the University's Women's Studies Program.

Department of Environmental and Occupational Health (EOH)

Meryl Karol was recently appointed to the Environmental Protection Agency (EPA) Science Advisory Board. Created to assist the EPA in its role of safeguarding public health and protecting the country's air, water, and land, the board is populated by a distinguished body of scientists, engineers, and economists who are recognized nongovernmental experts in their respective fields. The board was established by Congress to provide independent scientific and engineering advice to the EPA administrator on the technical basis for EPA regulations.

Aaron Barchowsky has joined EOH as an associate professor; he comes from Dartmouth Medical School. Barchowsky is well known for his work on the molecular mechanisms of metal toxicity and has provided insights into the signaling mechanisms stimulated by inhaled metal pollutants in vascular and respiratory tissue. His research will complement current areas of investigation on cardiopulmonary toxicology, free radical biochemistry, and metal toxicology.

Two prominent EOH faculty members retired after years of loyal service to GSPH. In November, faculty, students, and friends gathered at the Concordia Club in Oakland to celebrate the retirement of **Herbert Rosenkranz**, professor emeritus, former interim dean of GSPH (1998–2001), and former chair of EOH (1990–2000). Rosenkranz was the founder and director of the Center for Environmental and Occupational Health and

Toxicology, a collaborative effort between GSPH and UPMC. Retired Distinguished Professor of Environmental and Occupational Health **Bertram Dinman** was honored at a celebration in July when he stepped down from his professorship after more than 20 years with GSPH and the University.



The Dinmans celebrate Bertram Dinman's retirement from GSPH in July.

Department of Epidemiology

Governor Ed Rendell and Pennsylvania First Lady Judge Marjorie O. Rendell named **Katherine Detre** one of eight Distinguished Daughters of Pennsylvania. Detre was recognized with a medal and citation from the governor on October 22, 2003, at the governor's residence in Harrisburg. Candidates for distinguished daughter selection are nominated by organizations within the commonwealth in recognition of exceptional accomplishments of statewide or national importance.

A national multisite study will examine the long-term effects of bariatric surgery as a treatment for obesity. **Steven Belle** is principal investigator for the coordinating center of The Bariatric Surgery Clinical Research Consortium (BSCRC). Funded by a \$6 million grant from the National Institute of Diabetes and Digestive and Kidney Diseases, the study will facilitate clinical, behavioral, and epidemiological research in the field



Herbert Rosenkranz, right, talks with Arthur Levine, senior vice chancellor for the health sciences (left) and Chancellor Mark A. Nordenberg (center) at a celebration of Rosenkranz's retirement in November.

of bariatric surgery and establish a database of clinical information from adults who undergo these surgeries. Other GSPH investigators on the project include **Katherine Detre**, **Kevin Kip**, and **Faith Selzer**. Anita Courcoulas, director of bariatric surgery at UPMC Shadyside, is a co-investigator at the coordinating center, providing expertise in bariatric surgery. The BSCRC has additional clinical centers at the Mt. Sinai Medical Center, the University of Washington, East Carolina University, the University of California at Davis, and the Neuropsychiatric Research Institute of Fargo, N.D.

Steven Belle has been named a fellow of the Gerontological Society of America in recognition of his outstanding achievement and exemplary contributions to the field of gerontology.

GSPH has been chosen to participate in a high-level mentoring program through Women in High Places. **Janice Dorman** will head the Pitt initiative, which will focus on diabetes epidemiology research. This program is designed to encourage

women to bridge the gender gap in high-level science jobs. Other institutions selected include the Cleveland Clinic, Johns Hopkins Medical Institutions, Massachusetts Institute of Technology, the University of Texas MD Anderson Cancer Center, Smith College, Hampshire College, the University of Alberta, and the University of Minnesota.

Department of Health Policy & Management

Chyongchiou Jeng Lin is researching influenza vaccination programs as co-investigator of two Centers for Disease Control and Prevention-funded projects. The first will examine the cost and effectiveness of hospital-based standing order vaccination programs for both influenza and pneumococcal polysaccharide vaccines. The second will develop and implement interventions to vaccinate children 6–23 months of age against influenza in five inner-city neighborhood health centers serving disadvantaged populations.

Carol Stockman has been appointed research assistant professor with a secondary appointment in the Department of Behavioral and Community Health Sciences. Stockman is core faculty at the Center for Research on Health Care at the University of Pittsburgh. Her research interests are in the areas of patient preferences and decision making.

Pamela Peele and **Stockman**, assisted by MHA student **April Taylor**, conducted a workshop for the Math/Science Network titled Beautiful Minds as part of an Expanding Your Horizons in Science and Mathematics™ conference designed to nurture girls' interest in course work and careers in science and math. Geared toward girls in grades six through eight, Beautiful Minds explores game theory applications in everyday life. Participants engage in strategy games, discuss alternative strategies, think about how cheating affects

behavior, how coalitions are formed and destroyed, and how and why people play the lottery. They also learn the concept of risk aversion and are given concrete examples through the use of auctions. Peele and Stockman have conducted this workshop for two years.

Peele also codirects the Health Services Writing Project (HSWProj) with Cindy Bryce of the Department of Internal Medicine. HSWProj helps junior faculty place health services and policy-related research manuscripts in health and policy journals. The program includes bimonthly workshops focused on writing for a multidisciplinary audience and intensive workgroups focused on moving individuals' manuscripts to print in multidisciplinary peer-reviewed journals. HSWProj workshops are open to faculty throughout the University.

During the past year, the **MHA program** conducted an intensive self-study in preparation for its reaccreditation this past fall by the Accrediting Commission on Education for Health Services Administration (ACEHSA). The self-study report was submitted to ACEHSA in September, followed by the site visit in November. Chaired by S. Robert Hernandez, professor, Department of Health Services Administration, University of Alabama at Birmingham, the site team submitted to the program a very favorable draft report of its findings, conclusions, and recommendations. The final decision of the ACEHSA Board of Commissioners is anticipated in May.

Department of Human Genetics

Panagiotis (Takis) Benos has joined the Department of Human Genetics as an assistant professor. A native of Greece, Benos received both his bachelor's and his PhD from the University of Crete. He completed postdoctoral research fellowships at the European Bioinformatics Institute (EMBI) and at Washington

University in St. Louis. Benos' research interests include developing computer models for gene regulation and performing genome analysis, the computational study of the biological and chemical properties of DNA and protein molecules.

Department of Infectious Diseases and Microbiology

On April 1, the Pitt Men's Study will begin its 20th year studying the natural history of AIDS in gay men. Throughout 2004 the department will sponsor a variety of events to commemorate this pioneering study and its national parent study, the Multicenter AIDS Cohort Study. Look for event announcements in upcoming GSPH publications and on the GSPH Web site, www.public.health.pitt.edu.

Centers

The Pennsylvania Public Health Association (PPHA) presented the 2003 PPHA Award for academic public health to **Margaret A. Potter**, director of the **Center for Public Health Practice**. As a health policy analyst and teacher for 18 years, Potter is nationally recognized for her leadership and innovation in developing effective partnerships between public health practice and academics. A member of the four-person 1999–2000 Committee of the Council of Practice Coordinators of the Association of Schools of Public Health, Potter wrote "Demonstrating Excellence in Academic Public Health Practice," the definitive paper and touchstone for the developing field of academic public health practice.

Molly Eggleston, acting program manager of the **Center for Public Health Practice** and the **Pennsylvania and Ohio Public Health Training Center**, has been elected treasurer of PPHA for a one-year term.

Why do populations comprising low-literacy individuals lag behind social norms in cancer prevention? Visiting Professor **James Butler** at the **Center for Public Health Practice** intends to explore that question through a yearlong fellowship from the Cancer, Culture, and Literacy Institute at the H. Lee Moffitt Cancer Center & Research Institute. Butler aims to study the link between literacy and cancer risk factors and to develop effective clinical trial recruitment strategies. In January 2004, Butler, the 1994 Irvis Scholar, participated in a five-day hands-on intensive course at the Moffitt Cancer Center in Tampa, Fla.

Senior citizens around the region participated in the second annual Senior Citizen Talent Show, sponsored by the **Center for Healthy Aging**. The show, held at the Palisades in McKeesport on September 4, 2003, included musical performances, line dancing, poetry readings, and displays of artwork and crafts. The goal of this annual event, according to program director **Connie Bayles**, is to encourage seniors to remain active in the community, one of the keys to healthy aging.

On September 16, 2003, the **Center for Minority Health (CMH)**, directed by **Stephen Thomas**, turned the tables on national "Take a Loved One to the Doctor Day," by sponsoring "Take a Health Professional to the People Day." Volunteer physicians, nurses, health educators, dentists, pharmacists, and other health professionals provided a variety of health information and screenings throughout the day at nine barbershops and beauty salons around Pittsburgh designated as community partners for the Lay Health Advisor Training Program. As part of the event, CMH staff registered people to receive their personal "Passport to Health," a document developed in partnership with the Urban League of Pittsburgh, to give people tools to take control of their health.

CMH also participated this summer in the National Urban League (NUL) Health Pavilion at the David L. Lawrence Convention Center. The event was the largest health fair of its kind in Pittsburgh and in NUL conference history. The pavilion included some 50 exhibitors, including "Ask the Doctor" sessions with UPMC physicians and a replica of a barbershop and beauty salon demonstrating the Lay Health Advisor Training Program, to draw attention to the problem of health disparities in urban communities.

CMH kicked off the celebration of its 10th anniversary in January with the 2004 Minority Health Summit and gala. Read more about this kickoff and the center's plans to celebrate its 10th anniversary on page 17.

The **Pennsylvania/MidAtlantic AIDS Education Training Center**, directed by **Linda Frank**, sponsored Keeping It Real: Communities of Color Against the Stigmatization of HIV/AIDS, in October. The two-day conference focused on improving care for people who are more likely to face barriers to service for HIV/AIDS treatment and preventive care, or for those who are less likely to seek treatment at all. Estelle B. Richman, secretary of public welfare of the Commonwealth of Pennsylvania, delivered the keynote address. The National Minority AIDS Education and Training Center at Howard University cosponsored the event.



D.A. Henderson (center), is flanked by Tara O'Toole (left) and Thomas V. Inglesby (right) at a news conference in September announcing the new Pitt/UPMC Center for Biosecurity. UPMC President Jeffrey Romoff (far left) and Pitt Chancellor Mark A. Nordenberg (far right) also answered questions.

Leading Bioterrorism Advisor D.A. Henderson Joins GSPH Faculty as Part of New Center

In November, the world's leading center for biodefense research and analysis, the Center for Civilian Biodefense Strategies, moved to the University of Pittsburgh and UPMC, creating the Center for Biosecurity. The new center will have its headquarters in Baltimore, Md., with offices in Pittsburgh and Washington, D.C. It establishes UPMC and Pitt as international leaders in the rapidly expanding field of bioterrorism preparedness, research, and response.

The center's eight faculty members will hold appointments at both GSPH and the School of Medicine. The most celebrated member of the new center is its senior advisor, D.A. Henderson, known worldwide for his work in eradicating smallpox. More recently, he served from 2001 to 2003 as President George W. Bush's chief bioterrorism advisor. Henderson first became aware of the work being done in Pittsburgh when he accompanied the president on his visit to the University and UPMC in February 2002.

"We believe deeply that the bioterrorism threat is substantial, growing, and urgent," Henderson said. "UPMC is uniquely positioned to be a leader in biodefense because it is one of the most highly integrated major healthcare systems in the nation." Henderson went on to say that the breadth and integration of the UPMC hospital system makes it the ideal platform in the country upon which to design and test critical prototypes for medical and public health biopreparedness.

Two other internationally recognized faculty will lead the center: Tara O'Toole, a former assistant secretary at the U.S. Department of Energy, the center's chief executive officer, and Thomas V. Inglesby, chief operations officer.

This group has earned an international reputation for its biodefense work. Center faculty published the definitive papers on public health and medical management of the six major bioweapons-related diseases in the *Journal of the American Medical Association*. They also convened the first two national conferences on bioterrorism for medical and public health professionals and the highly regarded and influential Dark Winter exercise, a fictional scenario depicting a covert smallpox attack in the United States. They founded and edit the only peer-reviewed journal devoted to biodefense. Through their work with congressional and administration leadership, state governments, and academic and scientific organizations, the center's faculty played a major role in increasing federal funding for bioterrorism from \$8 million in 1998 to \$4.5 billion in 2003.

Left: Participants in the countywide bioterrorism drill.

Profile

Anthony C. Segreti

Early in his career at then-Burroughs Wellcome, Anthony C. Segreti (MSHyg '75) was project statistician for Zovirax, an antiviral drug for treating genital herpes, chicken pox, and shingles. "It was an amazing drug—very effective and safe," he says. "We used to kid that it was like mother's milk because you'd do a clinical trial and get a very small number of adverse experiences. The people on placebo had as many adverse experiences as the people on the drug."

Later, in the mid-1980s, Segreti would be involved as Burroughs Wellcome developed the breakthrough anti-HIV drug AZT. "I probably worked as hard then as any other time in my career," he says. "The results of the trial were dramatic. We knew that as soon as we could get the submission into the FDA, they were going to approve it."

Now group director of statistics and programming for GlaxoSmithKline (and survivor of the two mergers that created the pharmaceutical giant), Segreti oversees a staff of 60 statisticians devoted to late-phase drug development. He's never lost his sense of thrill when the raw data lands in his lap—especially from clinical trials that confirm the efficacy of a new drug:

"It's very exciting when the results are positive, and sometimes unexpectedly positive, and you can see that we're not too far from getting that drug approved."

Since 2002, Segreti has also taught advanced statistics to clinical research students at Campbell University School of Pharmacy. "I'm really teaching statistical concepts," he says, "so that when these individuals are developing drugs,



Anthony C. Segreti

they can have good communications with statisticians and understand what concerns statisticians have.

"I've learned a lot from the clinicians I've worked with—so it's a way of giving something back. And, of course, it's just fun to teach." Segreti, who lives in Cary, N.C., has a wife, Wendy, and two children. In his spare time, he lifts weights and practices yoga.

Since he joined the Air Force in 1990, he has supported operations in both Gulf Wars as well as in Kosovo. In addition, Vojtecky has been an administrator at Wright-Patterson USAF Medical Center in Ohio, chief operating officer at Malcolm Grow USAF Medical Center in Maryland, and the director of managed care at Travis Air Force Base in California.

Still, all that may pale when confronted with the demands of being leader of his 9-year-old son's Cub Scout pack. Vojtecky has two daughters as well. His wife, Shirley, a 1990 graduate of GSPH's Social Work Training Program in Maternal and Child Health, coordinates intervention programs for families with special needs children for the Charles County Health Department in Maryland.

Mark Vojtecky was named a GSPH Distinguished Graduate in 1996. "My degree in public health was truly the best experience I've ever had," says Vojtecky. "It gave me the ability to know and have confidence in what I was doing and saying. It opened all the doors for me."

facility renovations, budgeting, heading up safety committees. But in truth, that's only one small part of his job. The staff of 23 in the medical examiner's office, 100 in the DNA lab, and 50 in the toxicology lab conducts all of the forensic and medical investigations worldwide for the Department of Defense. "I work directly with the Armed Forces medical examiner bringing the support mechanism that ensures the clinicians and technicians have all the resources they need to do their jobs," he says, "and so we can continue to enjoy our reputation as the best DNA lab, tox lab, and medical examiner system in the world."

He's often in the hot seat. Last February, for instance, after the tragic crash of the space shuttle Columbia, Vojtecky deployed his whole staff to Texas and Louisiana. That left him alone with two secretaries to coordinate the entire operation.

Vojtecky cut his teeth during an eight-year stint in the 1980s as an intelligence officer in the Marines supporting operations in Beirut, Lebanon and Grenada.

Mark Vojtecky

Mark Vojtecky, lieutenant colonel in the U.S. Air Force (USAF) Medical Services Corps and 1986 Department of Health Services Administration grad, likes to downplay his role as chief administrator of the medical examiner's office at the Armed Forces Institute of Pathology in Washington, D.C. He'll tell you that he has the work-a-day life of a typical hospital administrator—overseeing



Mark Vojtecky

Notebook

GSPH Grads Share News and Notes

1950s

Melvin Simak (MPH '54) has retired following a 27-year career as administrator of the Jewish Hospital of Hope, a long-term care hospital in Montreal, Canada.

1960s

Richard A. Brose (MPH '65, DrPH '67), once retired, is now completing his first year as director of epidemiology–home-land security activities at the Clay County Public Health Department's Office of Homeland Security in Liberty, Mo.

Shirley Elaine Johnson (MPH '63) of Mississauga, Canada, retired after serving for 12 years as medical director of Connaught Laboratories, where she was involved in the development and clinical trials of several vaccines, including an improved inactivated poliomyelitis vaccine and rabies vaccine.

1970s

Judith L. Davenport (MPH '74) received a Distinguished Alumnus Award from the University of Pittsburgh African American Alumni Council at a ceremony on October 24, 2003. Davenport retired from her private dental practice in 2000. Among other obligations, she serves as chair of the Carlow College Board of Trustees and sits on the GSPH Board of Visitors.

M. Marc Goldberg (MSHyg '70) has switched career paths from hospital administration to wine-making. He is now owner and winemaker at Windward Vineyard in Paso Robles, Calif., www.windwardvineyard.com.

Edward J. Smith (MSHyg '70, ScD '74) retired in January 2004 after nearly 31 years of service to the Pittsburgh District of the U.S. Army Corps of Engineers.

Margaret Smith Washington (MSHyg '74) recently published a book on doctor/patient communication issues titled *Doctor Can You Hear Me? Patient Are You Listening?* Washington retired from UPMC in 2003.

Richard A. Yoder (MPH '76) regularly serves as an advisor to Afghanistan and other low-income governments on health sector development issues. Yoder is chair of the Department of Business and Economics at Eastern Mennonite University in Harrisonburg, Va., where he is the Longacre Endowed Professor of Business and Economics.

1980s

Carolyn Ann Dalesandry (Bahorich) (MPH '82) is the owner of Nucare in Oakton, Va. Her company provides home health care, high-tech pediatrics, and adult private-duty nursing services.

Joan B. O'Dair (MPH '82) is an adjunct professor of community health nursing at La Roche College in Pittsburgh. O'Dair also serves as a public health administrator for the infectious disease program at the Allegheny County Health Department.

1990s

Anabela Garcia Abreu (DrPH '93) works in Washington, D.C., as health sector manager for the South Asia Region of The World Bank.

Jeffrey A. Gavard (PhD '90) is a research assistant professor in the Department of Internal Medicine at the St. Louis University School of Medicine.

Jannette Fernanda Hinds (MPH '92) emigrated from Barbados to Mississauga, Canada, where she is working as a client service manager in the financial services industry.

Raymond Panas (MPH '91) is employed at Sucampo Pharmaceuticals in Bethesda, Md., where he is responsible for designing and developing clinical research studies for two research compounds, one in the study of nonalcoholic fatty liver disease and the other for irritable bowel syndrome, which will soon be up for FDA approval as a new drug.

Randi L. Wolf (MPH '95, PhD '98) has been appointed associate professor of human nutrition at Teachers College at Columbia University. She is a project coordinator for a study concerning colorectal cancer screening, for which she received a grant from the National Cancer Institute.

2000s

Annahita Keravala (PhD '03) is a postdoctoral scholar in the Department of Human Genetics at Stanford University's School of Medicine. Her work focuses on serine recombinases (integrases) and their manipulation for use in gene therapy. She is specifically interested in using these integrases for site-specific transfer into stem cells for various applications in the future.

Keep In Touch!

Have you changed jobs? Earned another degree or special award? Did you get married or have a baby? Did you relocate? Keep your alma mater and fellow graduates informed of the changes in your life. Simply return the enclosed reply card; visit the alumni information section of the Web site, www.publichealth.pitt.edu; or send us an e-mail at contact@gsphean.gsph.pitt.edu. We'll publish your updates in the next issue of *PublicHealth*.

In Memoriam

Ching Chun “C.C.” Li, PhD, faculty
Jerome Harold Markovitz, MPH '92
Jeannie McKenzie Pedlow, MPH '78, DrPH '82
Evelyn H. Wei, PhD '99

Ching Chun “C.C.” Li

Ching Chun “C.C.” Li, professor emeritus of human genetics and biostatistics, died on October 20, 2003, at his Mt. Lebanon home just a week shy of his 91st birthday.

Born in Tianjin, China, in 1912, Dr. Li received his bachelor's degree in agronomy in 1936 from the University of Nanking. For a year after graduation, he worked with farmers in Beijing learning the basics of plant breeding and field work. This interest led him to pursue a doctorate in plant breeding and genetics at Cornell University's College of Agriculture. While at Cornell, he met Clara Lem, an American born of Chinese parents. They married in 1941.

Upon boarding a Dutch ocean liner for what was to be a two-week honeymoon to Shanghai, Dr. Li and his wife were taken on a surprise 51-day excursion dodging Japanese submarines, forcing their ship to eventually dock in Hong Kong. They were transported to the Kowloon Peninsula, where they were stranded with no money and worthless traveler's checks. Thanks to the kindness of some Cornell friends, Dr. Li obtained enough Hong Kong currency to pay a member of the Chinese underground to guide them out of Japanese-occupied territory. For 38 days Dr. Li walked while his pregnant wife was carried in a hired sedan chair, before they finally reached the safety of Free China. A few weeks after, Clara gave birth to their first child. Fourteen months later the baby died of dysentery in Dr. Li's arms.

In 1943, Dr. Li took a position at the University of Nanking. Three years later he joined China's National Beijing University, where he would later become the university's youngest department head, chairing the agronomy department and writing his first book, *Population Genetics*, at age 34.



Dr. and Mrs. C.C. Li

In 1949 the Communist government took over, bringing Russian-influenced genetics to China. Dr. Li's training was at odds with the so-called “new genetics,” and he knew it was only a matter of time before he would be denounced as disloyal. Sensing that not only his career, but his life could be at stake, Dr. Li fled with his family to Hong Kong in 1950. Li's American colleagues recommended the highly respected geneticist to Thomas Parran, former U.S. surgeon general and the first dean of GSPH. The following year, Dr. Li joined the faculty at the newly created Graduate School of Public Health. He chaired the biostatistics department from 1969 to 1975 and officially retired in 1982, though he continued coming to his GSPH office every day to work until a few months before his death.

Dr. Li's textbooks, including *First Course in Population Genetics* (1975), are considered classics in the field and have been

translated into several European and Asian languages. In 1998, the American Society for Human Genetics bestowed its lifetime achievement award on Dr. Li, only the fourth such honor the society has presented. In addition to recognizing Li's writings and teaching, the award honored his uncompromising defense of scientific freedom.

The Department of Human Genetics has instituted a lecture series in honor of Dr. C.C. Li's distinguished career. Aravinda Chakravarti, professor of medicine and head of the Institute of Genetic Medicine in the Johns Hopkins University School of Medicine will present the inaugural C.C. Li Lecture on April 16, 2004, titled “Genes for Common Diseases: Association Studies.” The lecture will be followed by a reception, both of which are open to the public. For more information, please visit www.publichealth.pitt.edu.

John C. Cutler Remembered

“We in the public health community could not honor a more fair, compassionate, and humble man, a man who committed his life to helping improve the health of his fellow citizens around the world, no matter what their age or background.” This sentiment, expressed by GSPH alumnus Russell Morgan Jr. was just one of many that so eloquently captured the life and career of Dr. John C. Cutler, who died in February 2003 at age 87.

Cutler, a professor emeritus in the Department of Behavioral and Community Health Sciences, was remembered at a memorial celebration on September 19, 2003, by a crowd of family, friends, former students, and colleagues, some of whom stood in front of the crowd and shared recollections of the pioneering public health practitioner.

As part of the memorial celebration, Dean Bernard D. Goldstein announced the establishment of the John C. Cutler Memorial Global Health Fund to “honor and perpetuate John's legacy of global health, leadership, research, practice, education, and devotion to nurturing the careers of our future public health leaders.” This fund will provide a permanent endowment to support the John C. Cutler Annual Global Health Lecture at GSPH. The lectures will be presented by internationally renowned experts and will be accompanied by a display of adjudicated scientific posters depicting student research projects, with prizes awarded to the top student researchers.

To make a contribution to the Cutler fund, or for more information about this endowment, please contact: University of Pittsburgh; Graduate School of Public Health; Karen Crenshaw, Director of Development; A661 Crabtree Hall; 130 DeSoto Street; Pittsburgh, PA 15261; phone: 412-624-5639; fax: 412-624-3309; or crenshaw@pitt.edu.



John C. Cutler

“In some way his compassion seemed to envelop the people I saw around him and other medical people who knew him.”
—L. Mali Gesmundo

“He did his work in the immediate post-Victorian era, and in surely some of the most controversial areas of public health: sexually transmitted infection and contraception. He did it without condescension, without judging, with grace and dignity, and with dedication and care for all those to whose health and well-being he was committed.”
—Lyman B. Brainerd Jr.
Chair, Board of Directors, EngenderHealth

“Here was a teacher and practitioner deeply interested in individuals and their problems. His gentleness and demeanor as a gentleman left no doubt about the intensity of his ability to listen with great sincerity. He was not trying to imitate anybody. John could look through you, past you, and understand instinctively what needed to be done.”
—Lee M. Howard
Director of Health Emeritus, U.S. Agency for International Development

“He was the kind of great man who made each of us better as a result of our relationship with him.”
—Michael Dalmat
Alumnus and Cutler's godson

Mark Your Calendar!

April 4–11, 2004

Public Health Week

Visit www.publichealth.pitt.edu for a calendar of events.

Contact: Molly Eggleston, 412-383-2230 or mme@pitt.edu

April 12, 2004

Jay L. Foster Memorial Lecture Series in Alzheimer's Disease

Richard Mayeux, MD, MSc: Sergievsky Professor of Neurology, Psychiatry, and Epidemiology and Codirector, Taub Institute of Research on Alzheimer's Disease and the Aging Brain, Columbia University College of Physicians and Surgeons, New York, N.Y.

Community Lecture, 1 p.m.
IBEW Conference Center
5 Hot Metal Street, Pittsburgh

Scientific Lecture, 4 p.m.
A115 Crabtree Hall
Graduate School of Public Health
Contact: Michael Rick, 412-624-1634 or mrick@gsphdean.gsph.pitt.edu

April 16, 2004, 3 p.m.

C.C. Li Lecture

Public Health Auditorium
623 Parran Hall
Graduate School of Public Health
“Genes for Common Diseases: Association Studies”

Aravinda Chakravarti, PhD, Professor of Medicine and Head of the Institute of Genetic Medicine, Johns Hopkins University School of Medicine.
Reception to follow
Contact: Jeanette Norbut, 412-624-9951 or jeanette.norbut@hgen.pitt.edu

April 21, 2004, 7 p.m.–10 p.m.

Hors d'oeuvre and Wine Reception and Awards Ceremony

Commemorating the 20th anniversary of the Pitt Men's Study
David L. Lawrence Convention Center
Contact: Joe Pawlak, 412-624-3132 or jpawlak@pitt.edu

April 24, 2004, 5 p.m.

Alumni Dinner

4 p.m. cash bar
Pittsburgh Athletic Association
Contact: Diane Kline, 412-624-5200 or dkline@gsphdean.gsph.pitt.edu

April 25, 2004, 5 p.m.

GSPH Convocation

IBEW Conference Center
5 Hot Metal Street, Pittsburgh
Contact: Diane Kline, 412-624-5200 or dkline@gsphdean.gsph.pitt.edu

May 7, 2004, 3 p.m.

Sonis Lecture

Location: TBD
Stephen M. Shortell, PhD, Dean and Blue Cross of California Distinguished Professor of Health Policy and Management, University of California at Berkeley School of Public Health
Contact: Judith Lave, 412-624-0898 or lave@pitt.edu



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