SEEKING A SILVER BULLET
CARE GAP CRISIS LOOMS FOR AGING MISSISSIPPANIANS

DR. KATRINA POE
CARING FOR THE TOWN THAT CARES'

DR. RALPH DIDLAKE
PUTS THE VERSE IN VERSATILITY

THE LOYAL TREATMENT
3 GENERATIONS OF MOORES
WHOLE NEW BALL GAME

Nathaniel “Nate” Hughes II, a former NFL wide receiver, once wore the teal and gold of the Jacksonville Jaguars, the Honolulu blue of the Detroit Lions, and the orange and brown of the Cleveland Browns. He now wears the white coat of a second-year medical student. The Macon native and Starkville High School graduate was named one of the Top 50 Greatest Football Players at his alma mater, Alcorn State University, in 2014.
Can caregivers cope with a surge in elderly patients?

By Gary Pettus
As she peers into her doctor's face, she lies on her back, she peers into her doctor’s face, she lies on her front. "How old are you?”

"We’re blowing away the actuarial tables, particularly here in Mississippi, where geriatrics are more likely to be found than specialists of other areas," said Dr. Kathy Frank, AGS board member, a Ph.D.-level nurse and geriatric program administrator at the Indiana University School of Medicine. “We aren’t graduating geriatric medicine fellows fast enough.”

As geriatricians will tell you, older patients face issues that aren’t miniature adults, geriatric patients aren’t middle-age patients who can handle the same problems as their middle-age counterparts.

"The shortage is truly a concern," said Dr. Kathy Frank, AGS board member, a Ph.D.-level nurse and geriatric program administrator at the Indiana University School of Medicine. "We aren’t graduating geriatric medicine fellows fast enough."
In medical schools, geriatrics rotations are elective in most internal medicine, family medicine and psychiatry programs. As for residents at UMMC, they’re required to do one month of geriatric care. In an attempt to fill in the gaps, many institutions offer geriatrics fellowships. Meeks directs UMMC’s program, which is “100 percent clinical” and provides a year of subspecialty training to internal medicine or family medicine physicians, he said. It’s one of 130 similar programs in the country. But only about half of their 383 positions have been filled. The Medical Center has treated about 10 fellows since its beginning a few years ago. It’s currently schooling three more geriatrics fellows, including Shipley.

“Spiritually, vocationally, however you choose to phrase it, it’s part of my life’s work to impact the quality of care for our older adults,” Shipley said.

“They’ve worked so hard; they paved the way for so many of us. I’ve met chefs, dancers, veterans, export quilt-makers. They are such a wealth of knowledge, and they show graciousness and kindness in their willingness to share their knowledge with you.”

“But sometimes people just don’t want to deal with them … because they move slower, they take their time, they can’t hear you sometimes. When a baby has an accident, it’s cute; but when it’s an adult, it can be off-putting to some.”

Also off-putting to some are claims of a looming crisis in health care. The attitude is, ‘You need to fix it.’

“Instead, geriatricians are trained to think, ‘What is it you want at this age?’ And they respect those wishes.”

“I had worked with other sick people myself,” White said. “This was totally different from anything I had ever seen.”

White attends a caregivers’ support group that meets regularly at UMMC, where she describes her sister’s behavior. “She doesn’t want to drink water,” White said. “Because she has UTI issues.”

“I have to lay out her church clothes on Saturday night, or she’ll wear the same thing every Sunday.” In May 2014, her sister was diagnosed with dementia. White sought out other health-care workers: nurses, physician assistants, occupational therapists, physical therapists and more.

“I was seeing more and more patients who were older,” he said. “I felt like I wasn’t able to provide care that was as good as it should have been for them. I thought training as a geriatrician would help me become a better primary care physician.”

“One inspiration for Weatherly’s venture in geriatrics care was Dr. Mark Meeks, UMMC professor of medicine and director of the Division of Geriatrics. “When you watch him, you want to be a better doctor,” she said. For his part, Meeks was five years into his career as a general internist before he converted.

“Geriatrics is a lot about face time with patients; that’s what I love being good at.”

“People ask me all the time, ‘Why geriatrics?’ My usual answer in response, besides the typical ‘I really like older people,’ is that I feel like they are the kind of patients that we don’t have to much of, and I don’t mean that to say that I have something special to offer them, because I do . . .

I’m not the most patient physician they will encounter; I’m extremely diligent, which unfortunately makes me quite inefficient.

While there is talk about loan repayments and reimbursement raises, in the meantime the true believers have a variety of other incentives and pep talks up the sleeves of their long white coats.

“I wasn’t going to waste as much money, but I could have done other things if making money was my goal,” Weatherly said.

“Geriatrics is a lot about face time with patients; that’s what I love about medicine anyway. You are allowed to spend the time with these patients that they deserve.”

“Research about physician pay also shows that geriatricians enjoy a high quality of life and job satisfaction compared to most other specialists.”

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If geriatricians are the ones to care for older adults, “the patient finds important may not have anything to do with their disease,” said Sue Ann Meng, who leads the support group, Family Support for Caregivers of Patients with Dementia.

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“When you finish than you did when you started,” she said.”

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Often, medical students and residents find this to be true when they work with older adults. “For many, the complexities and challenges are actually very rewarding,” Meeks said. “And the gratitude from these patients is enormous.”

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This illustrates the kind of confusion. She had made changes to her medications—and that took care. “But Dr. Meeks said she needed the surgery. First, though, thought at the time, ‘She is not going to do well at all.’” Windham said. “Because of that and also very confused,” Windham said. “Because of that and because of her age, the surgeons were reluctant to operate. I thought at the time, ‘She is not going to do well at all.’”

“But Dr. Meeks said she needed the surgery. First, though, he made changes to her medications—and that took care of the confusion. She had surgery and went home.”

This illustrates the kind of intellectual challenges geriatricians frequently face—the kind that appeal to Dr. Lysa Weatherly, another geriatrics fellow at UMMC.

“I’ve seen patients with more than 20 medications; this is known as the prescription cascade. As a geriatrician, you have to know a lot about how these medicines interact and when you can eliminate some. “More of these kinds of approaches, and many more changes, are needed to care for those older adults like Jannie Leflore, Dorothy Windham, and Mandy White’s sister. “They find out how the patients’ diseases or health issues have affected their lives.”

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“Folks have to face the fact that we are not going to all live forever,” Meeks said.

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“If nothing else, people who have the power to make it happen will have a vested interest if they live long enough. If we all live long enough, we’ll all get old.”

Frank, the AGS board member, also said it’s unrealistic to send everyone over 65 to geriatricians. “We need to focus on the high-risk patients instead. As a colleague of mine, ‘everyone has kidneys, but not everyone sees a nephrologist.’ “But if they get sick enough, they see one.”

A sea wall of trained geriatricians will never be high enough to fend off the “silver tsunami,” experts say. “If we want quality care for our older adults, we need to have a geriatric-focused team taking care of them,” said Dr. Kathy Frank, geriatric program administrator at the Indiana University School of Medicine. “Folks have to face the fact that we are not going to have enough geriatricians. They can’t take care of them by themselves.”

This means more training for everyone in order to absorb the coming shock, said Sue Ann Meng, UMMC geriatrics social worker. “All our health professionals should have contact with geriatric patients.”

On these teams, geriatricians work together with nurse practitioners, and social workers as they determine the best plan of care with older adults and their caregivers (Geriatric Resources for Assessment and Care of Elders GRACE), said Frank, describing one model. “This makes the most of a geriatrician’s time, augmenting, especially for high-risk older adults.”

To identify geriatrics training and education gaps and help develop a response, the Health Resources & Services Administration awarded in 2015 more than $35 million to 44 organizations in 29 states. Under this Geriatrics Workforce Enhancement Program, grants may go toward certification of nursing assistants, for instance, in geriatric care, or increasing geriatric education for nurses, social workers, and medical students. “Maybe that’s something Mississippi would want to do,” Frank said. “We’ve found in focus groups for health care workers that they’ve been hungry for ways to provide better care for older people. They realize they need help.”

Another team model calls for a social worker, nurse and a position called care coordinator—someone with much experience in taking care of older adults with dementia and/or depression (Aging Brain Care Medical Home), Frank said. Taking better care of the older adults also requires embracing the new technology.

Teamwork, training and technology can abate the flood
Dr. Katrina Poe cares for ‘The Town that Cares’
By Gary Pettus

KILMICHAEL – For as long as Katrina Poe can remember, her hometown had a doctor – Dr. L.C. Henson, who delivered her.

He was there for her when she was born; she would be there for him when he died.

He was her family’s doctor, and she became his – and just about everybody else’s in town – a career choice inspired by Henson and, ironically, by her mother Bessie Poe.

Kilmichael – “The Town that Cares” – is the kind of place that desperately needs physicians who care, but also the kind that usually has trouble attracting or churning them out, and maybe that’s why no one could blame Bessie Poe.

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“I had to apologize that day,” said Bessie Poe. “Katrina said to me, ‘Mama, I told you, didn’t I?’”

EVICTION AND VINDICATION

Long before Katrina Poe finished her family medicine residency at UMMC, Dr. Diane Beebe found out just how serious she was.

“‘I TOLD YOU, DIDN’T I?’

Putting a child through medical school had seemed beyond the family’s means when 10-year-old Katrina had announced her intentions, Bessie Poe said.

“Back then, it was hard. We didn’t have money or nothing. We were just factory workers.”

Besides, the town had never had an African-American physician.

Eventually, the factory where the Poes worked, Steel Apparel, closed and moved away. James Poe found a new job at an air conditioner manufacturing plant in Grenada, about 40 miles distant.

Before that, even Katrina worked at the factory in the hours after school, cutting material and doing inspections.

And she and her sister Cheryl Poe, who is earning her RN degree, learned the value of work.

“My husband used to plant peas for them, and they would pick them, and he would take them around town so they could sell them to different people,” Bessie Poe said.

“He told both of them, ‘I want you to learn how to do something for yourself. Because if you get an old lazy man for a husband, you will be able to take care of yourself.’”

While growing up in Montgomery County, Katrina Poe enjoyed being around people, but she was also comfortable being alone. Although she was a cheerleader in high school and played basketball and ran track, she also spent a lot of time by herself with a book in her hand.

“You wouldn’t even know she was in the house if you didn’t know she was in the house,” said her mom.

Math was her favorite subject, but she was so good at it, she could afford to fall asleep in Miss Vance’s class, by which time she had been sated and worn out by basketball practice and lunch.

“One day Miss Vance said to me, ‘Katrina, are you sick today?’” she recalled.

“I said, ‘No, ma’am, why would you ask that?’ And she said, ‘Because today you stayed awake.’”

Another subject that interested her greatly: the family’s doctor.

“My mom was always sick when I was growing up,” Katrina Poe said, “and just watching Dr. Henson take care of her, I knew that’s what I wanted to do.”

When Katrina was 12, she asked for, and received from an aunt, a toy doctor kit for Christmas. “From then on, we knew she meant business about being a doctor,” Bessie Poe said.

“She kept her grades up, was the high school valedictorian, and went to college,” Bessie said. “She got all those scholarships. I think we bought her a car once, but after that, she did everything else herself.

“She was serious; she sure was.”

So, one day in 1998, Bessie and James Poe left their home between Kilmichael and Choctaw County’s French Camp. They drove to Jackson to see their younger daughter fulfill her fifth-grade promise.

“I love this small community,” Katrina Poe said. “My parents, my family are still here.”

Even before finishing medical school, she began seeing patients in Kilmichael, doing a rotation with Henson, and again as a resident. She was probably the first African-American physician any of them had ever seen; Katrina Poe didn’t see her first – the legendary OB-GYN specialist, Dr. Helen Barnes – until she was in medical school.

“She always knew she was going to go back there and practice,” Beebe said, “because that’s what her community needed.”

This was before the Mississippi Rural Physicians Scholarship Program, which today offers incentives to doctors who agree to practice several years in physician-needy areas.
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“IT’s amazing to me that she’s still there, more than 15 years later,” Beebe said. “It’s very hard to keep physicians in a small town, even if it’s their hometown. They work a lot of long hours, because they live in the community; they’re available to their patients just about all the time.”

Katrina Poe was a rare sight in Kilmichael, where she was only the second female physician to serve the town, following Dr. Rebecca Hodges, who had worked with Henson a few years before. Before she took over Henson’s clinic, there was to be a transition, allegedly.

“Dr. Henson said he would stay at least a year before I took over by myself,” Katina Poe said. “But he came in one day wearing cowboy boots, blue jeans and a T-shirt, this man who always came to work in a button-down shirt and a tie. ‘He said, ‘I feel like you can handle it.’ So he retired, left the clinic and went to his farm!” She had been there one month. As Henson, the only physician in town, planned his retirement, Katharine M. Kilmichael Clinic, situated across the street from the former hospital where Henson delivered Poe, became part of the clinic.

Katrina Poe, pictured at right, and her husband Calvin Johnson, left, are bring up two sons in Kilmichael, James “Deuce” Johnson, to her left, and C.J. Johnson, to her left, and C.J. Johnson, has been married 70 years — “to the same wife.”

Dorothy Small, who’s 97, would say “amen” to that, as would her husband Frank “Mr. Frank” Small, who is proud of being married 70 years — “to the same wife.”

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Katrina Poe was a cheerleader for her high school. Besides playing basketball and running track, Katrina Poe was a cheerleader for her high school.

“The ONLY PATIENT AROUND

Those who have remained in Kilmichael are relieved they still have a doctor of their own, particularly one they had been running like the dickens and shooting baskets and growing up. On a late September morning, Poe greeted one of those — Julia “Miss Julia” Bond, a former patient of Henson’s — to the way she greets every patient with a hug.

“Miss Julia, do you need any prescriptions, darling?” Poe said. Between checking patients’ blood pressure and chest, Poe administers regular doses of “darling and sweetie.”

“She doesn’t fail to explain stuff to you,” Bond said later. “She always hug your neck when you come and when you go out. You sure can’t ask for a better doctor.”

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Dorothy Small, who suffers knee pain, tried, and succeeded, in holding Poe’s attention for some time in the exam room. It was obvious she hated for Poe to leave.

“Tm trying to think of something else I need to tell you,” Dorothy Small said to her at one point.

Another of Poe’s patients, Charles Austin, who coached her in basketball and track at Kilmichael High School, probably knows her as well as anyone outside Poe’s family.

“She is a perfect role model for our kids here,” Austin said. “They just all flock around her.

“When you’re in the treatment room with her, it’s like you are the only pa-

tient anywhere. We are blessed to have her in Kilmichael. And she’s re-

ally been busy since she’s been here.”

She’s been busy, at times, caring for the kinds of patients she may have collectively fought or taken care of. But in high school, her older sister Cheryl was seeing Johnson’s uncle at the time and told Katrina that Calvin liked her. “She paid me to take Calvin to my high school senior prom,” Katrina Poe said. They dated during officially their freshman year at Mississippi State University.

Dr. Katrina Poe and her husband Calvin Johnson, left, are bring up two sons in Kilmichael, James “Deuce” Johnson, to her left, and C.J. Johnson, has been married 70 years — “to the same wife.”

Sometime later, she married him. They have two sons now: James “Deuce” Johnson, 11, and C.J. Johnson, now 14, who used to talk about becoming a doctor. Later, though, he says to his mom, “It doesn’t seem like you have a life.”

Poe also makes house calls and nursing home rounds. She’s the high school’s team physician. She’s involved in her church. She’s the medical director and physician for a community-based residential home serving the mentally disabled of all ages.

“I missed a lot of my children’s lives,” she said, “espe-

cially early in my practice here, but I’m trying to be with them as much as I can.”

SPEAK DOCTOR

Kilmichael Clinic, situated across the street from the former hospital where Henson delivered Poe, became part of the Greenwood-Leflore Hospital system in the spring of 2015.

By the switchover, and much to Stella Pittman’s alarm, the clinic was closed for a couple of months.

“I just about made myself sick when she wasn’t here,” said Pittman, who travels some 20 miles from her home in Eu rose to be doctored by Poe.

“There’s someone who’s here every single day. It’s not the same.”

Poe, who travels some 20 miles from her home in Eu rose to be doctored by Poe. Dr. Katrina Poe and her husband Calvin Johnson, left, are bring up two sons in Kilmichael, James “Deuce” Johnson, to her left, and C.J. Johnson, has been married 70 years — “to the same wife.”

“It seems that in Kilmichael, prayer does work. “We matched her donor for my mom,” Bessie Poe said. “It seemed that in Kilmichael, prayer does work.”

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PRAYER

Two years ago, she was dying before my eyes,” Katrina Poe said. “She had been so sick in my childhood, then she got better for a while, but went down again.”

“The people of Kilmichael threw her a parade and staged the award presentation in the high school auditorium; it was packed.

“I reckon there were even some people from out of town who came in,” Austin said.

It would be reasonable to assume that this was the best day of her career. But that doesn’t take into account her mom.

“Two years ago, she was dying before my eyes,” Katrina Poe said. “She had been so sick in my childhood, then she got better for a while, but went down again.”

Bessie Poe needed either a kidney or dialysis – but dialysis would have weakened her heart too much to make her a good candidate, her daughter said.

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It's unlikely that Dr. Ralph Didlake Jr. would be the person he is today in a world that never experienced the Civil War, the Nuremburg trials, the harnessing of electromagnetic waves, nuclear tests, the Space Race and the poetry of Sylvia Plath.

But, then, who would he be?

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d, each of these monumental spectacles, movements or events has had a direct personal connection to his life or lineage, shaping the character, career, hobbies and habits of this physician, professor, academician, administrator, ethicist, poetry commentator and radio repairman.

“My career looks like a bad case of attention deficit disorder,” said Didlake, trying to identify a defining moment in his life and profession. To others, it looks like a good case of intellectual versatility.

It’s a cliché, but it’s true, said Sondra Redmoon: “He’s a Renaissance man.”

He bridges his love for the humanities with medical education, “providing a context for our students,” said Redmoon, director of operations for the Department of Preventive Medicine and Data Science.

It was as a medical student that Dr. LouAnn Woodward first encountered Didlake, when he was the program director for general surgery.

Now, as leader of the Medical Center, she has developed an even deeper regard for his talents.

“He is thoughtful, wise and cares deeply for the education process, the education environment, and for our learners,” said Woodward, vice chancellor for health affairs and dean of the School of Medicine.

“I rely on his counsel and trusted judgment every day.”

Didlake exerts his counsel and judgment as professor of surgery, associate vice chancellor for academic affairs, chief academic officer and director of the Center for Bioethics and Medical Humanities – the program for which he and Redmoon created a summer fellowship for undergraduates. To direct the center full-time, Didlake eventually gave up his practice, Redmoon noted. “And when he was asked to be vice chancellor for academic affairs, he accepted the challenge – which speaks volumes about his dedication to the institution and who he is.

“It takes a certain kind of person to be a surgeon; they save people’s lives. But he’s very humble. He’s someone who listens. He’s someone who brings people together.”

He’s someone who was taught as a“never refuse a combat assignment,” he said, quoting a line from “The Right Stuff,” Tom Wolfe’s account of America’s early space program.

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“A versatile polymath, Didlake puts the verse in versatility”

Dr. Ralph Didlake jokes that his career “looks like a bad case of attention deficit disorder.”

By Gary Pettus

Renaissance Hair

Didlake puts the verse in versatility

For the early space flights, there was wall-to-wall news coverage,” he said, “and we were all glued to the seven-transistor handheld radios.”

For the first 12 or so years of his life, starting in 1953, his home was in Albuquerque, a place rich in Old Spanish and Native American cultures and the arts, he said.

“Living there profoundly influenced my choices,” he said. “It provided an education base I value highly. The combination of arts and culture and science was seamless.”

From Albuquerque’s public TV station, KNME, he soaked up the weekly adventures of the mustachioed Dr. George Fischbeck, an enthusiastic science popularizer in glasses and a bowtie.

“My father felt very strongly that the nuclear program was important to the defense of the country,” Didlake said, “but it was also counter to his persona. He was a very peaceful guy.”

Peaceful enough to oppose his son’s brief interest in a military career during the Vietnam War. At any rate, by the time the family left New Mexico, Didlake’s trajectory pointed toward medicine, and to his roots in Mississippi.

A versatile polymath, Didlake jokes that his career “looks like a bad case of attention deficit disorder.”

FAMILY, FOOTBALL AND FATE

In Copiah County, between County Line Road and Old Highway 27 Road 1, past a smattering of houses and barns and stands of trees, is a thread of pavement called Didlake Road.

Nearby is the centerpiece of Cherry Grove Plantation: a house with a four-columned portico, gabled roof, fan-lighted entrance and pine floors – all built in the mid-1800s by the hands of the forbear William H. Didlake.

Even before the Civil War, the Crystal Springs area had been a hive of Didlake, matronizing Didlake, Didlake.

“We used to make an annual pilgrimage there,” Didlake said. “It influenced my choices,” he said. “It living there profoundly influenced my choices.”

The area was home to physicists, nuclear engineers, mathematicians,” Didlake said.

Many of those scientists worked at nearby Los Alamos, the site of more than a dozen nuclear tests witnessed by his father after World War II – brilliant flashes of light, and clouds of destruction hanging over the desert like puffy stalks of broccoli or massive human skyscrapers.

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Nearby is the centerpiece of Cherry Grove Plantation: a house with a four-columned portico, gabled roof, fan-lighted entrance and pine floors – all built in the mid-1800s by the hands of the forbear William H. Didlake.

Even before the Civil War, the Crystal Springs area had been a hive of Didlake, matronizing Didlake, Didlake.

“We used to make an annual pilgrimage there,” Didlake said. “It influenced my choices,” he said. “It living there profoundly influenced my choices.”

The area was home to physicists, nuclear engineers, mathematicians,” Didlake said.

Many of those scientists worked at nearby Los Alamos, the site of more than a dozen nuclear tests witnessed by his father after World War II – brilliant flashes of light, and clouds of destruction hanging over the desert like puffy stalks of broccoli or massive human skyscrapers.

“My father felt very strongly that the nuclear program was important to the defense of the country,” Didlake said, “but it was also counter to his persona. He was a very peaceful guy.”

Peaceful enough to oppose his son’s brief interest in a military career during the Vietnam War. At any rate, by the time the family left New Mexico, Didlake’s trajectory pointed toward medicine, and to his roots in Mississippi.

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Leading a Millsaps College history class on a historical tour of UMMC in April 2014, Didlake shows the students the original ER area where civil rights leader Medgar Evers was brought after he was shot in June 1963.

the worst football player in the history of Crystal Springs.” Thanks to a quirky class scheduling involving last period, he had to play football, he said, or he wouldn’t have been able to take advanced math, a course that would help prepare him for college.

In contrast to the Albuquerqueans he had known, some of his neighbors here defined the pinnacle of success as “playing varsity football and getting a job at the local transformer factory,” Didlake said. “They look easy: You just do the right thing.”

Still, nuclear physicists were scarce down Cherry Grove way. There were no Dr. Fischbecks, either; but there were, to Didlake’s relief, Dr. Mark Puryear and Dr. Tom McDonnell, two M.D.s in nearby Hazlehurst.

“They were among a group of physicians who were such an integral part of the community,” Didlake said. “They fit my notions of what a physician should be.”

Those notions began to take shape in his boyhood, when he was drawn to stories about explorers such as Jacques Cousteau and Thor Heyerdahl, whose work mixed adventure, the storytelling tradition, he said. “I value that factory,” Didlake said.

In 2008, the orbital energy of the Medical Center pulled him in again, and he returned this time with a charged course “that was going to carry me into the sunset,” he said. “Enter Lou Ann Woodward.”

‘A TERRIBLE IDEA’

Millie Faith Didlake’s advice to her husband was this: Go back to school.

So he did, to Chicago’s Loyola University, where, six years ago, he earned his MA in bioethics and health policy.

For years, he said, “I was as happy as I could be operating all day long. But then, I started to mature as a physician. In medical school, I had been aware of ethics, but had no interest.”

The study of bioethics is fallout from the Nuremberg Trials, the post-World War II scrutiny of Nazi doctors’ experiments on humans. Those practices, along with such post-war advances as heart bypass surgery and ICU, compelled the world medical community to set boundaries for human research.

To that end, physicians and others often heed the voices of philosophers, theologians, ethicists, attorneys, musicians. Didlake taps into their wisdom for the benefit of his bioethics fellows.

As a physician, he became smitten by the ethical quirk of medical care midway through his surgical career, when many of his patients were on dialysis.

“They all received the same, exact treatments,” he said, “but one would do well, while the other would not. Their circumstances – social, economic – could change the outcome.”

This revelation struck him at a time when he was also “restless and bored.” That was when his wife “misted” him study bioethics.

But he did more than that. At UMMC, he created his new, dream job by securing funding for the Bioethics Center and coming aboard as director. But Dr. Lou Ann Woodward, who was associate vice chancellor for health affairs at the time, wasn’t about to let this Pollyanna go out of style. She asked him to sweaten his resume, as the new associate vice chancellor for academic affairs.

“I thought it was a terrible idea,” Didlake said. “But I have a deep respect for Dr. Woodward; so I decided to step in, and let her tell you, it was a step learning curve.”

“The thing I didn’t realize at first was that, compared to being in the operating room and taking care of one patient at a time, in this role you take care of thousands. ‘I’ve been here 41 years, and I’ve never been more excited here than I am now.”

Still, once you’ve been a surgeon, your hands can get itchy.

PARTY LIKE IT’S 1952

Didlake made his full-time return at the Medical Center in 2010, that was the last year he performed surgery.

“I do miss the environment of the operating room very much,” he said, “and the immediacy of the result. As an administrator, I can craft what I believe is a perfect policy, but won’t know for two years if it is perfect.”

Today, he operates on machines instead of people. Besides woodworking, in the shop behind his house in Madison, he restores antique radios. Among his vacuum-umulated patients is a prized radio receiver that was standard in medium and heavy World War II-era bombers – the kind whose explosive cargo draped the skies over New Mexico.

“I’m perfectly equipped for life in 1952,” he said. “I could run a radio repair shop in 1952.”

To the extent that he can, he fills the surgeon’s void this way: “It’s the only skill I could fall back on,” he said.

“It’s working with your hands, and the blend of science.”

And, if there’s a problem, it got fixed.”

“It’s a blend – of science, of using your hands, of creativity. ‘The first time I observed a surgeon at work,” he said. “It was like And here he was able to identify a defining moment: “The most rewarding things about him is his love of poetry.”

For Didlake, the appeal of verse lies in its power to speak to the human condition, and he’s particularly drawn to medical imagery like this: “The blood jet is poetry, there is not stopping it.”

In 2007, he presented a paper at an Oxford University symposium honoring the 100th anniversary of that line, the late Sylvia Plath. Thanks to him, the Frate fellows have absorbed her poetry as well, along with public policy issues, poverty simulations and more.

“I always wanted to be a doctor,” Stout said, “but I got old enough I have been drawn to understand health policy and bioethics. ‘Being able to have these first-hand experiences as a fellow challenged my career goals. Now, I want to be an advocate for health policy, meeting with our legislators, getting involved in professional organizations.”

A year after his fellowship at UMMC, she was only one of five fellows, the Frate fellows have absorbed her poetry as well, along with public policy issues, poverty simulations and more.

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ForAnna Grace Stout, the bioethics fellowship changed the direction of the career she was laser-planning since she was a little girl.

“I definitely would not be where I am if I am without the fellowship, without Dr. (Frat) Didlake’s key ship,” said Stout, who was accepted as a fellow in 2014.

Every summer for about five years now, the Center for Bioethics and Medical Hu manities has sponsored the five-week Frate Fellowship for rising juniors or seniors.

“That’s one of the things I’m proudest of,” said Didlake, the center’s director.

Most fellows are majoring in the humanities or social sciences, as was Stout, who was studying public policy leadership at the University of North Carolina.

“Whether they go into bioethics or not, they become better people,” said Sandra Redmond, director of operations for the Department of Preventive Medicine who collaborated with Didlake on the document that created the center.

Fellows undertake the same ethics training normally reserved for medical students. They learn to understand disease within the social context, as Didlake did years ago with his dialysis patients.

“It’s almost indescribable the impact Dr. Didlake makes on the fellows,” Stout said.

“He is so busy, but there was never a point where he wasn’t willing to sit down and talk with us for an hour about what we needed, or wanted to know. He is invested in us.”

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American Valued

Macedonian-born student pledges allegiance to her new country

By Gary Pettus

Two days before Independence Day 2002, Sara Kiparizoska and her family arrived in America for good.

As natives of the southeastern European country of Macedonia, they took their first collective breath of American air on a scorching day in Mississippi – and nearly choked; they’ve been breathing easier ever since.

Within months, Sara could speak English about as well as any other 9-year-old, and over the next 14 years, she graduated from high school in Laurel, secured a college scholarship, co-founded a business app, earned her bachelor’s degree in biochemistry and won admission to medical school.

“Everyone in our group, including the professor, was impressed by her performance,” said Bobo, president of the M1 class. “She’s a natural, and I know she is going to be an incredible physician.”

“She does a lot behind the scenes to help our class. Everyone knows her as a kind spirit.”

Her classmates have repaid her kindness, celebrating her citizenship, including in the classroom. “I walked in and the national anthem was playing,” Sara said. “There were balloons and candy. It was the nicest gesture.”

But it took more than a dozen years to realize the goal of citizenship. “If we could have done it earlier, we would have done it,” her father said. “It’s as simple as this: When people say, ‘Are you planning to go back home?’ I say, ‘I am home.’”

Because Sara was considered a resident of Oxford then, she was assigned to take her oath of citizenship in Tupelo, at the Natchez Trace Parkway Visitors Center, on August 25.

“There’s a symbolism during the ceremony that can’t be understated,” she said. “It’s less a ceremony, and more of a celebration.”

As Laurel residents, Sara’s parents and sister were assigned to the U.S. Citizenship and Immigration Services field office in New Orleans, on August 1.

Afterward, the family and friends lunched at a French Quarter restaurant. “When the people in charge heard what we were celebrating, they kept bringing us all these desserts,” Sara said.

“People are happy when you want to be a part of what they love, a part of this great country, that just makes it even better.”
School of Population Health named for ‘game changer’ Bower

University and health-care leaders celebrated UMMC’s newest health science school on Sept. 19: the John D. Bower School of Population Health.

“Population health is an emerging field that seeks to prevent and treat diseases by keeping people healthy,” said Dr. Bettina Beech, dean of the school. “Health begins in our homes, schools, churches and communities.”

The school will be the seventh represented at the Medical Center campus and only the third of its kind in the country. Classes will start in fall 2017.

The school’s namesake, Dr. John Bower, is a UMMC professor emeritus of medicine with a distinguished record of patient care advocacy. In 1966, he established Mississippi’s first kidney dialysis unit at the Medical Center.

Bower’s 1972 U.S. Congressional testimony influenced the decision to allow Medicare coverage for end-stage renal disease patients. His non-profit corporation, Kidney Care, Inc., opened dialysis clinics in 22 Mississippi cities.

When Kidney Care merged with other dialysis programs in 1996, Bower used the proceeds from the transaction to start the Bower Foundation, which funds projects dedicated to improving the health and educational status of Mississippians.

A $5 million gift from the Foundation will help fund the school’s start-up costs and prepare its home on one-and-a-half acres of land in one of the city’s eastern neighborhoods.

The site, which is currently being developed, will house the John D. Bower School of Population Health, which will be a ‘paradigm breaker, a trailblazer,” said Dr. LouAnn Woodward, vice chancellor for health affairs and dean of the School of Medicine.

Former Ag Secretary Mike Espy plows into U.S. food policies

Mike Espy, a member of President Bill Clinton’s cabinet from 1993 to 1994, noted that more than two-thirds of adults in the United States are overweight and obese, that “poor diet is a major risk for weight gain,” and that Mississippians in particular “lean toward fried foods, fast foods, sweet foods.”

“We are eating ourselves to death,” said Espy, a Yazoo City native who said adults, including himself, don’t easily grow out of bad eating habits.

One reason for this dietetic disaster, he said, is the fact that, in the United States “neither farm policy nor food policy has anything to do with health policy.”

Provisions in the U.S. Farm Bill offer benefits to farmers that were intended to create prosperity for the nation’s food growers and develop a cheap food supply. Espy said that these allowances, including subsidies, have encouraged farmers to grow crops that include corn, sugar and wheat; these often end up as highly-processed foods, such as sugary cereals, donuts, and high-fructose corn syrup.

“But I see the sun bursting through,” Espy said, referring to federal government reforms that are encouraging healthier food choices for consumers.

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$2M grant fortifies ‘first hands’ emergency responders training

A program developed by the University of Mississippi Medical Center to provide education for first responders isn’t just a resource for the state. It’s also being recognized as a model for the nation.

The U.S. Department of Homeland Security is boosting UMMC’s ongoing First Hands program with a $2 million grant to carry out a rural emergency medical communications demonstration pilot project.

The goal: enhance emergency communications and response capabilities, and help develop a national emergency communications plan by using existing technology.

“It’s a marriage that is perfect to promote medical care in rural America and to solve mortality challenges throughout the country,” said Dr. Damon Darsey, UMMC assistant professor of emergency medicine and medical director for the Mississippi Center for Emergency Services.

“Mississippi has one of the most state-of-the-art radio systems in the country. We have an academic medical center that is forward-thinking here and trains responders.

“This allows us to have that radio system combined with the desire of this facility to improve medical care throughout the state,” Darsey said.

First Hands was developed by UMMC’s emergency services team to improve the statewide public safety communications system and to extend its use to better support rural medical care and communications, Darsey said.

That system includes nearly 30,000 public safety users of the Mississippi Wireless Information Network mobile radio system, known as MSWIN.

First Hands will develop and implement the training programs for the funded initiative, the Rural Emergency Medical Communications Demonstration Project. The grant was announced Sept. 21 by U.S. Sen. Thad Cochran of Mississippi.

“The program will allow these people to get training on how to collect data and communicate findings early in the process — to provide the best care possible,” Darsey said, “but also communicate that care downstream so that whatever hospital the patient goes to will have the best information possible.”

That training will include how those first hands can use their own radios to better communicate what they see, and “to communicate through whatever means they have to improve the response of the professional responders who are on their way,” Darsey said.

“One of the ways we will improve mortality is to improve those who provide the first care.”

Dr. Damon Darsey, assistant professor of emergency medicine and medical director for the Mississippi Center for Emergency Services, is one of the creators of the Medical Center’s First Hands project.
The MIND Center announced in November a cumulative $10 million gift from the Gertrude C. Ford Foundation to advance its Alzheimer’s disease research and establish the Gertrude C. Ford MIND Research Center. The gift could not come at a better time. “Americans are living longer than ever and with the aging of the baby boomer generation, we are facing a silver tsunami,” said Dr. Tom Mosley, director of the MIND Center. “In just six years, Dr. Mosley and the MIND Center have put UMMC on the map in the brain-aging field by leading the country in research on Alzheimer’s and dementia,” said Dr. LouAnn Woodward, vice chancellor for health affairs.

“In just six years, Dr. Mosley and the MIND Center have put UMMC on the map in the brain-aging field by leading the country in research on Alzheimer’s and dementia,” said Dr. LouAnn Woodward, vice chancellor for health affairs and dean of the School of Medicine. “In the fall of 2016, the MIND Center announced its goal of expanding its research portfolio to include clinical trials. The first, the nationwide IDEAS study, launched this fall.

The Ford Foundation’s gift will support the overall research mission of the MIND Center. Research investment is great news for the MIND Center and for the state of Mississippi. According to the Association of American Medical Colleges, every dollar invested in research at medical schools and teaching hospitals like UMMC generates $2.60 of economic activity.

“That number is expected to double by the year 2030 and triple by 2050 unless we find ways to slow, stop or ultimately prevent these devastating illnesses,” Mosley said.

There is a sense of urgency, and we are in a hurry,” says Dr. Tom Mosley, director of the MIND Center, during the announcement ceremony. The west wing of the facility will house the research clinic offices, Mosley said. “In addition to a state-of-the-art equipment, we have designed the space to be maximally accessible to our older research participants. These details include everything from the color scheme to the type of exam tables we will use,” Mosley said.

For the first time, all of our researchers will be under one roof. This will allow us to expand, collaborate and accelerate the discovery process, and it will support the recruitment and retention of top investigators. The MIND Center’s current programmatic priorities include the creation of an early-career investigator program. This will fund “rising star” scientists as they develop their research studies. A related aim is to create a discovery fund, which will provide seed money for promising lines of scientific inquiry. This will allow scientists to develop their research ideas and make them more competitive when seeking outside funding.

The location also brings the Ford MIND Research Center physically closer to allied teams. The Department of Data Science in the Bower School of Population Health and the Neuroscience Institute will also have space in the building.

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CLASSMATES UNITED BY TRAGEDY

Establish ‘lasting memoriam’ to Nikki Shoemake-Patterson by Brandi Van Ormer/Gary Pettus

Throughout her life, Dr. "Nikki" Shoemake-Patterson provided the bond that kept her medical school classmates connected, an attachment that has only strengthened since her death last June.

“Our whole class has been brought together by this tragedy,” said Dr. Jennifer J. Bryan, UMMC associate professor of family medicine. “We grieved together, and together we hope to build a lasting memorial to her, because we all know that could have been us.” Bryan is among those who helped establish a scholarship fund in their classmate’s name following Shoemake-Patterson’s death on June 1 in Starkville as she gave birth to her second daughter, who died a week later. Shoemake-Patterson was 40.

“One reason this class has been so close was because of Nikki,” said Dr. Melissa Scholes, assistant professor of otolaryngology at the University of Colorado in Aurora. “Even after our residencies, we kept in touch with everybody. "She was the glue that held us together." As the president of the medical school class of 2003, Dr. Bernard “Bernie” Sy was one of those who "got the ball rolling" for the fund. "I got on Facebook and reached out to our class," said Sy, an internist and pediatrician in Lebanon, Tennessee. "It’s something we can work on together for her; and it will be good for her memory.”

The Paula Nicole “Nikki” Shoemake-Patterson, M.D. Award is reserved for females who are fourth-year medical students and who aspire to be a surgeon – just as the fund’s namesake did. "From the time she was small, Nikki said she wanted to be a doctor because of her grandmother – he was always sick from heart problems and diabetes,” said June Alford of Oktibbeha County Hospital and work with Dr. T. Steve Parvin in the Center for Breast Health & Imaging.

That proved to be so, as Nikki Shoemake excelled in her studies at Tupelo High School, where she graduated with honors, and at Mississippi State University, where, in 1998, she earned her bachelor’s degree in microbiology. In Starkville, years apart, she discovered two of her greatest passions: Bulldog sports – her father had been taking her to football games since she was 2 and Jason Patterson, who became her husband. When Grace was born, in January 2010, her mother was already stepping to Jason Patterson’s other children. In 2015, she and her family moved to New Haven, Connecticut, bearing her name, Scholes said. “She was very motivated and stood her ground as a surgeon, in what is largely a man’s world, but was still so compassionate with her patients.”

Her compassion is acknowledged by the scholarship that bears her name, Scholes said. “I believe she would have been honored.”

Dr. Nikki Shoemake-Patterson

Photos, clockwise, starting at left: Members of Dr. Nikki Shoemake-Patterson’s family meet for lunch during a visit last fall in Jackson, they are, from left, June Alford, Grace Patterson, Kay Patterson and Jason Patterson. Top right: Grace Patterson enjoy a visit to the beach in May 2013. Bottom right: Shoemake-Patterson and Dr. Steve Parvin work together with a patient in Starkville.

I’m not Dr. Shoemake; I’m Nikki!”

Kay Patterson of Terry, her mother-in-law, is one of the many relatives or friends who called her “down-to-earth.”

“She never towered her own horn, and was not one to go around talking about her accomplishments,” Patterson said. Among those achievements: In 2014, she was accepted as a fellow of the prestigious American College of Surgeons. “Nikki made such a big impact on people’s lives,” Kay Patterson said. “She has a lot of miracles out walking around in the world, and she would have had more.”

“No, I believe she would have been honored.”

To make a tax-deductible gift online, please visit www.umc.edu/NikkiShoemakePattersonAward.

To make a tax-deductible gift by check, mail your donation to: University of Mississippi Medical Center, Attn: Office of Development, 2500 N. State St., Jackson, MS 34456.
AMBITIOUS FUTURE

Children’s of Mississippi campaign pledges keep mounting  By Annie Oeth

T he ambitious goal of a larger, state-of-the-art space for pediatric care at UMMC is closer to reality, as is The Children’s of Mississippi campaign goal is now more than a third of the way to its $100 million goal. Starting out in April with a $10 million pledge from campaign chairs Joe and Kathy Sanderson, the campaign got another boost in August when Friends of Children’s Hospital pledged $20 million to the cause. Honorary chairs Eli and Abby Manning donated $1 million. “These,” said Dr. Louis Sulya, UMMC vice chancellor for health affairs and dean of the School of Medicine, “are the actions of people who believe in the future of our state because they are willing to commit their treasure to the worthy goal of the health of our children. Children’s of Mississippi, Batson Children’s Hospital and UMMC, and, indeed, the state of Mississippi, will be blessed by their kindness and generosity for decades to come.”

The campaign for Children’s of Mississippi will fund the construction of new buildings and renovations to the existing space within Batson Children’s Hospital. Plans include an expanded neonatal intensive care unit, a new Children’s Heart Center and PICU, a new pediatric imaging center, state-of-the-art operating suites, and a new, centrally located outpatient clinic.

The result will be a physical space that embodies the Children’s of Mississippi guiding vision, which is to touch the life of every child in Mississippi and help each reach his or her full potential. A well-equipped, properly sized NICU will include private rooms where parents can bond with their babies, designated breastfeeding rooms and overnight accommodations for parents.

The Children’s Heart Center and PICU will provide additional, larger, and better-equipped operating rooms, a layout that reduces the need to move fragile patients over long distances, more privacy for patients and families and comfortable, quiet waiting areas out of the public eye. The new imaging clinic will offer a cheerful, comforting imaging area located within the children’s hospital and imaging equipment designed specifically for children.

The theme for the campaign, “Growing. So they can grow up and enjoy healthy lives. I cannot think of a more worthwhile cause for Mississippians to embrace.”

UMMC are poised to become a regional and national leader in pediatrics at UMMC, said Children’s of Mississippi and Dr. Rick Barr, Suzan B. Thames professor and chair of pediatrics at UMMC, said Children’s of Mississippi and the state of Mississippi, will be blessed by their kindness and generosity for decades to come.”

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was constructive, and meant to make us think, and I appreciated it … .

His preoperative consultations frequently included discussions of complications “remain with me even today as I discuss physical exam findings with patients and students. …

Dr. Charles D. Miles of Columbus, Class of 1969

Blake, a cardiologist, was one of the first faculty members hired at the Medical Center; director of the Introduction to Clinical Medicine course, a professor of medicine by 1970, and a professor emeritus as of 1990.

Many of Dr. Blake’s observations and “sayings” remain with me even today as I discuss physical exam findings with patients and students. “When all else fails, examine the patient.” “The world is divided into two great groups of people, those who look at their stools and those who do not.” “Try not to interrupt the patient very often; she is attempting to tell you what is wrong with her.” “Don’t write anything ‘cute’ in a patient’s chart; you won’t like the way it sounds when read back to you in court.” …

Dr. John J. ‘Miles of La Mesa, California, Class of 1988 (orthopaedic residency)

As a kid I remember stopping at the Tote-Sum on Northside Drive on the way to church to buy molasses drops. After church if we were good we got to go have Sunday lunch at the Medical Center cafeteria, which might be a great treat. Then my mother would take us to his lab at UMMC, which was a magical place filled with jars of huge tapeworms and heartworms and all sorts of other weird and exotic things such as books with pictures of people with elephantiasis due to filariasis. Dint. Cotton farmers while we were there and from his farm. My wife worked with Mississippi cotton farmers while we were there and from his farm. My wife worked with Mississip Frazier loved his farm. I loved his tractor stories and do them on a regular basis.”

Dr. Frazier loved his farm. I loved his tractor stories and do them on a regular basis.”

Dr. John R. Jackson Jr. of Hattiesburg, Class of 1962

The only honor that escaped him was the Nobel Prize, which I think he would have achieved if his famous transplant of a cross-species of hearts had been more successful.

Not all was peace and harmony with Dr. Hardy. He had a habit of firing residents (for good cause) on Friday and rehiring them on Monday. He was a perfectionist and demanded complete competency in the operating room. If you were assisting him in surgery and you missed clamping a bleeding point, he would say something like “you missed again.” This made one feel like zero.

One of his medical pearls was: “No matter what field of medicine you enter, do only those procedures which you are qualified to perform and do them on a regular basis.”

To emphasize this point, he told a story that happened during his residency at the University of Pennsylvania. The famous Dr. William Osler/Abbott, who was one of the developers of the Miller-Abbott tube, was speaking to the students and physicians.

The tube was a large, nine-foot-long double tube with a bag attached which was used in treating small bowel obstructions. Because of the bag and the size of the tube, it was most difficult to insert. It was Dr. Hardy’s opinion that it would be great if the developer of the tube demonstrated his skill in inserting it.

We would feed the lettuce to tanks with hundreds of snails that I later heard was “a Snaveism” was a classic or cutting remark. (Hardy was chair of the Department of Surgery, 1955-1963, and an organ transplant pioneer)

Dr. Hardy was very ambitious in the hierarchy of academic medicine. He became the president of every surgical society in the world. He gave me this advice: “Start out as secretary, which no one wants, and work your way to the top.”

One of his medical pearls was: “No matter what field of medicine you enter, do only those procedures which you are qualified to perform and do them on a regular basis.”

Over the years, memories of Dr. Hardy have been a guiding light of my career. Every meeting I have attended, someone would say: “So you are one of Jim Hardy’s boys?” Immediately doors would begin to open.

With this story, Dr. Hardy emphasized the fact that being qualified to do the procedure was the most important thing. Later he would insert the tube after the speech.

If you have ideas for more reader poll questions, please send your suggestion to Gary Pettus, gpettus@umc.edu.

Dr. John Robert Snively (Feb. 16, 1913-June 12, 1964)

Another example of his snippy conversation was when he told me to make an announcement to the O.R. employees and [if] nothing happened, he would berate me. I would say, “But, Dr. Hardy, I did announce what you said,” and he would reply, “Well you obviously didn’t do it with any degree of authority.”

Yuck.

Dr. James C. Rice (June 12, 1893-Dec. 14, 1964)

Dr. James D. Ward (May 14, 1914-Feb. 19, 2003)

If you have ideas for more reader poll questions, please send your suggestion to Gary Pettus, gpettus@umc.edu.
**PET scan to Brenda Hankins, a participant in IDEAS.**

Chris Mosley prepare to administer a... of-the-art care and access to the latest treatments related disorders and allow patients to have state-

**Clinical trials allow us to advance clinical care, research and education in three areas:** stroke, addictions and neurotrauma. It encourages collaborations across academic departments, the Adult Hospital and Methodist Rehabilitation Center in Jackson.

**“With an objective marker such as the amyloid PET imaging, physicians can make a more certain diagnosis.”**

The other IDEAS goal is to learn if the scans improve patient outcomes enough to warrant their coverage by CMS.

**“My belief is that we will find that amyloid imaging provides a major improvement in both diagnosis and patient management and outcomes, and should be covered by insurance,” said Dr. Tom Mosley, director of the Memory Impairment and Neurodegenerative Dementia (MIND) Center.**

IDEAS is the first project in the MIND Center’s Clinical Trials Program, which will bring industry-sponsored research studies to Mississippi Alzheimer’s patients.

**“Clinical trials allow us to advance science in our search for effective treatments for Alzheimer’s and related disorders and allow patients to have state-of-the-art care and access to the latest treatments before they are available to the general public,” Mosley said.**

**NEW INSTITUTE KEEPS NERVOUS SYSTEM IN MIND**

“The nervous system is what allows humans to juggle while riding a unicycle, to envision the ceiling of the Sistine Chapel and contemplate the theory of general relativity,” said Dr. Keith Tansey, professor of neurosurgery and neurobiology and anatomical sciences. Because the nervous system controls the rest of the body, caring for this integral system requires an integrated approach. That is the basis of UMMC’s Neuroscience Institute.

Operational since July, the NSCI aims to advance clinical care, research and education in three areas: stroke, addictions and neurotrauma. It encourages collaborations across academic departments, the Adult Hospital and Methodist Rehabilitation Center in Jackson.

Tansey joined the faculty in February 2016 and will be one of the leaders expanding existing services into a leading neurotrauma center. He is also a senior scientist at MRC and a physician at the GV. Sonny Montgomery VA Medical Center in Jackson.

**“His recruitment represents the collaborative spirit that embodies the institute, which bridges departments and hospitals to help us become leaders in translational research,” said Dr. Michael Lehman, professor and chair of neurobiology and anatomical sciences.**

**Tansey’s recent work at Emory University and the Atlanta VA showed that electrical stimulation and assisted stepping might help augment spinal rhythmic motor output in patients with complete spinal cord injuries. The ultimate goal is to improve the continuum of care and quality of life for patients.”**

**GENE THERAPY BODES WELL FOR HEMOPHILIA PATIENTS**

An affiliation agreement between UMMC and MRC helps make this possible. Since 2014, the collaboration has helped the institutions develop well-connected patient care through reciprocal admitting privileges, faculty appointments and a plan to develop a physical medicine and rehabilitation department.

“It’s exciting to come at the beginning of this new collaboration, the Neuroscience Institute, with the possibility to bring all of these resources together,” Tansey said.

**LOOMING OBESITY ISSUE TARGETED BY MASSIVE AWARD**

The Medical Center has received its largest single award ever to confront one of the state’s largest health issues.

The five-year, $199 million award from the National Institutes of Health will fund the Mississippi Center for Clinical and Translational Research (CCTR). Supported by the NIH’s Institutional Development Award (IDeA) program, the Center will be the prevention, diagnosis and treatment of obesity and related health conditions. To address obesity, UMMC scientists and health-care professionals need an approach that brings their research from the laboratory bench to the greater population.
PROSTATE CANCER RATES ALARMING FOR BLACK MEN

A higher percentage of African-American men die of prostate cancer than males of any race in the nation—an alarming fact for both health-care providers and researchers.

That’s the impetus for a recommendation by a group of researchers that black men should have their own prostate screening guidelines.

“We know a higher percentage of African-American men die of prostate cancer, and they tend to have more aggressive forms of it at the time of initial diagnosis,” said Dr. Srinivasan Vijayakumar, professor and chair of radiation oncology.

Vijayakumar was an author on a paper published in BioMed Central Urology in May that concluded that, while prostate screening may lead to overtreatment in the overall group of men, black men should be screened with traditional and new genetic methods.

Divya Shenoy, an author on the paper and third-year medical student at UMMC, said it’s worthwhile “to invest in more tailored guidelines that are race-specific, as African-Americans have higher rates of morbidity and mortality due to prostate cancer.”

Prostate screening came under review because many believed too many men were overdiagnosed and overtreated, Vijayakumar said.

While the screening guidelines may be sensible for most U.S. men, the authors propose new guidelines be developed for African-American men.

REFINED FASD GUIDELINES FOSTER EARLY INTERVENTION

Dr. Omar Abdul-Rahman, professor of pediatrics, was part of the working group that developed new National Institutes of Health guidelines for diagnosing Fetal Alcohol Spectrum Disorders.

The research includes a new definition of prenatal alcohol exposure and guides to evaluating deficits and impairments.

What the team found was “fascinating,” said Abdul-Rahman. “Evidence of FASD has been seen across the world.”

In Mississippi, more than 450 babies are born each year with FASD, which can cause vision and hearing problems, heart and respiratory problems, facial deformities, low birth weight, learning disabilities and behavioral issues such as poor impulse control.

“Because FASD is as big a problem because of the wide spectrum of presentation,” said Dr. Mobalaji Famuyide, associate professor in neonatology.

“The devastating effects of FASD are not always evident in the newborn period and may be missed if maternal history is not explored.”

SAID DR. DANOTE SAVICH, PROFESSIONAL OF PEDRIATRICS AND CHIEF OF THE DIVISION OF NEWBORN MEDICINE AT UMMC: “WE KNOW THAT THE FULLBLOWN FETAL ALCOHOL SYNDROME IS JUST THE TIP OF THE ICEBERG, AND WE ARE RECOGNIZING THAT OTHER BABIES AFFECTED BY MATERNAL DRINKING WILL HAVE OTHER SIGNIFICANT IMPAIRMENTS.”

SPARK STUDY ADDS FUEL TO AUTISM RESEARCH

Dr. Robert Annett, professor of pediatrics, is leading the UMMC study site for the SPARK (Simons Foundation Powering Autism Research for Knowledge) national genetic study of autism spectrum disorders.

“SPARK’s goal is to build a registry of genetic information from individuals with autism and their families,” Annett said. “The results will be important for identifying the causes of autism and informing treatment-related studies in the future.”

UMMC is one of 21 institutions that will recruit a combined 50,000 participants and families to complete the largest study of ASD ever.

As a genome-wide association study, SPARK researchers will look for genetic markers that may contribute to ASD. By collecting DNA from parents and siblings as well, researchers can study if and how children may inherit ASD.

“This project is about families, not just ASD individuals,” Annett said. “It is important for these families to have a seat at the table so that an individual’s needs can be expressed.”

“FASD is the largest preventable cause of neurodevelopmental abnormalities in babies, infants and children, and there is no treatment available to fix this once it occurs.”

To risk FASD, alcohol use doesn’t have to be in the binge-drinking range, Abdul-Rahman said. “There is no known safe level of alcohol use during pregnancy.”

Knowing a child has FASD can be helpful in developing educational strategies. “Children with FASD tend to use more of their senses when learning—hearing and touching, and not just seeing,” said Dr. H. Eugene Hoyme, lead author on the research.

“We’re hopeful that the improved specificity of these guidelines will help clinicians to assess FASD better, thereby leading to early intervention for affected children.”

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BIRD SONGS AND WHISPERS

Cochlear implants open up world of sound for adults, too

By Ruth Cummins

W

hen pondering two of her life's biggest mile-
stones, Lindsey Edmondson didn't waste time
and didn't look back.

The first: She met her future husband, Brad Edmondson,
in February 2003 when they were students at East Central
Community College.

The second: Lindsey, who'd coped with progressive hear-
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WINNING MORE HEARTS
Life-saving VAD program widens pool of patients  
By Ruth Cummins

Since March 23, Jonathan Battle has been a different man. The difference-maker is slung across his shoulder, a satchel-type bag that contains a power pack and a backpack to take over the work from his weakened and damaged heart. UMMC is the sole medical facility in the state to offer patients ventricular assist devices before University Heart recently earned The Joint Commission designation means the pool of its ventricular assist device program, only patients who were candidates for transplants could receive the implant. The Joint Commission designation means the pool of potential patients who could benefit from VAD therapy is broadened. That includes what's known as LVAD “destination therapy,” an alternative for end-stage heart failure patients who aren’t candidates for heart transplantation. Until he gets in shape for a transplant, Battle is walking that path. Dr. Anthony Panos, professor of cardiothoracic surgery, implanted Battle’s LVAD. “It’s a great treatment, and we’re in a unique position to help many people,” he said.

VAD therapy provides long-term cardiac support for patients whose hearts are too damaged or diseased to provide adequate circulation to the body’s tissues. VAD therapy, heart transplant, and heart valve services are part of the mission of University Heart, a diagnostic and treatment facility on the UMMC campus that offers patients a full scope of heart care services under one roof. Because Mississippi has high rates of obesity, hypertension and heart disease, Panos said, the need for such therapy is great. “Heart failure is the final common condition patients have with many forms of heart disease,” he said. The LVAD doesn’t replace the heart, but it helps relieve symptoms such as constant fatigue or shortness of breath. It maintains or improves other organ function, and it better allows the patient to exercise and take part in cardiac rehabilitation. LVAD therapy can extend a patient’s life for five years or more, Panos said, and the technology continues to evolve and improve. “There are new devices in development, and as they come online, we will offer them here.”

CELLS PITCH
Electrical fields deliver a jolt to brain cancer  
By Cynthia Wall

Clinicians at UMMC are harvesting tiny electrical fields to zap a type of brain cancer that primarily strikes adults. Dr. Mark Anderson, assistant professor of neurology specializing in neuro-oncology, said the Optune device, designed and distributed by Novocure, delivers a steady stream of low-intensity electric fields that seem to slow or stop glioblastoma cancer cells from multiplying and may cause them to die. “This electrical field disrupts the cell’s ability to divide,” said Anderson, who works with adult patients and is the only physician in Mississippi certified to prescribe Optune. So far it’s worked in multiple brain cancer patients nationwide, shrinking the tumor and destroying the cancer cells. At the same time, it avoids harming healthy cells that need to grow and divide to survive.

Ben Newman of Wesson has used the device since March 1, 2015. “This tumor definitively has not grown and the doctor is saying a lot of what he’s looking at is scar tissue,” said Newman, who was diagnosed in March 2014. Patients using the device receive standard therapy for the tumors that may include surgery, radiation therapy and chemotherapy. Brain tumors often are hard to completely remove, so Optune comes into play after patients have completed radiation therapy.

Optune uses an array of small electrical cells that patients attach to their head. Wires are routed to the back and trail down their neck to a battery pack the patient can wear as a backpack, increasing their mobility. Newman was among the first patients for whom Anderson prescribed Optune. For those with recurrent glioblastoma, the therapy seems to work as well as chemotherapy, with fewer side effects. “We’re on the forefront of using it in treatment,” Anderson said. “That’s where it has its greatest benefit. Getting started early in treatment seems to keep the tumor from coming back. Once the tumor grows back, it seems to develop a resistance to chemotherapy.”

It’s in clinical trials to see if it also will work on other cancers that have metastasized to the brain, Anderson said. The parent company, Novocure, also is testing it in cancers that have metastasized to the brain, Anderson said. The parent company, Novocure, also is testing it in hopes of offering clinical trials on lung, pancreatic, ovarian and breast cancer.

“At two years, survival for newly diagnosed patients went from 32 percent to 48 percent,” Anderson said. “That’s where it has its greatest benefit. Getting started early in treatment seems to keep the tumor from coming back. Once the tumor grows back, it seems to develop a resistance to chemotherapy.”

By Cynthia Wall

Ben Newman wears the Optune device while working at his family’s store in Brookhaven.

By Ruth Cummins

Jonathan Battle, who has benefited from LVAD surgery.
Surgery rebuilds breasts with abdominal tissue

By Cynthia Wall

Artoria Woodson of Fayette was a perfect candidate for a breast reconstruction technique offered at UMMC. After undergoing a prophylactic bilateral mastectomy, she was able to avail herself of the procedure that uses fat, skin and blood vessels from a woman’s abdomen to reconstruct her breasts.

“I knew I didn’t want implants. Your body may reject it,” she said. “I’d rather use my own tissue instead of something foreign.”

An athlete and mother of three, Woodson also knew she wanted to avail herself of the procedure that uses fat, skin and blood vessels from a woman’s abdomen to reconstruct her breasts.

Using microsurgical techniques, they must reattach the blood vessels so the tissue will survive. Since no muscle is involved, most women recover more quickly and have a higher probability of maintaining abdominal strength. Several breast reconstruction techniques move muscle from a woman’s abdomen or back to aid in reconstruction.

Woodson’s decision to trust her surgery to Dr. Benjamin McIntyre, a fellowship-trained plastic surgeon, and Dr. Shawn McKinney, a fellowship-trained breast surgeon, was based on a feeling. Both are members of the UMMC Cancer Institute breast services care team.

Genesis testing had shown she had a strong chance of developing breast and ovarian cancer. Later, Woodson said, she probably will have her ovaries removed too.

“Blood flaps reconstruction she chose is not rare but is harder to do,” McIntyre said. Spaying the muscle means more abdominal strength for the patient down the road.

“This is a surgery for the medical it is,” McIntyre said. Sometimes, as in Woodson’s case, it all can be done in one day.

The all-in-one day surgery especially suits women like Woodson who have it to prevent cancer. McIntyre said women who have an aggressive breast cancer and who need radiation therapy may choose to have a mastectomy and reconstruction separately.

After their initial recovery, few women have problems with DIEP flaps, he said. Women who choose to have implants will need to see their surgeon every 12 to 18 months. Those who choose DIEP may go years between visits.

More information is available about the DIEP procedure at www.breastcancer.org/treatment/surgery/reconstruction/types/autologous/dIEP.

Homeless turn to POP for free mental health services

By Gary Pettus

In just three months’ time, demand tripled for the free services of a new mental health program offered to those who have no insurance or have no home. When the Psychiatry Outreach Program (POP) opened its doors on July 23, three or four people showed up at the Jackson Free Clinic on a Saturday afternoon complaining of depression, anxiety, insomnia or some other concern that might have remained untreated.

Three months later, on October 15, the number was 11; that’s how many homeless or uninsured Jackson-area residents had signed up for appointments with the staff of volunteers led by attending physician Dr. Charity Torrence, assistant professor of psychiatry in the Department of Psychiatry and Human Behavior.

“They’re fighting for a place to be seen,” she said. It’s because of this struggle – magnified by the state’s recent cuts to mental health programs – that Torrence developed POP with psychiatry residents Dr. Charles Richardson and Dr. Matthew Walker.

Eventually, POP’s volunteers would like to take the services to the streets of Jackson: “We want to go to the patients, not make them all come to the clinic,” said Richardson, a fourth-year resident.

“Maybe one day we could offer ‘street psychiatry’” that’s kind of the working name.”

For now, patients make appointments at the student-run Jackson Free Clinic next to the Humble Church of God in Christ on Martin Luther King Jr. Drive in west Jackson; the clinic, with its staff of medical students supervised by physicians, provides free, non-emergency care to adults, ages 18 to 65, who can’t pay.

Since July, the clinic’s volunteers have been working with the staff of POP to sponsor “mental health day,” reserving two exam rooms for the new psychiatry program, whose volunteers also include Dr. Jon Jackson, assistant professor of psychiatry, and fourth-year medical students Jonathan Baker and Yolonda Ross.

Most people seeking mental health services from POP are referrals from the regular medical staff of the Jackson Free Clinic, which is open every Saturday. POP is available on the third Saturday of each month, from around noon until 4 p.m.

With doctors’ limited hours, coupled with growing demand, POP’s staff is seeking to work with other free programs, such as Mission First and We Will Go Ministries to reach more people.

At stake is the well-being and quality of life, not only for the homeless, but also for Jackson-area residents like Linda Poarch of Flowood.

“I’m ready to get off this walker and on with my life,” said Poarch, one of the patients who showed up in October. She is suffering from insomnia and a depressed mood linked to pain that wrecks her left side and back, and her leg from the knee down, she said.

“I can’t afford insurance,” she said. “I wouldn’t be able to go anywhere else except the emergency room. They’ve helped me a lot here.”

Two days after Poarch visited the clinic, researchers at a Las Vegas conference reported that patients who bring their mental health issues to the emergency room are more likely to be uninsured, compared to other patients.

Presented at the annual meeting of the American College of Emergency Physicians, the report also noted that emergency psychiatric patients, compared with patients with physical problems rely more on the ER for treatment; are more often admitted to the hospital from the ER; are kept in the ER longer; and, because of weaknesses in the mental health care system, cannot be sent home after just one or two days.

This all adds up to greater costs for health care. As for homeless patients, emergency departments are not prepared to handle their mental health needs. At UMMC, a homeless person spends about three nights per visit in the hospital, costing up to $9,000.

“If the patients could come meet us here at the free clinic, we could ease the burden on emergency rooms and the clinics,” said Torrence, who is also a staff psychiatrist at Mississippi State Hospital.

“So we hope to show, eventually, that this can affect the bottom line.”

When psychiatric patients show up at UMMC’s ER, many have been kicked out of group homes and are looking for help, Torrence said. Many don’t have their medications, which can lead to illegal drug use.

“Amon all homeless people, two-thirds have a drug addiction, and one-third have a mental illness,” she said.

All of POP’s services are free. Patients must cover their own prescription drug costs.

The staff hopes to expand the scope of POP, making it part of the psychiatsry residency program and using it to strengthen the department’s presence for the community’s mental health patients who are not being served.
THIGPEN HELPS FUEL CANCER CARE'S GREAT AWAKENING

By Cynthia Wall

For decades, Dr. Tate Thigpen has improved the quality of life for cancer patients throughout Mississippi.

F or more than 43 years, Dr. James T. “Tate” Thigpen has helped UMMC’s cancer programs grow from a seedling in 1973 to an orchard in 2016, the year he chose for retirement.

But John Blessing calls the Picayune native’s retirement as “far too young-ago;” he said, he was charged with finding promising studies and clinical trials. Through a plan devised by him and his committee, the GOG essentially established the current standards of care in gynecologic oncology.

In Mississippi, Thigpen also was focused on training the people who could deliver cancer therapies. “We’ve gone from a situation where there was very little cancer care to a situation where most people can get very good cancer care anywhere in the state,” he said.

Dr. David Morris, hematologist/oncologist at Hattiesburg Clinic and president of the Mississippi Society of Oncology, said he once saw the breadth of Thigpen’s work acknowledged at an international gynecologic oncology conference in New York.

“A faculty member from Sloan Kettering pointed Tate out to his fellows and informed them, ‘Dr. Thigpen is the most influential man in gynecologic oncology,’” Morris said.

For the past three years, Morris and the MSO have joined with UMMC to help fulfill another dream of Thigpen’s: a conference at which Mississippi cancer caregivers can learn about the latest research presented at the American Society of Clinical Oncology annual meeting.

Thigpen brought hope to thousands of families facing a gynecologic cancer diagnosis, said Dr. Brinivasan Vijayakumar, chair of the Department of Radiation Oncology and former Cancer Institute director.

“He's touched so many lives here, both patients and young doctors. That doesn't compare to the number of lives he and others in the GOG and NRGs saved through the research they identified and funded.

“Even though we're losing him as director of Hematology/Oncology, his influence will long be felt in Mississippi.

“His contribution to reducing deaths from cancer is incalculable. We owe him a great debt for that work and the passion that drove it.”

Dr. Tate Thigpen, right, shows off an autographed football presented to him during his Nov. 30 retirement reception by Dr. Dan Jones, left, interim chair of medicine. The football was signed by Hugh Freeze, Ole Miss’ head football coach, who wrote, “Dr. Thigpen – congrats on retirement! Go Rebels!”
ON BALANCE, YOUNGBLOOD IS RIGHT FOR NEW CEO ROLE

Liz Youngblood is the new chief executive officer for UMMC’s three adult hospitals and the adult metro area outpatient clinics.

By Ruth Cummins

In her life on the job and at home, Liz Youngblood strives for balance. “She’s applying that outlook to her new position as chief executive officer of the three adult hospitals and the metro area adult outpatient clinics of UMMC.”

“I’m definitely in learning mode,” said Youngblood, who is the new chief executive officer for UMMC’s three adult hospitals and the adult metro area outpatient clinics. “I started my career in direct patient care,” Youngblood said. “I really enjoyed that, and it gave me the foundation for what I do now. I bring a clinician’s perspective, and you need different perspectives around the table. She is a graduate of the Executive MBA Program at Southern Methodist University in Dallas and is a Fellow in the American College of Healthcare Executives. What brought her to the Medical Center, Youngblood said, is the chance to make a difference. That includes supporting the “clinical” work of Chief Medical Officer Dr. Michael Henderson as he shepherds the organization’s quality, care and performance improvement.

Youngblood said that when she interviewed here, “everyone had the same goals and vision: to improve the lives of the people we serve across the state of Mississippi through health care, education and research.” Youngblood’s “nursing background, rich administrative leadership experience, and strong record of achievement in a large, respected health system have prepared her well for her role here to address challenges of our rapidly changing health care environment,” said Dr. Charles O’Mara, associate vice chancellor for clinical affairs.

“She is personable, quick to smile, driven to achieve, and easy to work with, traits that convey confidence and credibility and make it clear that she loves what she does in health care.” Kevin Cook, health system chief executive officer, praised her “talent and experience.”

Her track record of operational success will help UMMC continue its journey toward becoming a nationally recognized academic medical center,” Cook said.

A native of Tampa, Youngblood takes moving to a new job in stride. As a child, her father’s job took her to Florida, Arizona, Oregon, Washington, California and Connecticut. She and her husband Troy live in the Flora countryside with their German Shepherd Maggie, who delights in barking at the deer who creep onto their land. “We didn’t realize how much of a city dog we had,” Youngblood said with a laugh. “I didn’t know a lot about this area and didn’t realize what a great place this is to live, and how wonderful the people are. I don’t think people realize how great of a place this really is.”

The Medical Center, she said, is where she wants to be as a way to be part of the solution for Mississippi’s health-care challenges. “You can’t work on everything at once, but what’s most important is that we are all working on the same things together.”

To read about all new faculty at UMMC, visit www.umc.edu/news_and_publications/ecvnewfaculty.aspx

DR. PRKRATI ACHARYA, A recent clinical fellow in medicine at Mount Auburn Hospital, Harvard Medical School, Cambridge, Massachusetts, has joined the Medical Center faculty as an assistant professor of medicine. After receiving her MBBS from Jawaharlal Institute of Postgraduate Medical Education and Research, Pondicherry, India, in 2000, Acharya began her clinical training at the Henry Ford Health Sciences Center, Detroit, Michigan, and completed her internal medicine residency and chief resident at Mount Auburn Hospital, a teaching hospital of Harvard Medical School. While there, her research interests included understanding patients’ perspective on hospital readmission. She also actively participated in novel drug discovery projects in multiple myeloma and Waldenstrom’s macroglobulinemia at the Dana Farber Cancer Institute, Boston. Acharya has a patent on the composition and manufacturing processes of a toxicity-free botanical drug for treatment of chronic diseases.

DR. KRISTEN J. ALSTON, a recent postdoctoral fellow in clinical health psychology in the Department of Family Medicine, has joined the Medical Center faculty as an assistant professor of family medicine. After her clinical psychology internship at the Henry Ford Health Sciences Center, Detroit, Michigan, she completed her PhD with specialization in health psychology at East Carolina University in 2015 and began her postdoctoral fellowship at UMMC that year. Her clinical interests include working with residents, physicians and other health-care providers, delivering direct consultative services and providing behavioral health clinical services to patients with comorbid behavioral concerns and acute/chronic health conditions. Among her research interests are treatment adherence among pediatric sickle cell disease patients and chronic disease management in underserved patient populations.
DR. THOMAS D. AMANKONAH, former medical director of liver transplantation/hepatology at Loma Linda University Medical Center in California and medical volunteer in gastroenterology and hepatology in Ghana, has joined the Medical Center faculty as an associate professor of medicine. Amankonah earned his Diploma of a Physician Degree at the Medical Academy of Gdansk, Poland, in 1986. He completed his basic medical education and specialization in hepatology and liver transplantation at Cedars-Sinai Medical Center, Los Angeles, California, in 2000. After receiving his medical degree from Damascus University, in 1998, he joined the faculty of the Children’s Hospital of Wisconsin, Milwaukee, has joined the Medical Center faculty as an assistant professor of medicine. Amankonah became director of the American Pediatric Neurology Clinic in Damascus and joined Damascus University the following year to direct its Bioethics Program. During that time, he became the academic coordinator at the World Health Organization. In 2009, Bakdash became the first recipient of the Nakasone Award for Merit and Development of Japan. In 2010, he moved to Billings, Montana, and became that state’s only child neurologist, serving at St. Vincent’s Hospital. He has served as medical director of pediatric neurology at Mercy Hospital, Springfield, Missouri, and on the staff of the Children’s Hospital of Wisconsin. He is in the last year of the Master’s of Education in the Health Professions Program at Johns Hopkins. Bakdash is committed to building a community-based rehabilitation program to aid millions of Syrians with disabilities. He is the author of the book “Inside Syria, a Physician’s Memoir.”

DR. ADAM CLARK BYRD, a recent internal medicine and dermatology resident at the University of Minnesota, Minneapolis, has joined the Medical Center faculty as an assistant professor of dermatology. A native of Louisville, Byrd served as a cavalry officer in the Second Armored Cavalry Regiment at Fort Polk, Louisiana and was assigned for four years of service in Operation Iraqi Freedom. While serving as an officer in the Medical Service Corps Branch of the Minnesota Army National Guard of the United States, Byrd earned his M.D. at the University of Minnesota in 2011. He then began his residency training in Minneapolis while serving as a major in the Medical Corps Branch of the Minnesota Army National Guard in Cottage Grove. The recipient of various military honors, including Army Commendation Medals and Army Achievement Awards, Byrd is an active member of several professional organizations. He continues to serve as a field surgeon in the Mississippi Army National Guard.

DR. JOSE LUCAR, a recent infectious diseases fellow at George Washington University, Washington, D.C., has joined the Medical Center faculty as an assistant professor of medicine. After receiving his medical degree from the Universidad Peruana Cayetano Heredia, Lima, Peru, Lucar worked in the Alexander von Humboldt Tropical Medicine and Biotechnology Laboratory and had advanced training in infectious and tropical diseases control in a program sponsored by the University of Alabama at Birmingham. He performed pre-residency house staff work at the British American Hospital in Peru. Lucar did his internal medical training at the Georgetown College of Medicine/Hospital Washington Center Program, Washington, D.C., before beginning his infectious diseases fellowship. Lucar is the lead investigator of a NIH-funded project describing sexually transmitted infections among a large cohort of HIV-infected individuals receiving care in the Division of Infectious Diseases. He will be developing the bone and joint infections disease service at UMMC.

DR. JENNIFER MAY M. VILLACORTA, an assistant professor of medical neurology and director of the Movement Disorders Clinic at the Children’s Hospital of Wisconsin, Milwaukee, has joined the Medical Center faculty as an associate professor of medicine. After receiving his medical degree from the University of the Philippines, and had advanced training in infectious and tropical diseases control in a program sponsored by the University of Alabama at Birmingham. She completed his neurology- mental health fellowship at the UCLA Neuropsychiatric Institute and Children’s Hospital, Houston. His research interests are related to psychiatric disorders, movement disorders, and cognitive disorders, with a focus on developing and implementing novel treatments for these conditions.
Dr. Raman Palabindala, an assistant pro-
tessor of medicine, is among the Top
Hospitais for 2016, one of 10 physi-
cians chosen from dozens of nomina-
tions nationwide by the editorial board
of the publication of the American Col-
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At age 35, he’s one of the youngest hon-
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He was nominated by his colleagues at Southeast Al-
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MENA APPRAISED AS ADVOCATE FOR LGBT HEALTH CARE

The Gay and Lesbian Medical Association has selected Dr. Leandro Mena, professor of infectious diseases and director of the Center for HIV/AIDS Research in the Myrtle Evers Williams Institute for the Elimination of Health Disparities, for its 2016 GLMA Achievement Award.

GLMA, a national group of health professionals, strives “to ensure equality in health care for lesbian, gay, bisexual and transgender (LGBT) individuals and health-care providers.”

The award recognizes outstanding contributions to the LGBT community, exemplary commitment to improving the quality of health-care services for LGBT people and demonstrated improvement of the health-care environment for LGBT health-care workers.

It also honors those “who have significantly contributed to gains made by the LGBT civil rights movement.”

According to a letter from Michelle Easly, GLMA president and executive director, Mena “is one of the most influential LGBT health activists over the past decade, creating visibility for LGBT health in a very socially conservative environment.

“His creative approaches, community engagement and charm have brought him the respect of medical and public health authorities locally and nationally.”

NARANG CITSES MENTORS FOR NEWBORN STUDY AWARD

Dr. Radhika Narang, a third-year fellow in the Division of Newborn Medicine, won the Young Investigator Award at the American Academy of Pediatrics Section on Neonatal Perinatal Medicine conference in San Francisco in October.

Narang was one of 10 chosen from nearly 200 to present her research as an oral presentation, and her project, “Exploring the Effect of Intrauterine Growth Restriction (IUGR) and Hypoxic-Ischemic (HI) Brain Injuries in Newborns,” was one of two to receive the Young Investigator Award.

IUGR limits a baby’s growth inside the womb and can lead to low birth weight and decreased oxygen levels. Hypoxic-ischemic brain injuries, caused by a lack of oxygen and blood, are an important cause of significant illness in the neonate, leading to cerebral palsy, developmental delay, learning and intellectual disabilities, seizures and death.

Narang is studying whether IUGRs make hypoxic-ischemic brain injuries worse. It is hoped that the research will one day lead to new treatment strategies for HI brain injuries in newborns.

These awards have typically been presented to fellows from the top U.S. academic institutions, and Narang said she was proud to say the University of Mississippi is part of that group,” said Dr. Renate Savich, professor of pediatrics and chief of the Division of Newborn Medicine.

Narang said the honor would not have been possible without the mentoring of the late Dr. Yangzheng Feng as well as the guidance of Dr. Yi Pang, Dr. Lirwan Fan and Dr. Norma Ojeda.

“Toward the end of my fellowship, I now am proud to say the University of Mississippi is part of that group,” said Dr. Renate Savich, professor of pediatrics and chief of the Division of Newborn Medicine.

ZHUO LANDS FELLOWSHIP IN SCIENCE ADVANCEMENT

Dr. Jia L. Zhuo, professor of pharmacology and toxicology, was elected in October as a 2016 fellow of the American Association for the Advancement of Science in the section on medical sciences.

Zhuo received his M.D. from Guangxi Medical University, China in 1983 and his Ph.D. in renal physiology from the University of Melbourne, Australia in 1990.

His research focuses on the roles of endocrine, paracrine and intracrine angiotensin II in the kidney.

He is a permanent member for the National Institute of Health/Center for Scientific Review Hypertension and Microcirculation Study Section.

UMMC CONTRIBUTES TO ‘A’ TELEMEDICINE RATING

Mississippi’s supportive policy landscape for telemedicine, including services for residents coping with mental illness, earned the state an overall “A” rating from the American Telemedicine Association in its 2016 state-by-state report card.

Mississippi was among only eight states earning that highest score in the association’s evaluation of performance in telemental and behavioral health.

The Center for Telehealth at the University of Mississippi Medical Center in 2015 recorded 1,600 patient encounters—nearly double the 900 in 2014. The center fills gaps in mental health services in the state’s rural corners by offering general and specialized psychiatric services delivered by an experienced team of psychiatrists, psychiatric nurse practitioners, psychologists, counselors and therapists.

Patients ranging from children to the elderly are treated using a live audio-video stream on a computer that connects them with specialists at UMMC. Visits are conducted discreetly in their local doctor’s office, or locations including schools, hospitals or community mental health centers.

“We’re pleased that the ATA has recognized Mississippi as an A-rated,” said Michael Adcock, the center’s administrator. “This rating was earned by the hard work and support of leaders across our state.

“It created an environment that allows us to provide expert care to patients in their communities and homes.”

GOLD FOUNDATION TEACHING HONORS

During the July 21 Gold Humanism Honor Society induction ceremony, more than two dozen UMMC senior medical students, residents and others were recognized for their leadership, clinical care, dedication and caring relationship with patients.

Receiving their Gold Humanism medallions during the observance at the Norman C. Nelson Student Union were front row from left, Ashley Williams, Tara Lewis, Jesse Xie, Mary Ruth Windham, Eric Merkle, Janaemey Shell, Brock Banks and Laurel Lockey; and back row from left, Ashley Villarreal, Hudson Frey, Tanya Green, Lauren Williamson, Maggie Waster, Lauren Scholer, Daniel Lyons, Daniel Krebs, Sean McCleary, Ben Carroll, Jeremy Archer, John Caleb Green, Richard Whitlock, Josh Norren and Brittany Bynum.

Other honorees not pictured include Joel Pahling, Ian Mallett and Stephen Morgan.

The New Jersey-based Arnold R. Gold Foundation, started by Dr. Arnold Gold, Dr. Sandra Gold and others, was created in 2001 to “perpetuate the tradition of the caring doctor.”

Using a live video connection, Amy Eastly, a psychiatric nurse practitioner at UMMC’s Center for Telehealth in Jackson, consults with a school nurse before treating a student.

A
On August 11, the future of medicine in Mississippi was on display at the Belhaven Center for the Arts in Jackson, where members of the Class of 2020 were welcomed to their chosen profession with a handshake and a white coat.

Each year during the White Coat Ceremony the latest crop of physicians-in-training are awarded this symbol of their commitment to professionalism and their future patients. This year, an estimated audience of 500-600, including the students’ relatives and friends, looked on as the newly-minted M1s received their Arnold P. Gold Foundation pins – representing medicine’s humanistic impulse – and recited the Hippocratic Oath and A Covenant for Medical Education.

They also heard the keynote address from Dr. Richard Gunderman, chancellor’s professor of radiology, pediatrics, medical education, philosophy, liberal arts, philanthropy and medical humanities and education, philosophy, liberal arts, philanthropy and medical humanities and health studies at Indiana University, who said, “What really counts in medicine is 2020.”

“Towards the end of my sophomore year in college, my dad called to tell me my mom was very sick. I vividly remember the fear and helplessness. In the future, I hope I can help other kids and families in a similar crisis feel safe and supported. It would be the greatest honor and responsibility to care for a vulnerable individual.”

Brandon original Anthony Jay Carter is a pledge of professionalism during the 2016 White Coat Ceremony. The short, white coats are graced with the students’ names, the school’s escutcheon, and a symbolism representing honor, privilege, responsibility and the country’s dedication to their future patients’ well-being. Members of the Class of 2020, including Ana Gayle Christopher, foreground, recite the Oath of Hippocrates.

“Brought up in Jackson, Philip Yuanlin Qu, a 2012 graduate of St. Andrew’s Episcopal High School, was a nationally-ranked tennis player in an undergraduate at Amherst College in Massachusetts, which won the Division III National Championship his sophomore year. After deciding to be close to his family, he returned home to attend, and play, for Mississippi College. During the summers as an undergraduate there, he enjoyed working in UMMC’s Department of Physiology and Biophysics so much he led to winning a summer research fellowship from the American Physiological Society. While growing up, he said, “I was very lucky to be around great physicians who loved their jobs.”

A Madison native, Shanu Preetha Moorthy was 5 when she learned from her parents the story behind her scar and how she received her middle name. Preetha is also the name of a physician, she said. “In light of the scar that initially inspired the pursuit of this dream, my hope is that my service will too, someday, leave an inspirational and positive mark on the field of medicine.”

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“Towards the end of my sophomore year in college, my dad called to tell me my mom was very sick. I vividly remember the fear and helplessness. In the future, I hope I can help other kids and families in a similar crisis feel safe and supported. It would be the greatest honor and responsibility to care for a vulnerable individual.”

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Three generations of Moore doctors — from left, Dr. Paul Harold Moore Sr., Dr. Paul Harold “Hal” Moore Jr., and Dr. Paul Harold Moore III — earned their MD's at the Medical Center.

The loyal Treatment

I t’s not uncommon for a family to remain loyal to a university or college through several generations.

But when Dr. Paul Harrold Moore Sr. graduated from the four-year School of Medicine nearly six de
cades ago, he began forging a singular family tradi
tion of sustained loyalty and service to the institution through three generations.

“I don’t understand why anyone wouldn’t stay associated with it,” Moore said. “You’re around such good people and you get to do such good things.”

Before the family’s association with UMMC commenced, Moore Sr. contributed 18 months of World War II service in the U.S. Army and encouraged him to try it.

“First and foremost, presidents of the alumni association must love the University of Mississippi,” said Dr. Dan Jones, Sanderson Chair in Obesity, Metabolic Diseases and Nutrition, and former chancellor.

“This is a role that is far beyond ceremonial and honor,” said Jones, who is also director of clinical and population science. “The alumni president is a major advisor to the chancellor and University leadership.”

Naturally, the dually Moore’s profession and alma mater were all but pre-ordained.

GRAVITATIONAL PULL

Growing up, I really didn’t know anything else,” said Paul III. “No matter what summer job I tried, I always gravitated back to medicine.”

When he finished at Ole Miss, and then the School of Medicine, his father and grandfather were there.

“Having both of them present at my White Coat and graduation ceremonies was significant, and probably as important of an occasion for them as it was for me,” Paul III said.

But the youngest Moore did choose a slightly different path, opting for ob
ter and urogynecology.

“I tried very hard to make radiology my passion, but in the end I gravitated toward proce
dure- and surgery-related specialties,” he said. “I enjoy seeing patients and developing those relationships.”

After his residency at University of Kentucky Chandler Medical Center, Lexington, and fellowships at Northeast Urogynecology in Atlanta, New York, and C. Paul Perry Pelvic Pain Center in Birmingham, Alabama, he spent two years in private practice before his desire to return to teaching led him back to UMMC, in the Division of Gynecology and Urogynecology.

“As I worked around the country, I felt I was as pre
dpared, if not better prepared, than I would have been in any other medical school I encountered,” he said.

“As much as I loved my patients, helping them was not enough for me. I still have a desire to help others and bring joy to their lives,” Paul III said.

Now an assistant professor of OB/GYN, part of his role is interviewing and recruiting residents to UMMC — an act of loyalty that is in his blood.
When the medical school Class of 1966 held its 50th reunion this summer, every female graduate made it – both of them. “It wasn’t easy being only one of two women in the class with mostly men,” said Dr. Lynda Lee of McComb, “but when I graduated, they were glad for me. I figured they must have liked me.”

Her colleague, Dr. Benella Oltremari of Greenville, said she worked as a nurse for about a decade before she entered medical school more than five decades ago. “As a nurse, I had gone on rounds with these doctors who were all men,” she said, “and I thought, ‘If he can be a one, I know I can.’”

The two were among 25 “Golden Grads” honored by UMMC during an Aug. 26 ceremony led by Dr. LouAnn Woodward, who made it a point to have her photo taken with Lee and Oltremari. “We’ve come a long way in medical education,” said Woodward, vice chancellor for health affairs and dean of the School of Medicine. Addressing the graduates and their family members at the Old Capitol Museum in Jackson, Woodward noted that “things have changed a little bit. This current class has 74 men and 71 women. I’m proud of that.”

Several other classes held their reunions simultaneously earlier in the day during a reception attended by around 80-90 alumni at Walker’s Drive-in, including Lee, who brought a photo album with her. The focus was mostly on those celebrating their Golden Anniversary, an occasion marked by the awarding of medallions to those in attendance.

Class member Dr. Mart McMullan read the names of the 16 colleagues now deceased, including Dr. Henry J. Sanders III. His wife Susie Sanders and their grandson Charles Murphy Sanders, 12, accepted the medallion on his behalf. Among those who spoke was Lee, who said, “I love you all. I’m glad we made it and we’re still here. And I’ve got pictures if you want to see them.”
D r. Walter “Mack” Gorton of Belzoni, whose commit- ment to his patients led him to recruit his own son to his medical practice, was celebrated on Aug. 13 as the 2016 Distinguished Medical Alumnus – much to his initial surprise.

“Several weeks ago when they told me about this, I nearly fainted,” he said in his remarks during the awards dinner in Jackson.

Gorton, who for four de- cades has cared for patients in an area with some of the nation’s highest rates of heart disease, diabetes and obesity, was one of six phys- cicians honored, including the five latest inductees into the university’s Medi- cal Alumni Chapter Hall of Fame. They are Dr. Alton Cobb, Dr. Martin L. Dalton Jr., Dr. W. Briggs Hopson Jr., Dr. James “Jim” Martin and Dr. David Watson.

Sponsored by the Medical Alumni Chapter and the Office of Alumni Affairs at UMMC, the event paid tribute to those who “embody that spirit, that passion and that commitment we need,” said Dr. LouAnn Woodward, vice chancellor for health affairs and dean of the School of Medicine. Also commending the guests of honor was Dr. Jeffrey Vit- ter, University of Mississippi chancellor, who said, “Our greatest strength is our people. That value resonates around the world. … I continue to be astounded by the natural beauty of the urbanumo and the transformational value of the Medical Center.”

An internal medicine specialist and 1968 University of Mississippi School of Medicine graduate, Gorton is the seventh recipient of the award. He began practicing medi- cine in the county seat of Humphreys County in 1973; 21 years later he welcomed to his practice one of his sons.

Dr. S. Carlton Gorton, a 2004 medical school alumnus, who introduced his father, said “My dad has a gift for developing relationships with his patients and colleagues,” Carlton Gorton said, “but his greatest gift is the gift of love. … If you ask each of his patients, ‘Who is Dr. Gorton’s favorite?’ each would say they are …

“He’s had to deliver bad news to people he really cares about, but he’s also been able to take care of a lot of injuries and heal a lot of lives.”

Lionized locally with a “Mack Gorton Day” and a medical school scholarship endowed by Gorton, the doctor acknowledged the rapport he enjoys with his patients and neighbors, including high school football coaches.

“They’ll let you walk up and down the sidelines dressed like a coach,” he said. “One of them let me call a play or two.”

**The Hall of Fame Awards recipients:**

**Dr. Jeffrey Vitter:** For left, chancellor of the University of Mississippi and Dr. LouAnn Woodward, far right, vice chancellor for health affairs and dean of the School of Medicine, congratulated the honorees at the Medical Alumni & Friends Awards Dinner held Aug. 13 at Shriver Hills Club in Jackson. Awards were presented to, from left, Dr. Walter “Mack” Gorton, Distinguished Alumnus of the Year; Dr. David Watson, Distinguished Alumnus of the Year; Dr. Alton Cobb, Distinguished Alumnus of the Year; Dr. W. Briggs Hopson Jr., Distinguished Alumnus of the Year, and Dr. James “Jim” Martin. Also inducted into the Hall of Fame was Dr. Martin Dalton Jr., who was unable to attend.

**Dr. Alton Cobb** of Jackson – A 1952 graduate of the University of Mississippi’s two-year medical school in Oxford, Cobb is renowned for his contributions to public health. For 20 years, starting in 1973, he was director of the Mississippi State Depart- ment of Health, helping the state attain national recognition for its public health achievements, many of which endure, including high immunization rates.

“You have to like working with others to do public health,” he said with a laugh.

He was introduced at the awards diner by his son-in-law Dr. Timothy Alford, a Kosciusko family medicine physician, who said, “There’s a chance that at least half of you had your birth certificate signed by Dr. Cobb.”

“I’ve been married a week and a half after my 21st birthday celebration at his beloved home place. I have been well schooled in the critical matters of public health along with the best way to grow pine trees. In my opinion Alton is Mississippi’s foremost health analyst.”

Born in a log cabin in Camden, Cobb completed his medical degree in 1954 at the Johns Hopkins Medical School. After serving in the military, he attended Tulane University, also completing a res- idency in preventive medicine.

Eventually, he began what would be a 35-year career with the Mississippi State Department of Public Health and served as the first director of the Mississippi State Medicaid program.

**Dr. Martin L. Dalton Jr.** of Mo- con, Georgia – A nationally-recognized thoracic surgeon, Dalton participated in the world’s first lung transplant, with Dr. James Hardy, in 1963.

Interviewed prior to the ceremony, which he was unable to attend, Dalton said of that historic moment, “Some- times it’s hard to believe I was really there, actually a part of it. But in the end, and it’s something that was always reinforced by Dr. Hardy, is the care and respect for individuals is what in- spired me to work so hard.”

Dalton has served as a research fel- low at the Walter Reed Army Institute of Research in Washington, D.C., and as director of the Texas Tech University School of Medicine in Lubbock; and as a professor in the Department of Surgery at UMMC.

In 1991, Dalton was named professor and chairman of the Department of Surgery at Mercer University School of Medicine in Macon, Georgia, where, later, he oversaw the school’s re-accreditation and the es- tablishment of a four-year School of Medicine campus in Savannah.

Dr. Robert Elliott of Baton Rouge, a 1961 School of Medicine graduate, was scheduled to pay tribute to Dal- ton, but was stranded in Louisiana be- cause of flooding. Speaking on his father’s behalf was Dr. Mary Ghere, a surgical resident at UMMC, who delivered his remarks. “(Dalton) was personable, kind and mentoring, but you knew when you had done something wrong. He was a great organizer, a great surgeon, and a great teacher – a real role model.”

**Dr. W. Briggs Hopson Jr.** of Vicksburg – A former clinical associate professor of surgery at UMMC, Hop- son is credited with developing a state- wide trauma network.

He taught the first advanced Trauma Life Support Course in the state. For 30 years, he was medical controls director for Mis- sissippi’s Emergency Medical Services. Before arriving at UMMC in 1989 as an associate professor of surgery, he held a teaching appointment at the University of Tennessee.

Hopson now practices as a general and peripheral vascular surgeon in Vicks- burg, where he also serves as medical director and vice president for medical affairs at River Region Medical Center. For more than 35 years, he was in- volved with the Miss Mississippi page- ant and served as CEO and chair- man of the board.

“Medicine in Vicksburg would not be what it is without Dr. Hopson,” said Dr. Tim Kerut, president of the University of Mississippi Medical Alumni Chapter. “Vicksburg in general would not be what it is without him.”

During his remarks, Hopson said, “When I got the letter telling me you were honoring me tonight, I cried…. It’s been a wonderful, wonderful life.”

**Dr. James “Jim” Martin** of Jack- son – In 2005, he reported in Obstetrics & Gynecology a recommendation for treating hypertension that has had a lasting impact on obstetric and preg- nancy care across the world.

“We were lucky. Dr. Martin came to Mississippi,” said Dr. James “Marty” Tucker, a 1984 School of Medicine alumnus who has an OB-GYN prac- tice in Chicago, “It was just a small town, but he was always a good friend.”

Dedicated throughout his career to the care of improving the health of pregnant women across the world, Martin retired from private practice and UMMC in 2014 after serving as professor of OB-GYN, director of the Center for Obstetrics and Maternal Health at the Winn F. Wiser Hospital for Women and Infants, and vice chair for research and academic development.

He served as a maternal-fetal medi- cine subspecialist, educator, adminis- trator and investigator at the Univer- sity of Michigan and UMMC.

He is a recognized expert in treating eclampsia and preeclampsia, and the related HELLP syndrome. In 2014, the Society for Maternal-Fetal Medicine presented him with its Lifetime Achievement Award. Yet, the im- portant thing in his career has been train- ing others, Martin said, “taking care of a lot of children growing up and helping them through complicated pregnancies.”

**Dr. David Watson** of Miramar Beach, Florida – His accom- plishments include commending and leading the effort to build the Ron- ald McDonald House at UMMC, and supporting the admission of the first Miss Mississippi pageant at UMMC, the late Dr. Aaron Shirley.

Recruited by Dr. Blair E. Eaton to the four-year-old Medical Mississipi page- ant and served as CEO and chair- man of the board.

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“Dr. Watson held the line and made sure the children got the best care pos- sible,” Evans said, “whether that was here at UMMC or elsewhere. Yet, he was always reassuring and uplifiting.”
1950s


Griffin continued to write and speak on medical topics, including his personal experiences as a doctor. He continued to work with patients and families, and his contributions to the field of medicine were recognized by his peers and the community.

Dr. Dewitt G. Crawford (1960), before his death in January 2016, served in a variety of leadership roles for the Mississippi Academy of Family Physicians, which has dedicated its family medicine library to him and his wife Peggy Crawford. The Louisville physician was a member of the American Academy of Family Physicians (AAFP) and the MAEP from 1988 until his death. He was MAEP president, 2008-2009.

Dr. George Wilkerson (1967) is the consulting neurologist for the Ellisville State School in Jones County. Prior to that he had a private neurology practice in Hattiesburg taught psychiatry at the William Carey School of Medicine and served as the psychiatric consultant for the state of Mississippi, he reports. He also served as medical director of the state program for physicians and medical professionals with addiction problems, the Mississippi Professional Health Program. He is married to Caroline Allman, RN. They live in the country near Hattiesburg. They are “very happy with our grandchildren.”

1960s

Dr. Dewitt G. Crawford (1960) was a dedicated provider in the field of family medicine. He earned his undergraduate degree in 1960 from the University of Mississippi. He founded Central Nephrology Clinic in Flowood in 1978 and retired from his nephrology practice in Jackson in 1966. He completed a thoracic surgery fellowship in 1959. He completed his residency in general surgery at UMMC in 1966. He was a member of the American Medical Association and the board of the World Medical Association. He is the consulting neurologist for the Ellisville State School in Jones County. He is married to Caroline Allman, RN. They live in the country near Hattiesburg. They are “very happy with our grandchildren.”

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1970s

Dr. Robert Davis (1964) retired from his gastroenterology practice after 45 years. He now works at the free clinic in Corinth. Davis completed his residency in internal medicine and a fellowship in gastroenterology at UMMC.

Dr. John B. Howell III (1968) of Fairhope, Alabama, sums up the last two decades. “At age 55 I stopped obstetrics and did only gym as I didn’t have to take call. At 66 I stopped having any individual patient care responsibility and only participated in surgical cases which I thoroughly enjoyed. I fully retired upon becoming 74 and now enjoy traveling, wood turning, and enjoying life on some land in Butler County, Alabama where I play with my grown sons.”

Dr. Charles A. Miles (1969) of West Point has been serving on the Mississippi State Board of Medical Licensure since 2017, when he was appointed by Gov. Tate Reeves. He was reappointed in 2016 by Gov. Phil Bryant. After earning his M.D., Miles also completed an internship and a residency in OB-GYN at UMMC. He served two years in the U.S. Navy in Pensacola Florida, moved back to Columbus and joined group practice. In 1999, he and his family moved to West Point, where he joined the North Mississippi Medical Center’s clinic systems and worked as a staff OB-GYN physician until he retired in October 2016. He enjoys playing at Old Waverly Golf Club in West Point and fishing for “reds” in Louisiana.

Dr. M. Sandra Scurria (1969) is still active in family practice in the Houston, Texas area. She has worked for the past six years in her practice as an affiliate with MDVIP, a concierge medicine organization in Texas. “I have been able to take time to reach the patient and I am pleased to take a proactive rather than a reactive approach to my patient’s medical issues,” she writes. “Last year I completed an item on my bucket list by building a house. We moved in on Oct. 1, 2015, and my partner and I are enjoying decorating and entertaining family and friends. Leisure time includes playing golf, traveling here and abroad, and attending various medical meetings.”

Another, also a granddaughter, is Jamie and I are getting to travel more,” he writes. “So much to see, and so little time! We have four children, but only one granddaughter so far. Another also a granddaughter, is on the way!”

Dr. Bob Cater (1970) has reduced his work week to three-and-a-half days — “so my wife Jamie and I are getting to travel more,” he writes. Cater with wife, Jamie. Missippi Medicine | Winter 2017 59
Dr. Rebecca Allison (1971) was profiled in the American College of Cardiology’s monthly news magazine. She was a medical reporter for the Cardiology section of World News, in July. The recurring feature, Clinical Innovations, focuses on developments in cardiology. She serves as chief of staff at North Mississippi Medical Center and is now semi-retired as a preventive medicine specialist, working four hours a week.

Dr. William Hopper (1971) has been working for the past 17 years in urgent care in Baton Rouge, Louisiana. He is a family medicine specialist.

Dr. Atkinson W. "Jack" Longmire (1972) is currently practicing OB-GYN, mostly OB, in a lower income suburb of Atlanta with a group of three other docs and two midwives.

Dr. Johnny Buck Franklin (1979) moved from New Orleans to Atlanta and joined an OB-GYN practice there in 1993. He did his residency in diagnostic radiology at the Mallinckrodt Institute of Radiology at Washington University in St. Louis, and he was a co-chief resident in his final year. He is now chairman of the University of Florida Jacksonville Physicians Inc. clinical affairs at the UF College of Medicine and president/chief executive officer of the University of Florida College of Medicine in Jacksonville.

Dr. Martha J Brewer (1980) has had a private practice OB-GYN for a long time, and after Hurricane Katrina, she moved to academic medicine, first in Little Rock and then back in New Orleans. "I love being sort of 'retired' for a while and doing a big renovation on a house, I decided to go back to work. I am currently practicing OB-GYN, mostly OB, in a lower income suburb of Atlanta with a group of three other docs and two midwives. "I am mostly loving it and am very happy."
Dr. L. Ray Matthews (1989), an associate professor of surgery and vitamin D researcher at the Morehouse College School of Medicine and surgical critical care director at Grady Memorial Hospital in Atlanta, has for years educated the U.S. Food and Drug Administration (FDA) on the role vitamin D plays in helping Americans achieve optimal health.

In July, the FDA announced that, effective that month, it would double the amount of vitamin D in milk and milk additives.

In 1995, a fellow of the American College of Physicians.

Before earning his M.D. at the Medical Center, he graduated with a B.S. in chemistry and biology from William Carey College in Hattiesburg.

He completed his internship and residency in internal medicine at the University of Virginia Hospitals in Charlottesville, Virginia in 1991.

Dr. Gary Weyman Price (1988) of Plant City, Florida was recently voted first place winner of the Best of the Best - Polk County Florida's Official People's Choice Awards.

Dr. Price is the son of the late J.W. Price and Addie L. Thomas Price of Foxworth. He graduated from the University of Southern Mississippi before earning his M.D.

He completed his pediatrics residency at UWMC in 1990 and an allergy fellowship at the University of Virginia, eventually becoming board-certified in allergy and immunology.

He has been in practice in clinical allergy, asthma and immunology at Watson Clinic, LLP in Lakeland since 1993. He is a fellow of the American College of Allergy, Asthma and Immunology and the American Academy of Allergy, Asthma and Immunology.

Dr. B. Brian Conerly (1995 - fellowship) has been a practicing rheumatologist at the University of Southern Mississippi since 1991.

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2000s

**Dr. Alpa Goel Garg** (2003) has moved from Boston and now lives on Long Island, New York, with her husband Amit Garg and their two children. She is a radiologist at Northwell Health, which is headquartered in Great Neck, New York, and specializes in body and breast imaging. She did her residency at the University of Massachusetts Medical Center in Worcester, her internship at the Louis A. Weiss Memorial Hospital in Chicago, and a fellowship in abdominal imaging at Massachusetts General Hospital in Boston.

**Dr. Erika Tanner** (2006) and **Dr. Leslie Mason** (2007) Dr. Mason was a nurse, earned a degree in nursing at UMMC before pursuing her M.D. and completing specialty training in OB/GYN. Clinton native Tanner completed her undergraduate education at Spelman College in Atlanta before entering medical school at the University of Alabama where she also completed her internship and residency training in OB/GYN.

**Dr. Jason Black** (2008) is an emergency medicine physician in Oasis Springs. At the Medical Center, he also completed his residency in emergency medicine and an internship in internal medicine. “Life is great on the Mississippi Gulf Coast,” he writes. “I’m in a large democratic ER group and love it.”

**Dr. Tary F. Smith** (2009) has been practicing at Jackson Eye Associates (JEA) in Jackson as a comprehensive ophthalmologist and cataract surgeon since 2013. He is a member of the JEA laser cataract team, a group of board-certified ophthalmologists with extensive training in the LenSx Laser system. He also completed a residency in preliminary internal medicine and served as chief resident in ophthalmology at UMMC. Smith and his wife Lori have three boys - Reynolds, & Clark, & William, 3 ages as of December 2016.

**Dr. James Matthew Rhinovalt** (2011) has joined the Internal Medicine and Pediatric Clinic of New Albany to care for patients in the Baptist Memorial Hospital Union County as well as in the clinic. He completed fellowships in hospital/pediatric medicine and radiology medicine at the University of Alabama in Birmingham. At UMMC, he did his residency in internal medicine/pediatrics. Prior to medical school, he earned his bachelor’s degree in nursing at Mississippi State University and worked for over a year as an RN at Okolona County Hospital in Starkville.

**Dr. Justin Thomas Hebert** (2016) is now a first-year anesthesiologist resident at UMMC.

**Dr. Robert Lavelle “Bob” Donald Jr.** died at his home in Pascagoula on June 9, 2016. He was 89.

In Memoriam,

**Dr. Robert Lavelle “Bob” Donald Jr.** died at his home in Pascagoula on June 19, 2016. He was 89.

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SPACE RACE

During a tour of the new School of Medicine building, Dr. Loretta Jackson-Williams, left, professor of emergency medicine and vice dean for medical education, describes to John Bobo, M1 class president, how the lecture hall will look once completed, as Jonathan Wilson, chief administrative officer, back right, surveys the amphitheater's spacious design. Located immediately north of and connected to the existing Learning Resource Center, the 151,569 square-foot, five-story school is expected to be finished in the spring.
SEEKING A SILVER BULLET
CARE GAP CRISIS LOOMS FOR AGING MISSISSIPPIANS

DR. KATRINA POE
CARING FOR THE TOWN THAT CARES

DR. RALPH DIDLAKE
PUTS THE VERSE IN VERSATILITY

THE LOYAL TREATMENT
3 GENERATION OF MOORES