University of Alabama Alumnus Charles A. LeMaistre, M.D., Played a Key Role in Getting Health Warnings on Cigarettes
Within this corridor lies the future of health care for Alabamians, especially those in rural areas. Help us to reach beyond these walls and touch them with healing hands and caring hearts.
A Message From The Dean

Prevention ... Beating a Dead Horse?

All of us in the medical profession have heard the continuous refrain about the importance of prevention, especially in regard to the most prevalent and deadly medical conditions that we see as health care providers. But, somehow, there continues to be a "disconnect" between what we know (and preach) and where we place our greatest emphasis in health care.

The United States leads the world in the amount of dollars spent on health care per capita. Still, we are on a downward slide when it comes to many health outcomes. While we have witnessed tremendous advances in the treatment of disease, we have seen little progress in advancing what would be more cost effective and universally beneficial - the prevention of disease.

Nowhere is this problem more evident than in the Southeast, which records among the highest mortality rates from the three "big killers" - heart disease, cancer and stroke. It is estimated that up to 82 percent of heart attacks, 80 percent of strokes and 33 percent of cancers are preventable or curable with early detection. The cancer figure is probably a gross underestimate based on a growing body of knowledge in this field.

So, why are we not applying our resources and knowledge about prevention to a degree necessary to achieve the kind of changes we could see (and should see) in health outcomes, particularly in Alabama?

From my work in Quality Improvement, I am convinced that this is not due to a lack of knowledge among providers; they know what to do. But there are clearly barriers that prevent us from seeing the kind of results expected from a strong emphasis on disease prevention. These barriers include a lack of true "partnerships" with our patients (providers cannot do it alone); systems of care that pay close attention to acute issues at the expense of opportunities to improve prevention of disease; a reimbursement system that favors treatment of disease over prevention; and a growing shortage of primary care providers.

We need to continue our search for new treatments, but it is also imperative that we re-focus our collective efforts to ensure that we are doing a better job of applying what we know about prevention and early detection of risk factors. The College's recent Cancer Prevention and Screening Special Emphasis Week provided an important opportunity to hear from national experts about the "what ifs" of early detection and cancer prevention. There are similar "what ifs" in regard to the early detection and prevention of heart disease and stroke.

One of the reasons that I am proud to serve as dean of this College is because the College is well positioned and has the commitment to successfully address the complexity of this issue. As a practicing stroke neurologist, I can treat 5 percent to 10 percent of patients suffering from acute stroke with a clot buster and, through an expensive process of evaluation and treatment, observe improvement in one-third of them. But as a faculty member of a medical campus dedicated to primary care, I can assist with the training of scores of primary care physicians who will one day be in a position to prevent as many as 80 percent of strokes, as well as heart disease and cancer.

Well-trained primary care physicians in a supportive environment have a unique opportunity to solve the current health crisis not only in our state but in our country. I am convinced that a renewed emphasis on primary care and prevention is the only way that we can successfully address many of the negative trends in health care.

This College has graduated almost 350 Family Medicine physicians, many of whom are on the front lines fighting to improve health outcomes. We need to find better ways to support these warriors and encourage others to join them in their efforts.

Our College does not view prevention as "beating a dead horse." Prevention is very much alive at the College, and we feel that it is the best approach to reverse the current trends in health care and achieve the kind of results that will benefit generations to come.

E. Eugene Marsh, M.D.
Dean, College of Community Health Sciences
Associate Dean, The University of Alabama
School of Medicine, Tuscaloosa Campus
Two Centers Receive State's Top Honor for Quality, Performance

University Medical Center and the Student Health Center, both operated by the College, received the 2007 Alabama Quality Award, the state's top honor for quality and performance excellence. The centers received Level 1 Commitment to Excellence Awards.

The awards recognize organizations that use effective productivity and quality improvement practices that can be shared with other organizations to help contribute to the overall economic well-being of the state of Alabama.

A letter notifying the College said that “the examiners and judges were very impressed with the commitment your organization has made to performance excellence.”

The award is based upon performance criteria that include the following: excellence in leadership; strategic planning; attention to customers and other stakeholders; market focus; process management; and analysis of organizational performance.

The Alabama Quality Award is administered by the Alabama Productivity Center, a non-profit organization established in 1986 by The University of Alabama and Alabama Power Company. The Center's purpose is to find ways to use University research and educational resources to stimulate economic development within the state.

Tobacco and Society Center Materials to be Digitized

The College's Center for the Study of Tobacco and Society has received a $27,918 grant to fund the digitizing of materials on smokeless tobacco that Center Director Alan Blum, M.D., has collected over 30 years and that is considered the largest such collection of its kind.

The award is in the form of a subcontract from the Roswell Park Cancer Institute in Buffalo, New York, through an American Legacy Foundation grant titled Tobacco Document Collections: Truth Through Access. Blum, who holds the College’s Gerald Leon Wallace Endowed Chair in Family Medicine, hopes to eventually digitize other collections within the Center, which will make the materials available to health professionals and scholars throughout the world.

The digitization of the smokeless tobacco material will be performed at the Roswell Park Cancer Institute and the indexing will be completed at The University of Alabama under the direction of Steven MacCall, Ph.D., an associate professor in the School of Library and Information Sciences.

Clinic Receives May Award

The College's Faculty-Staff Clinic team was awarded the University's prestigious 2007 Sam S. May Commitment to Service Award.

“This is a tremendous honor for our College and reflects our ongoing commitment to customer centered, high-quality health care,” says College Dean E. Eugene Marsh, M.D.

The Faculty-Staff Clinic is part of University Medical Center, which is operated by the College. The clinic is devoted exclusively to the care of University employees and their dependents covered under the University’s BlueCross BlueShield of Alabama medical insurance plan.

The Sam S. May Commitment to Service Award is a University-wide award presented annually by the Department of Human Resources.

“The accomplishments of the Faculty-Staff Clinic are exemplary and most deserving of celebration and acknowledgment,” says Teresa Faulkner, the University’s manager of Human Resource Development. She says the Faculty-Staff Clinic was chosen based on its exceptional service to customers through commitment, innovation, creativity and continuous improvement in customer relations.

The Faculty-Staff Clinic team was recognized by University of Alabama President Robert Witt during his Fall Faculty-Staff Address held October 10, 2007, at the Bryant Conference Center: “The Faculty-Staff Clinic was established in 2004 to provide exceptional service to faculty and staff. Three years later, the clinic has met or exceeded every goal. Thank you for a job well done,” Witt said.
College Employees Participate in UA Health and Wellness Efforts

About 150 College faculty and staff participated in recent efforts to promote healthy living and wellness at The University of Alabama.

The University's campus-wide health and wellness initiative, *Strive for Five*, encouraged employees to exercise and eat healthy. Teams of three to five members worked together to achieve five basic goals: lose 5 percent of the team's total weight, participate in 30 minutes of physical activity five times a week, eat five servings of fruits and vegetables a day, drink five glasses of water a day, and record five positive messages or personal accomplishments a week.

The College held weekly *Strive for Five* check-in meetings in the lobby of the School of Medicine building where teams could weigh in, receive an update on their progress, and watch demonstrations on how to gauge correct food serving sizes. Fruit, water bottles, walking journals and tip sheets were distributed.

The program was implemented by the University's Office of Health Promotion and Wellness and ran from September 5 through November 7, 2007. More than 850 faculty and staff campus wide enrolled in the program.

"Together, our participation will help to build a culture of health one small step at a time," says Rebecca Kelly, Ph.D., director of the University's Office for Health Promotion and Wellness and creator of the program.

College Hosts Medical Spanish Continuing Education Conference

The College hosted a three-day Medical Spanish Continuing Education Conference in October 2007 that was attended by College physicians, staff, medical students, residents and area health care workers.

The goal of the conference was to teach health care professionals how to interview patients in Spanish, take a simple medical history, conduct a physical exam, give prescriptions and follow-up instructions and intervene with medical emergencies.

Conference participants were also exposed to a Spanish vocabulary of 1,500 general and medical words and developed an awareness of the differences in attitudes between Latinos and other Americans about time, space, clothing, food, health and medical care. In addition, participants developed the skills needed to continue to learn Spanish on their own.

According to the American Hospital Association, up to 23 million U.S. residents have limited English proficiency, and a recent association survey found that 48 percent of hospitals encounter patients with limited English skills daily.

The Latino population is the fastest growing population in the United States.

The conference was put on by Rios Associates LLC, based in Tucson, Arizona, which has presented its Intensive Medical Spanish Language and Culture Workshops for continuing medical education throughout the United States since 1983.

College Forms Partnership with American Heart Association to Promote Benefits of Walking

The College has partnered with the American Heart Association's *Start! Campaign*, a physical activity program designed to fight heart disease and stroke by getting people walking.

"We are committed to the health and wellness of our staff and patients and will do our part to encourage increased physical activity both in the workplace and at home," says College Dean E. Eugene Marsh, M.D.

Marsh says cardiovascular disease and stroke are two of the three leading causes of death in Alabama. Physical inactivity is one of the "treatable" risk factors for these conditions, he says.

The *Start! Campaign* encourages companies to help employees lead healthier lives by creating walking routes in the workplace and encouraging employees to use them. Employees can walk during breaks, at lunch and even during quick meetings with colleagues, according to the American Heart Association.

The College has already planned a *Heartwalk*, which will be held March 8, 2008, at the University of Alabama Recreation Center fields.
Heather Taylor, M.D., has joined the College as an assistant professor in the Department of Pediatrics. She is also the Pediatric Clerkship director. Taylor is a 2004 graduate of the University of Alabama School of Medicine and spent her clinical years on the Tuscaloosa campus, where she received the Pediatric Recognition Award for outstanding performance in Pediatrics, the William W. Winternitz Award in Internal Medicine for outstanding performance in Internal Medicine and the American Medical Women’s Association Glasgow-Rubin Achievement Citation. Taylor completed a Pediatric Residency at the Cincinnati Children’s Hospital Medical Center. She worked previously as a laboratory technician and supervisor for the Student Coalition for Community Health, an organization sponsored by The University of Alabama that organized health fairs in rural Alabama communities. She is an AIDS outreach volunteer and has volunteered for Reach Out and Read, a national non-profit organization that seeks to make literacy promotion a standard part of pediatric primary care. Taylor is a member of the American Medical Association, the American Academy of Pediatrics and the American Medical Women’s Association.

Michael Wells, M.D., has joined the College as an assistant professor of Obstetrics and Gynecology as a physician in the OB/GYN Clinic. He will also be in charge of OB/GYN Residency education for the OB/GYN Department. Prior to joining the College, Wells was a staff physician in Obstetrics and Gynecology at Mizell Memorial Hospital in Opp, Alabama. He also worked as a staff physician in Obstetrics and Gynecology at Andalusia Regional Hospital in Andalusia, Alabama, and served on the hospital’s Board of Trustees. Wells received his M.D. from the University of Alabama School of Medicine. He completed a Family Practice Residency at the College and an Obstetrics and Gynecology Residency at the University of South Alabama. He is board certified in Family Medicine and Obstetrics and Gynecology. Wells’ clinical interests include laparoscopic surgery, obstetrical and gynecological ultrasound and bone densitometry with evaluation and treatment of osteoporosis.

Mark H. Thomas, M.D., has joined the College as an adjunct professor in the Department of Pediatrics and as a staff physician in the Student Health Center. He also heads up University Medical Center’s new Adolescent Medicine Clinic, which he brought with him when he joined the College. Thomas previously was with AdMed, P.C. in Chattanooga, Tennessee, and before that spent several years in private practice in adolescent and young adult medicine. A native of Geneva, Alabama, Thomas is a 1993 graduate of the University of Alabama School of Medicine. He completed a Pediatric Residency and underwent further training in an Adult Medicine Fellowship program. He is board certified in Pediatrics and is a fellow of the Society for Adolescent Medicine. Thomas’ professional interests include working with young persons in the areas of acne evaluation and management, sports medicine, ADHD and substance abuse.

Holly Freeman, CRNP, has joined the College as a nurse practitioner practicing in both the Faculty-Staff Clinic and the Student Health Center. Freeman worked previously at The Radiology Clinic, Med Center North/South and with North River Emergency Room Physicians, all in Tuscaloosa. She also served as a nursing instructor at the University of Alabama Capstone College of Nursing.

Joe Higginbotham has joined the College as an Electronic Medical Record (EMR) and Information Technology programmer-analyst and DavLong liaison. DavLong is the vendor for University Medical Center’s Electronic Medical Record system. Higginbotham’s responsibilities include expanding the usefulness and usability of the EMR system. He will also spearhead efforts to create EMR forms that are easier and more user-friendly for physicians and nurses at University Medical Center. Prior to joining the College, Higginbotham worked at Southern Nuclear Operating Company in Ashford, Alabama, where he managed monitoring and process control systems for a dual unit electric generating plant. He holds bachelor of science degrees in Computer Sciences and Physics from Troy University in Dothan, Alabama, and Auburn University, respectively.

Culpepper Clark, M.B.A., has joined the College as assistant director for Fiscal Services for the Rural Health Institute for Clinical and Translational Science. Clark is in charge of providing assistance in the budgeting of research projects during the proposal generation stage, ensuring that compliance with award policies is maintained, and overseeing the fiscal integrity of award accounts. Prior to joining the College, Clark lived in New Orleans, Louisiana, where he worked as both a commercial realtor and a banker. While in New Orleans, he also served as president of the New Orleans chapter of the University of Alabama Alumni Association. Clark obtained a bachelor’s degree in History from The University of Alabama and a master’s degree in Business
Administration from the University of New Orleans.

Glenn Davis, EMT-P, has joined the College's Rural Health Institute for Clinical and Translational Science as program director of a multi-year grant awarded the Institute by the Alabama Department of Public Health, Office of EMS and Trauma. The grant will provide continuing education, scholarships and updated technology to those who work or volunteer their emergency medical services in West Alabama. Davis has been involved with EMS for 31 years. He worked previously for the College, providing basic, intermediate and paramedic EMS training.

Lori Greene, M.S., has joined the College's Student Health Center as coordinator of Nutrition Education and Health Services. Her responsibilities include providing medical nutrition therapy to patients and promoting nutrition services to University of Alabama students. Before joining the College, Greene completed a dietetic internship at the University of Alabama at Birmingham, where she was voted "Outstanding Dietetic Intern" by her preceptors. She completed her graduate nutrition training at UAB's Pittman General Research Center and became a registered dietician in 2003. She has published a number of articles in such peer-review journals as Obesity and Ethnicity & Disease that focus on weight management, body image and minority health. Greene currently serves on the American Dietetic Association's Dietetic Practice-based Research Network Committee.

Michelle Senter Harcrow, M.S., has joined the College's Student Health Center as coordinator of Health Promotion in the Department of Health Promotion and Wellness. She will serve as an advisor and coordinator for the University's peer health educators, the College's wellness team and the student health advisory committee. Harcrow received undergraduate degrees in Psychology and Biology from Mississippi State University. She earned a master's degree in Health Promotion/Health Education from Mississippi State University. She is currently writing a dissertation to obtain a Ph.D. in Health Promotion/Health Education from The University of Alabama/University of Alabama at Birmingham joint program. Her general research interests include adolescent health attitudes, beliefs and behaviors. She also has an interest in examining the relationship between college students' religious/spiritual attitudes, beliefs and behaviors and their health beliefs, attitudes and behaviors.

In Addition...

Cameron Paisley, M.D., has joined the College's Internal Medicine Department faculty as a member of the University Hospitalist Group. Paisley is a graduate of Auburn University and received his M.D. from the University of South Alabama College of Medicine. He completed an Internal Medicine Residency at the Baptist Health System in Birmingham.

Dawn Bryant, M.D., has joined the College's Internal Medicine Department faculty as a member of the University Hospitalist group. Bryant graduated from The University of Alabama and received her M.D. from the University of Alabama School of Medicine. She completed her clinical years of training at the Tuscaloosa campus, and an Internal Medicine Residency at the Baptist Health System in Birmingham.

Others who have joined the College as members of the University Hospitalist Group include Ben Lucy, M.D., and Robert Slaughter, M.D.

NEW ROLES

Thad Ulzen, M.D., professor and chair of the College's Department of Psychiatry and Behavioral Medicine, has been named the College's interim associate dean for Academic Affairs.

"Dr. Ulzen brings excellent academic credentials, proven leadership experience and a commitment to teamwork that will be critical as we move forward," says E. Eugene Marsh, M.D., dean of the College.

Prior to joining the College in 2004, Ulzen was an associate professor and vice chair of the Department of Psychiatry at the Brody School of Medicine at East Carolina University. He later served as interim chair of the department and as director of the school's University Psychiatry Center. Before that, Ulzen was a faculty member at the University of Toronto, where he was also appointed Psychiatrist-in-Chief of the George Hull Centre for Children and Families.

Ulzen graduated with distinction from the University of Ghana Medical School and joined the University of Toronto Psychiatry Residency Program. He obtained the Specialist Certificate in Psychiatry from the Royal College of Physicians and Surgeons of Canada and a Postgraduate diploma in Child Psychiatry from the University of Toronto. He also completed additional training in Clinical Psychopharmacology at the Clarke Institute of Psychiatry in Toronto.

Ulzen is a fellow of the Royal College of Physicians of Canada and a Foundation Fellow of the Ghana College of Physicians and Surgeons.

He was awarded the Nancy C.A. Roeske Certificate of Excellence in Medical Education by the American Psychiatric Association in May 2002.

Ulzen's academic interests include disruptive behavior disorders, incarcerated adolescents and mental health consultation to primary care physicians and underserved geographical areas.
Appraise

John C. Higginbotham, Ph.D., M.P.H., the College's associate dean for Research and Health Policy and director of the College's Rural Health Institute for Clinical and Translational Science, has been appointed to a national governing council that will oversee the National Institutes of Health's Clinical and Translational Science Award. The award will fund physicians for rural practice through network programming for the American Health Association Rural Medical Education Program, which he directs and which is recognized as a national model for producing much-needed rural physicians. Wheat's presentation was titled Recruiting and Educating Physicians for Rural Practice: An Alabama Approach and highlighted various principles underpinning successful approaches to recruiting and educating rural physicians, including community participation, modified curriculum, institutional commitment, pipelining, gaining constituency support, serving the underserved and rural medicine and society.

Daniel Avery, M.D., FACOG, FACS, an associate professor and chair of the College's Department of Obstetrics and Gynecology, will serve on the editorial review board of the peer-reviewed American Journal of Clinical Medicine. Avery is also a clinical associate professor in the College's Departments of Family Medicine and Psychiatry and Behavioral Medicine, and he serves as the OB/GYN Clerkship director and as a mentor for medical students interested in Obstetrics and Gynecology. Avery specializes in high-risk obstetrics and medical and surgical gynecology.

John Wheat, M.D., M.P.H., served as the keynote speaker at the National Rural Health Association Clinical Conference held July 27-28, 2007, in Kansas City, Missouri. He spoke about the University of Alabama Rural Medical Scholars Program, which he directs and which is recognized as a national model for producing much-needed rural physicians. Wheat's presentation was titled Recruiting and Educating Physicians for Rural Practice: An Alabama Approach and highlighted various principles underpinning successful approaches to recruiting and educating rural physicians, including community participation, modified curriculum, institutional commitment, pipelining, gaining constituency support, serving the underserved and rural medicine and society.

Melissa C. Kuhajda, Ph.D., a psychologist and an assistant professor in the College's Department of Psychiatry and Behavioral Medicine, is the 2007 recipient of the Theodore H. Blau Early Career Award for Outstanding Contribution to Professional Psychology. Given by the American Psychological Association's Division of Clinical Psychology, the award recognizes the promotion of the practice of clinical psychology and early career contributions.

Pamela Foster, M.D., M.P.H., is the recent recipient of a fellowship from the Robert Wood Johnson Foundation for the New Connections Research and Coaching Clinic. As part of the fellowship, Foster attended a conference in Washington, D.C., in October 2007 that provided her with opportunities to increase her research writing and communication skills and develop a national network for collaboration. Foster is deputy director of the Rural Health Institute for Clinical and Translational Science.

Jan Chaissen, the College's director of Medical Records, was selected to serve as The University of Alabama HIPAA privacy officer. HIPAA is the Health Insurance Portability and Accountability Act and ensures insurance coverage as employees move from job to job. The act also protects patients' privacy. Chaissen will be responsible for ensuring that the University is HIPAA compliant.
Waits Finishes New York Triathlon

John B. Waits, M.D., an assistant professor in the College’s Department of Family Medicine, completed the 7th annual Nautica New York City Triathlon on July 22, 2007.

This was Waits’ fourth triathlon, but his first New York City triathlon. He finished in 3:32:55 (three hours, thirty-two minutes and fifty-five seconds).

The course consisted of a 1,500-meter swim in the Hudson River, a 40-kilometer bike ride along the Henry Hudson Parkway and a 10-kilometer run in Central Park.

The Nautica Triathlon is designed to appeal to a wide spectrum of athletes, including amateurs, people with disabilities and world-class tri-athletes.

Waits says one of the biggest challenges was finding time to train and spend time with his children. Instead of training on a traditional one-man triathlon bike, Waits got creative by enlisting his children in the challenge. Waits would take his two-seated “mom and pop” bike out at night and allow his four children (all under six years of age) to take turns hopping on the back seat. He says the triathlon training helped encourage a creative balancing act of family, training and work.

Waits also directs the College’s Family Medicine Clerkship and Family Medicine Residency.

College Part of Efforts to Improve Mental Health in Black Belt

The College is one of several organizations that will work to improve mental health services in Alabama’s Black Belt region with the help of a $1.2 million grant recently awarded to the state.

The grant from the Bristol-Myers Squibb Foundation will be used to help the organizations in their efforts to both reduce stigmas associated with mental illness and assist in the care and support of those with mental illnesses in the counties and communities of the Black Belt, which are among Alabama’s poorest.

In addition to the College’s Department of Psychiatry and Behavioral Medicine, partners in this initiative are: the Alabama Department of Mental Health and Mental Retardation; the UAB Department of Psychiatry and Behavioral Neurobiology; NAMI Alabama, a statewide support group comprised of family members of persons with mental illness; the Montgomery-based Community Care Network; and community mental health centers serving the Black Belt.

Patricia Doyko, director of the Bristol-Myers Squibb Foundation, says the goal is to reduce mental health-care disparities by creating better local health-care workers and support services.

“There has long been a need for increased mental health treatment and care in the Black Belt,” Gov. Bob Riley said during a news conference in December 2007 to announce the grant. “The prevalence of mental illness in rural communities is the same as it is in urban areas, but patients in rural areas are usually diagnosed later and, therefore, require more intensive services.”

Thad Ulzen, M.D., chair of the College’s Department of Psychiatry and Behavioral Medicine, says mental health challenges are often greater in rural areas because patients have less access to care and may present later with more complications. He says many seek help from their primary care physicians, who are already overwhelmed with heavy patient loads.

Ulzen says his goal is to recruit physicians for residency fellowships in public and rural psychiatry to serve the 12 counties in central and West Alabama that make up the heart of the Black Belt, so named because of the color of its soil.

“The plan is, if we are able to get two people a year to train in public health and psychiatry, we hope they will stay because there is a dire need for public rural psychiatry,” he says. He says medical personnel who train in an area often stay and practice in that area.

John Wheat, M.D., M.P.H., a professor in the College’s Department of Community and Rural Medicine, is also involved in the mental health initiative.

Another partner is the Demopolis-based West Alabama Mental Health Center, which serves 1,900 patients a month in Choctaw, Greene, Hale, Marengo, and Sumter counties. Executive Director Kelley Parres-Barnes says her organization hopes to work with The University of Alabama to develop psychiatry fellowships and dual residency programs in primary care and psychiatry.

The College’s Rural Health Institute for Clinical and Translational Science helped lay the groundwork for providing better care for the impoverished Black Belt region. In 2003, the Institute and Tuskegee University were awarded a $7.5 million grant from the National Institutes of Health and launched a collaborative effort titled “Reducing Health Disparities in Alabama’s Black Belt” that focused on reduction of infant mortality and better treatment for people with diabetes, cancer, cardiovascular disease, hypertension and HIV/AIDS.
Health Sciences Library Adding Children’s Section

The College’s Health Sciences Library is adding a children’s section to its current collection.

The new section, which began with a donation of $200 and is expected to be completed in 2008, will be located in the library's Searcy Consumer Health Resource Center, which is open to the public.

The children’s section will include children’s medical literature, as well as books designed to help children understand and cope with a parent who might have cancer or some other disease. Examples of books already in the children’s collection include *What's in a Doctor’s Bag* and *Elmo Goes to the Doctor.* In addition to books, the children’s section will also offer medical-related videos and DVDs that can be checked out or viewed in the library.

The Health Sciences Library, which assists the College and The University of Alabama with efforts in health-related education and research, also serves as the primary resource for health information for the city of Tuscaloosa, as well as other West Alabama communities.

“The library aims to provide good, quality health care information to our patrons,” says Library Director Nelle Williams. “The new children's section will be another great way that we can extend information to our patrons, as well as a way that parents can get information for themselves and their children about what is happening in their child’s medical situation.”

To contribute to the new children’s section of the Health Sciences Library, either monetarily or through book donations, please contact Allison Leitner, the College’s director of Advancement, at (205) 348-5701 or aleitner@cchs.ua.edu.

Health Sciences Library Hosts Medical Information Day

The College’s Health Sciences Library hosted “Medical Information Day” in spring 2007 to introduce faculty and staff from the College of Community Health Sciences, as well as other colleges on campus, to the information and services that the library has to offer.

About 70 people attended the event, according to Library Director Nelle Williams. They observed demonstrations of the vast range of information and services that the library can provide.

The Health Sciences Library first opened in 1978 in the Educational Tower adjacent to the DCH Medical Center and assists the College with health-related education and research. The library also serves as the primary resource for health science information for the University of Alabama and Tuscaloosa and other West Alabama communities.

The library’s collection includes books, more than 230 current journal subscriptions, audio-visual resources and access to specialized databases, library catalogs and Internet resources. The collection covers topics in clinical medicine, Family Practice, primary care, medical education, consumer health and related health care topics.

The library’s reference collection includes titles in the major medical specialties, medical dictionaries and directories of physicians, hospitals, health care associations, medical schools and residency programs. National and state vital statistics are available, and drug guides, clinical treatment guidelines and standards are also included in the collection.

Numerous electronic resources are also available, including PubMed (Medline), CINAL, Exam Master, MD Consult, Harrison's Online, Stat!Ref, Up-to-Dateplus and many more.
Smoking Still a Serious Problem

Physician Charles LeMaistre played an influential role in putting the first health warning on cigarettes

By Leslie Zganjar

Four decades have passed since the landmark 1964 U.S. Surgeon General’s report that first linked smoking to cancer and other health problems. The knowledge gained since then has resulted in a downward trend in tobacco use that has been described by the Institute of Medicine as one of the 10 greatest achievements in public health in the 20th Century.

But the 1964 report almost did not happen, says Charles A. LeMaistre, M.D., a member of the Surgeon General’s Advisory Committee on Smoking and Health, which produced the historic report.

LeMaistre, who completed his first two years of medical school at what is now the University of Alabama School of Medicine, Tuscaloosa Campus (College of Community Health Sciences), was the keynote speaker for the College’s Cancer Prevention and Screening Special Emphasis Week in September 2007 and provided a presentation titled: *The report that almost did not happen: The Report of the Advisory Committee to the Surgeon General on Smoking and Health*.

LeMaistre is one of only two surviving members of the advisory committee. He has spent the past several years conducting extensive research on events that led to the formation of the committee for an upcoming publication that will be presented to the archives at the M.D. Anderson Cancer Center at The University of Texas.

The College’s weeklong conference emphasized cancer prevention and screening. According to the American Cancer Society, cancer accounts for one in four deaths in the United States and is the second leading cause of death. Heart disease is the leading cause of death.

“Over the past few decades, emphasis has been placed on research to find a cure for cancer, but it is becoming increasingly recognized that any cure would be dependent on early detection,” says College Dean E. Eugene Marsh, M.D. “As a medical campus dedicated to primary care, we feel it is incumbent on us to develop clear expertise in this area so that our graduates can provide state-of-the-art cancer prevention and screenings.”

LeMaistre, a native of Lockhart, Alabama, received his undergraduate education and first two years of medical training at The University of Alabama and graduated from Cornell University Medical College in 1947. He completed a residency and research fellowship in infectious diseases at New York Hospital and Cornell University, where he became a professor and conducted research on germ warfare defense as a member of the U.S. Public Health Service Epidemic Intelligence Service. He began teaching at Emory University School of Medicine in Atlanta in 1954 and later became chair of its Department of Preventive Medicine and Community Health.

LeMaistre moved to teach at the University of Texas Southwestern Medical School in Houston and served as medical director of Woodlawn Hospital’s Chest Division. During this time, he was named to the Surgeon General’s Advisory Committee on Smoking and Health. LeMaistre was named associate dean for Health Affairs at The University of Texas in Austin in 1965 and was soon promoted to vice chancellor and then chancellor, a higher position than any other physician had held at the university.

In 1978, LeMaistre began his 18-year legacy as president of the M.D. Anderson Cancer Center in Houston. During his tenure there, the center became one of the top outpatient cancer centers in the world. He rejoined the center in 2006 as a professor in the Division of Cancer Prevention and Population Sciences, which he established.

In addition to his research on cancer and
The 1964 report by the U.S. Surgeon General's Advisory Committee on Smoking and Health dramatically changed the smoking habits of Americans when it was published, but it first had to overcome several significant obstacles, LeMaistre says.

Cigarettes were largely unknown in the United States until the 1860s, when "rolling one's own" became a fad in the Southwest, LeMaistre says. But the smoking epidemic spread rapidly in the United States, aided by the addicting quality of cigarettes during World Wars I and II.

LeMaistre says in the early 1900s in the United States, lung cancer was such a rare medical phenomenon that only 134 cases could be found in the entire U.S. scientific literature. As of 2006, there were 180,000 cases. "This is the transformation of an epidemic caused by cigarettes," LeMaistre says.

By 1962, 78 percent of adults in the United States smoked but only 38 percent believed that smoking caused health problems, according to a Gallop poll that year. "Most of the smoking community was unaware because of effective propaganda" by tobacco companies, LeMaistre says.

It was during this time that efforts began to establish the Surgeon General's Advisory Committee on Smoking and Health, and there was much public controversy about the link between smoking and cancer. LeMaistre says tobacco companies repeatedly brushed aside evidence of a link as a "mere statistical association that provided no evidence of causation," the Food and Drug Administration determined that cigarettes did not qualify as hazardous, Congress, heavily influenced by the tobacco industry, was not anxious to confront the issue and the White House, early in the Kennedy administration, did not want to lose the support of Southern congressmen by taking up the tobacco controversy.

"Up to this point, few in the Executive Branch were interested in embracing this hot potato," LeMaistre says. But then U.S. Surgeon General Luther Leonidas Terry, M.D., was ready for the challenge, LeMaistre says.

Terry, a native of Red Level, Alabama, completed his first two years of medical education at what is now the University of Alabama School of Medicine, Tuscaloosa Campus, and was named for his physician father's closest friend, U.S. Sen. Lister Leonidas Hill. Terry's proposal to form the Surgeon General's Advisory Committee on Smoking and Health was approved in 1962.

At 39 years of age, LeMaistre was the youngest member of the 10-person advisory committee. He says he was selected because of his work in chest disease prevention and his work with the U.S. Public Health Service Epidemic Intelligence Service.

"I didn't know it would be a landmark report," he says. "At the time, I didn't even know if it would be a report worth doing."

Two decades after the report was released, LeMaistre says he received a personal letter from Terry stating: "To my mind, the report of the Surgeon General's Advisory Committee on Smoking and Health is the outstanding document in modern American medical history."

The report of the U.S. Surgeon General's Advisory Committee on Smoking and Health, released on January 11, 1964, was almost 400 pages in length. In the report, Terry wrote: "Out of its long and exhaustive deliberations, the Committee has reached the overall judgment that cigarette smoking is a health hazard of significant importance to the United States ... cigarette smoking is related to higher death rates in a number of disease categories. In view of the continuing and mounting evidence from many sources, it is the judgment of the Committee that cigarette smoking contributes substantially to mortality from specific diseases and to the overall mortality death rate."

LeMaistre says what is also significant is that the advisory committee report has never been refuted but only strengthened in subsequent studies.

"In the intervening years since that historic report, the original findings have been strengthened by an incredible amount of data against tobacco products, particularly cigarettes, and documented in almost 30 subsequent reports of the Surgeon General. Cumulative knowledge from well over 500,000 studies has documented the unprecedented lung cancer epidemic produced by cigarette smoking. In fact, few biological relationships have ever been worked out with such thoroughness as the lethal role that cigarettes and cigarette smoking play in serious chronic diseases."

Since the release of the 1964 report of the Surgeon General's Advisory Committee on Smoking and Health, smoking in the United States has declined 58 percent. But the fight to eliminate tobacco use is ongoing and "is an absolute in the larger fight against cancer," LeMaistre says.

Tobacco use is still linked to approximately 440,000 deaths a year and is the cause of 30 percent of all cancers, LeMaistre says. In addition, the decrease in smoking has stagnated, as some 20 percent of Americans still smoke, according to a May 2007 report from the Institute of Medicine.

"We still have a serious problem," LeMaistre says.
Cancer Prevention and Screening Week Featured Five Noted Researchers

Speakers at the College of Community Health Sciences’ Cancer Prevention and Screening Special Emphasis Week included five of the most knowledgeable researchers and practitioners in the field who brought the most current information on cancer screening and prevention to the Tuscaloosa medical community.

Breast Cancer Screening Update

Abenaa Brewster, M.D., M.H.S., Assistant Professor, Departments of Clinical Cancer Prevention and Epidemiology, Division of Cancer Prevention and Population Sciences, The University of Texas, M.D. Anderson Cancer Center, Houston, Texas

Approximately 217,440 new cases of breast cancer are diagnosed in the United States each year, but since 2001, the number of new cases diagnosed has been declining. That is due in part to a decrease in the use of hormone replacement therapy, Brewster says.

A 2000-04 study in women between the ages of 50 and 69 showed a decline in breast cancer incidence, mostly in estrogen-receptor positive tumors, “which corresponded with a decline in hormone replacement therapy prescriptions,” Brewster says. Estrogen plays a major role in the development of breast cancer; withdrawing it may result in a delay or decrease in the development of breast cancer, Brewster says.

Still, 40,000 women die annually from breast cancer. Among the risk factors associated with the disease are family history, weight gain, a sedentary lifestyle and alcohol consumption (four or more drinks per week). The most important risk factor is family history, Brewster says.

There are options for women at high-risk, including lifestyle changes (a healthier diet and more exercise), chemoprevention, which involves the use of such medication as tamoxifen or raloxifene, surgery, and screening for early detection. Brewster says the American Cancer Society recommends that women at average risk of developing breast cancer have a clinical breast exam every three years when they are between the ages of 20 and 39, and a mammogram annually at age 40 and older. For women at high-risk, annual mammograms and MRI screenings are recommended.

“We need to better identify high-risk women and let them know about these screening recommendations,” Brewster says.

Prostate Cancer Screening and Prevention

Jere Kim, M.D., Associate Professor, Department of Genitourinary Medical Oncology, The University of Texas, M.D. Anderson Cancer Center, Houston, Texas

In 2007, prostate cancer was the most commonly diagnosed cancer in the United States, with 218,890 new cases; there were 27,050 deaths associated with the disease, Kim says.

Sixteen percent of men will be affected by prostate cancer in their lifetime, Kim says.

The risk of prostate cancer increases with age. There is also some evidence that fat plays a role in the development of prostate cancer, Kim says.

“The incidence of prostate cancer in the Western world is higher than in Asia and Africa. Even though fat intake hasn’t played out as a risk factor, epidemiological studies have shown that fat intake could be a risk. Fat intake has a lot to do with the progression of cancer,” she says.

Kim says screening is vital in finding previously undetected cancers. But she says there are concerns associated with screening. Kim says screening causes anxiety, false positives are common and there are treatment-related side effects, such as incontinence and impotence.

Still, “the bottom line is that screening appears to find tumors early, tumors that can be cured. Screening appears to be saving lives,” Kim says.

She says chemoprevention (preventing cancer with medicine) is an active area of research and there currently are a number of ongoing clinical trials investigating potential prostate cancer medications. Prostate cancer disparities are another active area of research, Kim says. The incidence of prostate cancer is higher in African-Americans than whites. While access to medical care is a factor, the higher incidence rates might also be the result of genetic and environmental factors, Kim says.

Prevention and Early Detection of Colorectal Cancer: Current and Future Practice

Peter Lance, M.D., Professor of Medicine, Molecular and Cellular Biology and Public Health, Co-Director, Cancer Prevention and Control, The University of Arizona, Arizona Cancer Center, Tucson, Arizona

One-third of people who develop colorectal cancer have a family history of the disease. Another important risk factor is lifestyle, Lance says. Obesity (more so for men than women), smoking, a lack of physical activity and an unhealthy diet increase the risk of colorectal cancer. Lance
says 8 percent of “sporadic” colorectal cancers can be attributed to diet.

People with a diet rich in fiber have an “inverse relationship with colorectal cancer,” Lance says. “The benefits of fiber are out there – almost certain. With meat consumption, there is a positive relationship between red meat and colorectal cancer.”

Physical activity also significantly reduces the risk of colon cancer and rectal cancer, Lance says. If physicians can “get to patients, particularly men, earlier in their life and keep their body mass index down, it may help prevent colorectal cancer,” he says.

Screening via colonoscopies is the best way to assess risk, Lance says. “If we can identify early, invasive cancer, we have a 90 percent survival rate through surgery,” he says. Lance recommends that those aged 50 and older have regular screening for colorectal cancer. “Colonoscopies are helping to find stage 1 colorectal cancer,” he says.

Low-dose aspirin is the most common form of chemoprevention (preventing cancer with medicine) associated with colorectal cancer. “There is clinical trial data supporting the use of low-dose aspirin, but there are side effects with aspirin use,” Lance says, including gastrointestinal bleeds. Lance says more recent clinical trials are looking into the benefits of Vitamin E in preventing colorectal cancer.

**Integrative Therapies and Cancer Prevention**

Peter A.S. Johnstone, M.D., F.A.C.R., Professor of Radiation Oncology, Hematology/Oncology, Emory University School of Medicine, Atlanta, Georgia

While some physicians advise against massage therapy for cancer patients, fearing it could cause the cancer to metastasize, such alternative therapies could actually have a positive effect on such patients, Johnstone says.

Prominent medical institutions such as M.D. Anderson Cancer Center and Emory University are beginning to look into the benefits of complementary and alternative medicine, Johnstone says.

So, too, is the National Institutes of Health through its National Center for Complementary and Alternative Medicine.

The Memorial Sloan-Kettering Cancer Center provides information on its website about alternative and complementary therapies and how they can “ease the way during cancer treatment and recovery.”

The website cites such alternative therapies as “acupressure, aromatherapy, meditation and yoga, music therapy and therapeutic massage, which induces a state of calm and relaxation and helps relieve many cancer-related symptoms.

Many patients claim they could not get through their treatment regimens without their weekly therapeutic massage.”

Johnstone, who received training in acupuncture at UCLA, says there are more clinical trials being done with alternative and complementary medications.

But it is not all good news. Johnstone says a clinical trial in Finland found that Vitamin E and beta carotene did not decrease lung cancer risk as thought, and that beta carotene may have increased the risk.

He says a clinical trial in 1995-96 involving 300,000 men at risk for or suffering from prostate cancer found that heavy use of multi-vitamins worsened the disease in some.

**Lung Cancer Update**

Lewis E. Foxhall, M.D., Medical Director and Associate Professor, Clinical Cancer Prevention, Vice President, Health Policy, The University of Texas, M.D. Anderson Cancer Center, Houston, Texas

Lung cancer accounts for the most cancer deaths in both men and women, or about 29 percent of all cancer deaths, Foxhall says. In 2007, there were 213,380 new cases of lung cancer diagnosed in the United States and 160,390 lung cancer deaths.

In Alabama in 2007, there were 3,850 new cases of lung cancer and 3,240 lung cancer deaths.

The five-year survival rate for those diagnosed with lung cancer is 16 percent, Foxhall says. “That’s very low.”

But physicians have an important prevention tool: Get patients to quit using tobacco, he says.

“We know the cause of the disease – smoking. So we have a disease with a very good intervention,” Foxhall says. “If we know the risk factor, we need to help eliminate it. And with lung cancer, we know the risk factor.”

He acknowledges that getting patients to stop smoking is not easy. “Cessation is challenging and frustrating.

Tobacco use is a chronic disease and we have to look at this as a chronic disease. There is not a quick fix; it is a chronic problem.”

While smoking increases the risk for lung cancer by up to 30 percent, lung cancer is also caused by environmental factors, such as asbestos and radon.

There are treatment options, including radiation, chemotherapy and surgery. But Foxhall says long-term, disease-free survival is rare.

He advises physicians to use medication and counseling to help patients quit smoking. He says there are ongoing clinical trials at M.D. Anderson Cancer Center using new medication regimens and variations of existing medication regimens.
LeMaistre and Friends at the Capstone

Charles LeMaistre, M.D., left, speaks with Alan Blum, M.D., director of the University of Alabama Center for the Study of Tobacco and Society.

From left, Vijaya Sundar, M.D., FACP, chair of the College's Department of Internal Medicine, Chelley Alexander, M.D., the College's associate dean for Graduate Medical Education, and Charles LeMaistre, M.D.

John C. Higginbotham, Ph.D., M.P.H., the College's associate dean for Research and Health Policy, right, shows his copy of the report of the U.S. Surgeon General's Advisory Committee on Smoking and Health to Charles LeMaistre, M.D., left, and Elizabeth Cockrum, M.D., FAAP, the College's associate dean for Clinical Affairs.

Charles LeMaistre, M.D., left, talks with College Dean E. Eugene Marsh, M.D.

From left, John B. Waits, M.D., director of the College's Family Medicine Residency, Charles LeMaistre, M.D., and Thad Ulzen, M.D., the College's interim dean for Academic Affairs and chair of the College's Department of Psychiatry and Behavioral Medicine.
2007 Medical Student Honors Convocation

The 31st Annual Medical Student Honors Convocation was held May 18, 2007, at Indian Hills Country Club. College Dean E. Eugene Marsh, M.D., welcomed and introduced the graduating class.

Renee Morales, left, presents the Faculty Recognition/Junior Year Award to Daniel Avery, M.D., Department of Obstetrics and Gynecology, for outstanding contributions to the students.

Cathy Gresham, M.D., assistant to the dean and director of Medical Student Affairs, left, with Robert McDonald, recipient of the Larry Mayes Memorial Award to recognize his work in underserved areas.

Medical Student Affairs Director Cathy Gresham, M.D., left, with Ashley Coleman, recipient of The Merk Manual Award, which is given to an outstanding student in medical education.

Michael Luther, right, presents the Patrick McCue Award/Senior Year to A. Robert Sheppard, M.D., Department of Internal Medicine, for outstanding contributions to the students.

Carrie Freeman, left, presents the Resident Recognition Award to Ty Blackwell, M.D., for outstanding contributions to undergraduate medical education.

Deanah Maxwell, left, presents the James H. Akers Memorial Award to Michael Luther for excellence in the practice of art and science in medicine.

Vijaya Sundar, M.D., Department of Internal Medicine, right, presents the William W. Winternitz Award in Internal Medicine to Alissa Carver for excellent performance in Internal Medicine.

Ashley Evans, M.D., Department of Pediatrics, left, presents the Pediatric Recognition Award to Carrie Freeman for excellent performance in Pediatrics.

Joseph C. Wallace, M.D., Department of Surgery, left, presents the William R. Shamblin Surgery Award to David Gerhardt for excellent performance in Surgery.

Graduates, their families and College faculty paid tribute to the graduates' efforts, achievements and contributions.

Graduates also gave out their own awards to faculty.
2007 Medical Student Honors Convocation

Nancy Rubin, Ph.D., Department of Psychiatry and Behavioral Medicine, right, presents the Peter Bryce Award in Psychiatry to Tatum McArthur for excellence in Psychiatry.

Daniel Potts, M.D., Department of Neurology, center, presents the Neurology Award to Joseph Turner, left, and David Gerhardt, right, for outstanding performance during the Neurology Clerkship.

John B. Waits, M.D., Department of Family Medicine, left, presents the Family Medicine Award to Tatum McArthur for excellence in Family Medicine.

John C. Higginbotham, Ph.D., Department of Community and Rural Medicine, center, presents the Robert F. Gloor Award in Community Medicine to Tatum McArthur, left, and Renee Morales, right, for excellence in Community and Rural Medicine.

E. Eugene Marsh, M.D., dean of the College, right, presents the Scholastic Achievement Award to Tatum McArthur, the senior with the highest academic achievement during the clinical years.

Dean Marsh, M.D., right, presents the William R. Willard Award (Dean’s Award) to Deannah Maxwell. The award goes to the senior who has made outstanding contributions to the goals and mission of the College.

Cathy Gresham, M.D., director of Medical Student Affairs, left, with recipients of the Gold Humanism Honor Society Award. First row from left, Michael Luther, Alissa Carver and Bhavik Patel. Second row from left, Renee Morales, Jessica Shaffer Whittle, Tatum McArthur and Deannah Maxwell.

John C. Higginbotham, Ph.D., associate dean for Research and Health Policy, right, presents the Research Award to Bhavik Patel.

Daniel Avery, M.D., Obstetrics and Gynecology, right, presents the Finney/Akers Memorial Award in Obstetrics-Gynecology to Renee Morales for excellence in Obstetrics and Gynecology.
Tuscaloosa Family Practice Residents Graduate

The 2007 graduates of the Tuscaloosa Family Practice Residency were honored during the 32nd Annual Graduation Ceremony on June 26, 2007. The DCH Healthcare Authority and the DCH Regional Medical Center hosted the event. The commencement speaker was John S. Meigs, Jr., M.D., a preceptor from Centreville, Alabama.

Commencement Speaker John S. Meigs, Jr., M.D.

Tuscaloosa Family Practice Residency Graduating Class of 2007

Gita Agarwal, M.D.  Frances Howland Koe, M.D.
Daniel Lee Armistead, M.D.  Alan Jay Pernick, M.D.
Chad Wade McElroy, M.D.  Zynia Regina Pua-Vines, M.D.
Matthew Gains Freeman, M.D.  Will Saxena, M.D.
Archie Dean Hooper IV, M.D.  Andrew Oliver White, M.D.
Shanon Reynolds Jernigan, M.D.  Jennifer Cook White, M.D.

*Chief Resident, 2006-2007

FAMILY PRACTICE RESIDENT GRADUATION HONORS

William R. Willard Award
Richard Dodd, M.D.

Internal Medicine Award
Archie Dean Hooper IV, M.D.

Pediatrics Award
Chad Wade McElroy, M.D., and Archie Dean Hooper IV, M.D.

Psychiatry Award
Matthew Gains Freeman, M.D.

Research Award
Alan Jay Pernick, M.D.

William F. deShazo Award
Archie Dean Hooper IV, M.D.

Argus Award
Will Saxena, M.D., Gita Agarwal, M.D., and Daniel Lee Armistead, M.D.

Argus Award for Obstetrics
Lee Carter, M.D.

Society of Teachers in Family Medicine Resident Teaching Award
Daniel Lee Armistead, M.D.

Rural Medical Scholars Recognized
Matthew Gains Freeman, M.D., Chad Wade McElroy, M.D., Daniel Lee Armistead, M.D., Andrew Oliver White, M.D., and Frances Howland Koe, M.D.
The 11th Annual Convocation for the 2006-2007 Rural Medical Scholars class was held in April 2007 at the Child Development Center on the University of Alabama campus. The Rural Medical Scholars Program is operated by the College’s Department of Community and Rural Medicine.

Family, friends and guests of the Rural Medical Scholars were welcomed by Elizabeth Cockrum, M.D., FAAP, the College’s associate dean for Clinical Affairs and a professor in the College’s Department of Pediatrics, and Milla Boschung, Ph.D., dean of the College of Human Environmental Sciences. Some of the Rural Medical Scholars will be earning their Master’s of Rural Community Health Degree through the College of Human Environmental Sciences.

The convocation keynote speaker was Marsha Raulerson, M.D., a pediatrician from Brewton and former president of the Medical Association of the State of Alabama and the Alabama Chapter of the American Academy of Pediatrics. She shared many of her own experiences from her training and practice with the Rural Medical Scholars. Raulerson received the Alabama Rural Health Association Practitioner of the Year Award from association Director Dale Quinney.

Members of the 2006-2007 Rural Medical Scholars class are now first-year medical students at the University of Alabama School of Medicine.

— Linda Jackson
Two Rural Medical Scholars Receive Alfa Scholarships

Two of the College’s Rural Medical Scholars received scholarships from Alfa Companies at the 11th Annual Convocation of the Rural Medical Scholars Program in April 2007.

Recipients included Dana Todd of Greensboro, a 2005 Rural Medical Scholar, and Chris Shubert of Sipsey, a 2006 Rural Medical Scholar.

Todd was a summa cum laude graduate of Alabama A&M University and is now a first-year medical student. Shubert is a University of Alabama at Birmingham business management honors student and pre-medical honor society member who enrolled at the Tuscaloosa campus of the University of Alabama School of Medicine for his pre-medical coursework.

On hand to present the scholarship awards were Paul Till, chairman of the Farm-City Committee of the Alabama Farmers Federation, and John Wheat, M.D., founder of the Rural Medical Scholars Program and a professor in the College’s Department of Community and Rural Medicine, which operates the Rural Medical Scholars Program.

The scholarships will help offset the cost of tuition, fees and expenses for medical school at the University of Alabama School of Medicine.

Money for the scholarships comes from the Alfa Rural Medical Scholars Program Endowed Loan Fund, which was established six years ago by the Alabama Farmers Federation and the Alfa Companies to assist Rural Medical Scholars who want to become rural physicians.

Alfa Companies is an insurance firm founded 60 years by the Alabama Farmers Federation to serve rural communities.

—Linda Jackson

Winternitz Speaker Draws Connection Between Health and Wealth

The William W. Winternitz Conferences feature prominent speakers who address such topics as ethics, communication, professionalism and quality improvement. The conferences are named in honor of William W. Winternitz, M.D., a longtime and distinguished member of the College’s faculty. Winternitz, now retired, joined the College in 1977 and chaired the Department of Internal Medicine.

William W. Winternitz Conference
“Time Out for Prevention: The Connection Between Health, Economics, and Well-Being”

Rebecca K. Kelly, Ph.D., R.D., C.D.E.
Director, Health Promotion and Wellness
The University of Alabama

The criteria for leading a healthy lifestyle seems simple enough—don’t smoke, eat five or more servings of fruits and vegetables every day, exercise regularly and maintain a healthy weight. But it is not always easy to be healthy, Kelly says.

“Individuals are overwhelmed. Even small changes seem like a lot,” she says. “If all you can do is maintain where you are now, that’s fine.”

While the connection between health and well-being has long been evident, the connection between health and economics is becoming increasingly evident, Kelly says.

According to Mercer’s 2006 National Survey of Employer-Sponsored Health Plans, for businesses, the annual health insurance cost per employee for family coverage is $7,873. In 1974, the cost was $3,650. Much of the increased cost can be attributed to treating such diseases as diabetes, pulmonary disease and cancer, some of which can be prevented by healthier living, Kelly says.

There are other costs to businesses: lost productivity, overtime and temporary staffing, which often results from employee absenteeism due to health reasons. Studies show that diabetics, for example, are absent an average of eight days each year, Kelly says.

She says businesses must make a healthy workforce part of their mission and goals and “we are beginning to see federal and state legislation in this area. The Wellness and Prevention Act of 2007 provides tax credits to businesses that provide wellness programs. States are also beginning to credit employers for offering wellness programs.”

The University of Alabama launched a campus-wide effort in fall 2007, Strive for Five, which encourages employees to exercise regularly and to eat healthy.
College Participates in Nationwide Meningitis Studies

The College’s Division of Clinical Investigations participated in two nationwide clinical trials in 2007 that tested and compared the effectiveness of two meningococcal vaccines, which are more commonly referred to as meningitis vaccines.

One trial involved individuals between the ages of 11 and 55 years and compared an existing meningitis vaccine already approved by the U.S. Food and Drug Administration with an investigational vaccine (not FDA licensed). The second clinical trial involved nine-month-old infants and tested an existing FDA-approved vaccine. The meningococcal vaccines were tested and compared to see how well people tolerate them.

The investigational vaccine used in the older age group is in its third phase of testing and is being tested for effectiveness, says Ashley Evans, M.D., the principal investigator for the College’s portion of that clinical trial. Evans is also an associate professor in the College’s Department of Pediatrics.

Karen Burgess, M.D., an associate professor in the College’s Department of Pediatrics, is the principal investigator for the College’s portion of the trial involving nine-month-old infants.

Those who participated in the clinical trials had their medical history reviewed, received a physical examination, received the vaccine in the form of a shot and had a small amount of blood drawn.

A follow-up visit included another physical examination and another small amount of blood drawn. Participants were financially compensated for each visit.

Meningococcal diseases are serious infections of fluid surrounding the brain and spinal chord and can lead to problems with the nervous system, hearing loss, mental retardation, chronic seizures, stroke and in some cases death.

Meningococcal disease is the leading cause of bacterial meningitis in children aged 2 to 18 years in the United States. Each year, between 1,400 and 2,800 people are diagnosed with meningococcal disease and about 10 percent die. Adolescents and young adults account for nearly 30 percent of all U.S. cases, according to the National Meningitis Association. One reason the disease can be deadly is that it is often misdiagnosed because the early symptoms – fever, headache and stiff neck – are similar to the flu.

The disease is contagious and transmitted through air droplets and direct contact with an infected person. Coughing and kissing are cited as common ways the disease is spread and it is easily spread within schools and college dormitories.

The University of Alabama requires all incoming freshmen, who are also required to live on campus, to have the meningococcal vaccine. In June 2007, the Centers for Disease Control and Prevention’s Advisory Committee on Immunization Practices expanded its recommendation for the meningococcal vaccine to include all adolescents between 11 and 18 years of age.

Institute Awarded Emergency Medical Services Grant

The College’s Rural Health Institute for Clinical and Translational Science was awarded a $384,000, multi-year grant from the Alabama Department of Public Health, Office of EMS and Trauma, to provide continuing education and updated technology to emergency medical services workers and volunteers in West Alabama.

The grant, Area IV Regional EMS Administration and Technical Assistance, creates a new Emergency Medical Services Program within the College by combining the forces of the Institute and West Alabama EMS Services. Glenn Davis, EMT-P, formerly executive director of West Alabama EMS Services, will serve as director of the new program. Davis has been involved with emergency medical services for the past 31 years and worked previously for the College, providing basic, intermediate and paramedic EMS training. He joined the Institute in October 2007.

The Emergency Medical Services Program will ensure that licensed emergency medical technicians working or volunteering in West Alabama are in compliance with National Incident Management System (NIMS) requirements, have received CPR training, and have received protocol education and continuing education. The program will also serve as an advocate for the Alabama Department of Public Health, helping to ensure that the agency’s goals and objectives regarding EMS data collection are met.

The West Alabama EMS Services board of directors approached the College last year about the possibility of collaborating to better serve West Alabama residents. West Alabama EMS Services has provided regional EMS oversight for 32 years and was the contract agent with the Department of Public Health, Office of EMS and Trauma, to provide EMS services in West Alabama. The College, meanwhile, focuses on providing health care to those in rural areas and is developing an expertise in using innovative technologies for patient care and education.

Tony Smelley, president of NorthStar Emergency Medical Services, which provides ambulance services in Tuscaloosa, Pickens and Sumter counties in West Alabama, says he is excited about the transition of West Alabama EMS Services into the College. “Both entities have had tremendous effects on the delivery of patient care in and outside the hospital setting,” Smelley says. “With the additional capabilities and resources that The University of Alabama has and can use to support the regional agency, I foresee great things in our future in this region.”
IN BRIEF...

Foster Member of Diabetes Speakers Bureau

Pamela P. Foster, M.D., M.P.H., deputy director of the Rural Health Institute for Clinical and Translational Science, has been named a member of the Alabama Diabetes Speakers Bureau. The purpose of the bureau is to encourage community action relative to diabetes prevention and control and to provide communities, policy makers, organizations and agencies with information about diabetes.

The bureau is an integral component of the Alabama Department of Public Health’s Diabetes Branch and the Alabama Diabetes Advisory Council. Alabama has some of the highest rates of diabetes in the country.

The Rural Health Institute for Clinical and Translational Science is part of the College and conducts research that seeks to improve health and reduce health disparities in rural Alabama. Foster, a preventive medicine and public health physician, is also an assistant professor in the College’s Department of Community and Rural Medicine.

Institute Maps All Cancer Cases in State Through 2005

The Rural Health Institute for Clinical and Translational Science has mapped the location of every cancer case diagnosed or treated in Alabama through 2005 for the state Department of Public Health’s Alabama Statewide Cancer Registry. The registry is a statewide, population-based cancer registry that collects data on all cancer cases diagnosed or treated in Alabama. The central repository of information is a valuable tool in monitoring location of every cancer in Alabama. The central repository of information is a valuable tool in monitoring the progress of cancer in the state and to provide communities with information about the disease.

John C. Higginbotham, Ph.D., M.P.H., director of the Institute and the College’s associate dean for Research and Health Policy, says the Alabama Statewide Cancer Registry is probably the first in the country to map all of its cancer cases.

The Rural Health Institute for Clinical and Translational Science conducts research that seeks to improve health and reduce health disparities in rural Alabama.

Williamson Receives Research Grant

Lloyd Williamson, M.D., an assistant professor in the College’s Department of Psychiatry and Behavioral Medicine, was awarded a $5,000 grant from the University of Alabama Research Grants Committee for her study, Resolution of Enuresis Via Recognition and Treatment of Associated Psychiatric Disorders.

Williamson, a psychiatrist, also practices at University Medical Center, which is operated by the College.

Prior to joining the College, Williamson was in private practice in Tuscaloosa in the areas of Child, Adolescent and Adult Psychiatry. She has also been an active speaker for the Tuscaloosa Chapter of the National Alliance for the Mentally Ill to promote the Breaking the Silence Curriculum for use in the educational system.

Foster Writes HIV Guide

Pamela P. Foster, M.D., M.P.H., deputy director of the College’s Rural Health Institute for Clinical and Translational Science, hopes her newly published book on HIV/AIDS will help communities become more educated about this deadly disease.

Foster, a preventive medicine and public health physician, says she wrote her book, Is There a Balm in Black America? Perspectives of HIV/AIDS in the African-American Community, to help laypeople learn more about HIV/AIDS in order to dispel denial and fear about the disease and to arm them with the knowledge and tools needed to eliminate HIV/AIDS in their communities.

The book offers the author’s personal account of work at the grass roots level in both African-American and Latino communities within and near Long Island, New York, Atlanta, Washington, D.C., and now Alabama.

“I wrote the book to challenge the African-American community to first realize that HIV/AIDS has gotten progressively worse, not better, over the last 25 years of the epidemic, and that unless the entire community works to eradicate it, it will only get worse,” Foster says.

Foster, Gaskins HIV Study Funded

Pamela P. Foster, M.D., M.P.H., deputy director of the Rural Health Institute for Clinical and Translational Science, received a $2,000 grant from the University of Alabama Center for Mental Health and Aging for the study, Stigma in Older HIV+ African Americans in the Rural South. Foster is a co-investigator on the project with Susan W. Gaskins, DSN, ACRN, a professor in the University’s Capstone College of Nursing.

As part of the project, Foster and Gaskins conducted focus groups in the Alabama cities of Selma, Montgomery, Anniston and Tuscaloosa. They plan to present their findings at the 2008 International AIDS Conference in Mexico.

In addition to her appointment with the Rural Health Institute for Clinical and Translational Science, Foster, a preventive medicine and public health physician, also is an assistant professor in the College’s Department of Community and Rural Medicine.
New Clinic Devoted to Health Care Needs of Adolescents

University Medical Center now includes an Adolescent Medicine Clinic, the first medical practice wholly devoted to the health care needs of adolescents in Tuscaloosa and West Alabama.

“Because I’ve always had a heart for working with teens, I find adolescent medicine to be rewarding,” says Mark Thomas, M.D., who brought the clinic with him when he joined the College in October 2007. “It’s wonderful to be able to work with young people in helping them overcome physical and emotional challenges.”

Thomas spent several years in private practice in adolescent and young adult medicine before joining the College. The Adolescent Medicine Clinic operates in the Pediatric Suite of University Medical Center and is accepting new patients. University Medical Center is operated by the College.

Areas of care offered by the Adolescent Medicine Clinic include: general physical exams, sports exams and preventive care; treatment of acne; evaluation and treatment of common medical problems; treatment of asthma, allergies and other chronic conditions; vision and hearing screening; lifestyle issues evaluation and counseling for smoking, substance abuse and other risk behaviors; and support for emotional issues, including depression, anxiety, peer conflicts, parental conflicts, mood swings and school problems.

Adolescence is the transition period between childhood and adulthood. It is often a stressful development time marked by major changes in physical maturity, sexuality and emotional feelings. While the primary care and health needs of adolescents differ distinctly from those of children and adults, the number of doctors dedicated exclusively to adolescent care is limited.

“Teenagers are an often overlooked and underserved age group in the medical realm because they often fall between the cracks of Pediatrics and Internal Medicine,” Thomas says. “Our clinic is designed to provide a place where teens will feel comfortable and know that the needs specific to their age group will be addressed. That includes providing emotional support and addressing issues such as self-esteem and conflict with family and peers.”

A native of Geneva, Alabama, Thomas completed medical school training at The University of Alabama. He completed a Pediatric Residency and then underwent further training in an Adolescent Medicine Fellowship program. He is board certified in Pediatrics and is a fellow of the Society for Adolescent Medicine.

University Medical Center Now Option for City Employees

Tuscaloosa city employees have another option for their health care needs. They now may choose between their current health care plan and health care services provided by University Medical Center.

Michael Greene, director of Billing and Coding Compliance for University Medical Center, says the agreement is a “very exciting opportunity for us. It is a way for us to really increase our presence in the community, increase our patient volume and promote our mission, which is to provide quality health care to Tuscaloosa and surrounding counties.”

The agreement between the city of Tuscaloosa and University Medical Center gives city employees who are covered by the city’s current health insurance plan, and their dependents, the opportunity to choose health care services offered by their plan or services provided by University Medical Center.

A benefit to city employees is that they could see reduced copays and expanded benefits by choosing University Medical Center, Greene says. City employees will have expanded access to preventive medical services, such as screenings and blood tests, as well as x-rays, social work and counseling services and annual physical exams. In addition, city employees can take advantage of extended clinic hours on Tuesdays and Thursdays, when University Medical Center is open until 8:30 p.m.

“This is a great by-product of our relationship with the city,” Greene says. “These new hours will give patients the opportunity to obtain health care after they get off work, as many city employees are unable to seek medical care during regular business hours.”

Greene says University Medical Center was approached last year by the city of Tuscaloosa to be a primary health care provider for city employees. Greene says the agreement between the city and University Medical Center provides a way for the city to expand its wellness program and preventive health policies, and for University Medical Center to promote preventive medicine and Family Medicine, which is the center’s primary focus.
Brandons' Gift Assists Rural Medical Scholars Program

By Linda Jackson

Earl Brandon, M.D., and his wife, Marion, want to make sure that Alabama has enough trained physicians practicing in rural areas to take care of generations to come. Earl Brandon, a retired Tuscaloosa pediatrician, knows first hand the difficulties rural residents often face trying to find a physician close to home.

“There are tremendous needs in rural areas,” he says. “Parents would travel for miles to bring their children to my office in Tuscaloosa for pediatric care. If we have enough family physicians in rural counties, then families will be able to seek medical care closer to home without having to miss work, incur travel costs or delay getting help for a family member who is ill.”

Adds his wife, Marion: “Alabama is primarily a rural state and we must ensure that we educate doctors who will choose to practice in these areas.”

The Brandons’ recent gift of $20,000 to the College will help support the Rural Medical Scholars Program, which recruits and assists rural students who want to become physicians and practice in rural Alabama.

The money will be used to create an Operations Fund to pay for expenses not covered by the program. John Wheat, M.D., a professor in the College’s Department of Community and Rural Medicine and founder of the Rural Medical Scholars Program, says the program has many activities and outreach projects that are not covered by the program’s annual budget, including the printing and distribution of a Health Occupations Manual, a recruiting tool and resource for high school and community college students, and an annual leadership and training trip for students to Washington, D.C., with representatives of the Medical Association of the State of Alabama to meet with members of Alabama’s congressional delegation.

The Brandons both grew up in the Birmingham area, but Earl Brandon’s great-grandparents were born and raised in rural Pickens County. The Brandons have two children who are both health professionals. Daughter Lynn Johnson is a physical therapist and son, John Brandon, M.D., a family physician, has practiced in Gordo in Pickens County for the past 26 years. John Brandon is also a clinical faculty member at the College, a rural preceptor for the College’s medical students and Family Practice residents and serves as the medical director for the Rural Medical Scholars Program.

Brandon is a graduate of the College’s Tuscaloosa Family Practice Residency. He was recently joined in his practice by Drake Lavender, M.D., a member of the first class of Rural Medical Scholars.

“Afier meeting the Rural Medical Scholars when we attend Rural Medical Scholars events, we follow their progress in becoming rural doctors,” Marion Brandon says. “The program is working and deserves more support.”

Campaign Steering Committee Leading Fundraising Efforts

The Campaign Steering Committee formed in September 2005 to lead the College of Community Health Sciences’ efforts to raise $3 million as part of The University of Alabama’s Our Students. Our Future. Capital Campaign.

Committee members will serve through June 2009. As of October 2007, the College had raised approximately 90 percent of its goal.
Voncile and Houston Pearce hosted the College’s annual cocktail party on September 14, 2007, during which Charles LeMaistre, M.D., a University of Alabama alumnus who played a key role in the 1960s in getting health warnings on cigarettes, was honored. The party was held at the conclusion of the Cancer Prevention and Screening Special Emphasis Week. LeMaistre was the keynote speaker at the event and helped the College organize the week-long lecture series.

The annual cocktail party provides the College with an opportunity to thank its donors, alumni, friends, volunteers and adjunct faculty for their generous support and service.
The College hosted a family cookout following the University of Alabama homecoming football game on October 6, 2007. Guests included College faculty and staff and their families, as well as alumni, donors, friends and their families. Guests were transported on the Tuscaloosa Trolley from the School of Medicine building to Bryant Denny Stadium and then returned after the game for the cookout.

Will Marsh
Robin Wood, a nurse in the University Medical Center Pediatrics Department, third from left, and her husband, Stephen Wood, along with her son, Ty Nelson, and his girlfriend, Caitlin Jackson.

David Maxwell, M.D., a physician at the Student Health Center, far left, with his wife, Jeanne, third from left, and their children Robert and Gina.
College Hosts Luncheon for Retired Faculty and Staff

The College hosted a luncheon at the School of Medicine, Tuscaloosa Campus building on August 27, 2007, for retired faculty and staff. Dean E. Eugene Marsh, M.D., spoke to the group about recent developments at the College, including the creation of a Sports Medicine Clinic. The group also heard from John C. Higginbotham, Ph.D., M.P.H., the College’s associate dean for Research and Health Policy; Elizabeth Cockrum, M.D., FAAP, the College’s associate dean for Clinical Affairs; and Thad Ulzen, M.D., the College’s interim associate dean for Academic Affairs. About 40 retired faculty and staff from the College attended the luncheon.
YOU DREAMED OF ALL THE GOOD YOU WOULD DO ONE DAY.

Our university continues to build upon its tradition of excellence through generous, long-range gifts from private donors. Please remember the College of Community Health Sciences in your will, trust, or other estate plans.

For more information about giving opportunities without obligation, contact our professional staff at (888) 875-4438, (205) 348-4767, or visit giving.ua.edu.
SAVE THE DATES

Winter/Spring 2008
College of Community Health Sciences/School of Medicine
Tuscaloosa Campus

Special Emphasis Week – Psychiatry
Dates and Location: To Be Announced
Contact: Dawn Swindle
205-348-0093

WINTER 2008 EVENTS

Workshop
“Cultural Competency in Health Care and Medical Education”
January 29 • 8 a.m.
School of Medicine Building
Tuscaloosa, Alabama
Speaker: Denice Cora-Bramble, M.D., M.B.A.
Executive Director, Goldberg Center
National Children’s Medical Center
Washington, D.C.

SPRING 2008 EVENTS

Heartwalk
March 8 • 8 a.m.
University of Alabama Recreation Center Fields

Medical Student Honors Convocation
May 16
Indian Hills Country Club
Tuscaloosa, Alabama
Our Mission Statement

The School of Medicine will provide the physicians and expertise needed for accessible, high quality, and compassionate health care for the citizens of Alabama through education, research, and service associated with the training of medical students and primary care physicians with a special emphasis on rural areas.