



EVMS

MAGAZINE

As Time Goes By

Primary-care physicians
are learning to help their
patients age gracefully



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DEAN OF THE SCHOOL OF MEDICINE**

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EVMS

MAGAZINE

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George Bernard Shaw once said, “Progress is impossible without change.” Here at EVMS, recent changes in our three areas of focus have set the stage for great progress that will ultimately benefit our community.

First, education. “Service learning,” which is now formalized within our MD curriculum, is a way of integrating community service with structured learning and first-hand experiences. In the story on page 10, find out how a real-world context strengthens the clinical skills and compassionate care of our future physicians.

Second, research. In September, we welcomed world-renowned scholar Elias Siraj, MD, to lead our Strelitz Diabetes Center. And EVMS’ cancer researchers continue taking meaningful steps toward more effective, personalized cancer treatments. The Rounds section on page 5 has the details about both of these advances.

Third, patient care. In this issue’s cover story on page 12, we report on why EVMS is training primary-care physicians to serve the healthcare needs of seniors — along with changes we all can make to increase the likelihood of good health as we age.

On a lighter note, EVMS students and alumni might smile as I did when they see a different side of Ann Campbell, PhD, Associate Dean of Student Affairs. Discover how she unwinds off campus in the story on page 9.

Progress might be impossible without change, but it is also impossible without you. Thank you for providing EVMS with the support and resources that propel us forward.

Sincerely,

Richard V. Homan, MD

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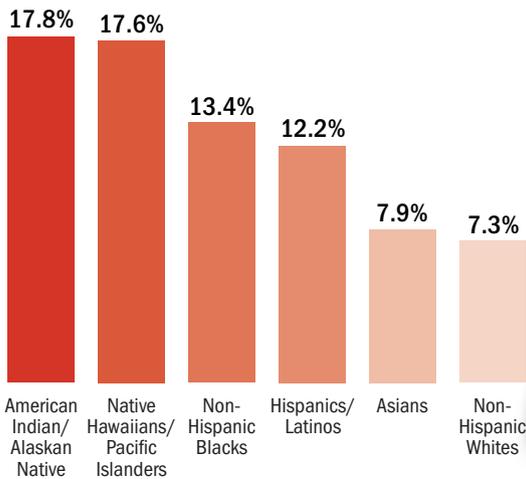
WHAT YOU SHOULD KNOW ABOUT DIABETES

Diabetes is at record high levels in the U.S. The EVMS Strelitz Diabetes Center helps individuals battle the disease and lower their risk of developing complications.

RACE AND ETHNICITY

Minority populations have a greater risk of developing type 2 diabetes and diabetes-related complications than non-Hispanic whites.

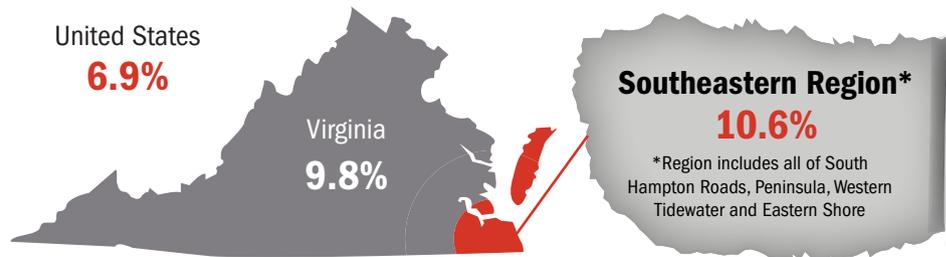
Percentage of adults aged 18 and over diagnosed with diabetes



PREVALENCE

Southeastern Virginia has some of Virginia's highest incidences of diabetes and Western Tidewater leads Virginia in diabetes-related deaths.

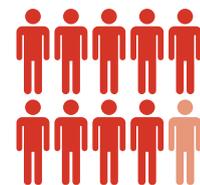
Estimated percentages of the national, state and regional populations diagnosed with diabetes



86 million adults—more than 1 out of 3—have prediabetes with blood glucose levels higher than normal.



9 out of 10 don't know they are prediabetic.



PREVENTION AND MANAGEMENT

Studies have shown that **diet, exercise and behavior modification** can reduce your risk of developing type 2 diabetes by **58%**.



Monitor blood sugar levels consistently throughout the day.



Visit your health professional on a regular basis.



Get 150 minutes or more of moderate-intensity aerobic activity every week.



Eat a diet high in vegetables and fruits and maintain a healthy weight.

Learn more about the truth behind diabetes at evms.edu/DiabetesRisk.

Sources: Centers for Disease Control and Prevention; National Center for Health Statistics; Virginia Department of Health.



Dr. Amy Tang oversaw a study that demonstrates how two biomarkers might help predict tumor recurrences so physicians can customize treatments.

EVMS/Sentara study may benefit breast cancer patients

A recent study conducted primarily by researchers at EVMS and Sentara Healthcare may eventually improve treatments for women with advanced and metastatic breast cancer.

The study demonstrates that two biomarkers help identify resistant breast-cancer tumors and can differentiate effective from ineffective therapies. In the future, this might help physicians predict tumor recurrences and patient-survival probabilities during first-line breast-cancer treatments. The study, titled “SIAH and EGFR, Two RAS Pathway Biomarkers, are Highly Prognostic in Locally Advanced and Metastatic Breast Cancer,” was published online by the peer-reviewed journal *EBioMedicine*.

“This paper addresses one of the most challenging areas of breast cancer treatment,” says William Wasinlenko, PhD, Senior Associate Dean for Research at EVMS, “the diversity of response to

therapies in patients with similar types of tumors.”

The study’s co-lead authors are Lauren Siewertsz van Reesema, MD Class of 2019; Vasilena Zheleva, MD, EVMS Surgery resident; and Janet Winston, MD, of Sentara Pathology and Pathology Sciences Medical Group, Sentara Norfolk General Hospital. It was overseen by principal investigator Amy Tang, PhD, Associate Professor of Microbiology and Molecular Cell Biology at EVMS and a researcher in the EVMS Leroy T. Canoles Jr. Cancer Research Center. Dr. Tang joined EVMS in 2010 after seven years as a faculty member and cancer researcher at the Mayo Clinic.

“The degree of collaboration in this study among EVMS, the Sentara Cancer Network and other participants was remarkable,” said Richard Hoefler, DO, Surgical Oncologist and Medical Director of the Sentara Cancer Network.

Additional co-authors include

researchers from Mayo Clinic Cancer Center, North Dakota State University, Sentara Cancer Network, Dorothy G. Hoefler Comprehensive Breast Center in Newport



News, Sentara CarePlex Hospital in Hampton, Princess Anne High School’s International Baccalaureate Gifted and Talented Program in Virginia Beach and Virginia Oncology Associates in Newport News.



To learn more about this breast cancer study, visit evms.edu/digitalmagazine.

Renowned expert in diabetes and heart disease chosen to lead diabetes program

Nationally known physician-investigator Elias Siraj, MD, joined EVMS in September to lead the diabetes program. Dr. Siraj comes

to EVMS from Temple University in Philadelphia where he led that school's diabetes program and headed the endocrinology fellowship training program. He was previously on the endocrinology faculty at the Cleveland Clinic.

As the David L. Bernd Distinguished Chair for Cardiovascular and Diabetes, Professor of Internal Medicine and Chief of Endocrinology and Metabolic Disorders at EVMS, Dr. Siraj oversees the EVMS Strelitz Diabetes Center.

He also leads the research programs at the EVMS Sentara Cardiovascular Diabetes Center, which helps coordinate long-

term care of patients with diabetes and heart problems.

Richard Homan, MD, EVMS President and Provost and Dean of the School of Medicine, says Dr. Siraj is a good fit for EVMS: "Dr. Siraj's recruitment — in combination with the recent assessment of our diabetes experts as among the best in the nation by U.S. News & World Report — again demonstrates the school's commitment to make a difference in the lives of people with diabetes."

Jerry Nadler, MD, the Harry H. Mansbach Chair in Internal Medicine, Vice Dean for Research and Chair of Internal Medicine, recruited Dr. Siraj during a year-long, national search. The school had assistance from the state in the form of an Eminent Research Scholar Award.

Dr. Siraj is excited about his new role. "I hope to elevate the stature and capability of the Division of Endocrine and Metabolic Disorders by growing our patient-care capabilities, enhancing our teaching programs and expanding our research activities." □



Elias Siraj, MD



Learn more about Dr. Siraj on evms.edu/pulse.

Glennan Center embodies vision of its founders

It was 20 years ago this past summer that a physician who dreamed of a center dedicated to the care of older adults in Hampton Roads came together with a donor who shared his vision.

The result was the Glennan Center for Geriatrics and Gerontology, co-founded by geriatrician John Franklin, MD, and philanthropist Virginia Glennan Ferguson.

This anniversary milestone finds the Glennan Center functioning as its founders intended, providing specialized care to older adults in hospitals, independent-living centers and nursing facilities throughout the region and promoting "successful aging" initiatives. The Glennan Center also partnered with

Sentara Healthcare to begin a hospital-based palliative care program and launched an innovative approach called Acute Care for Elders, which uses enhanced care to significantly shorten hospital stays.

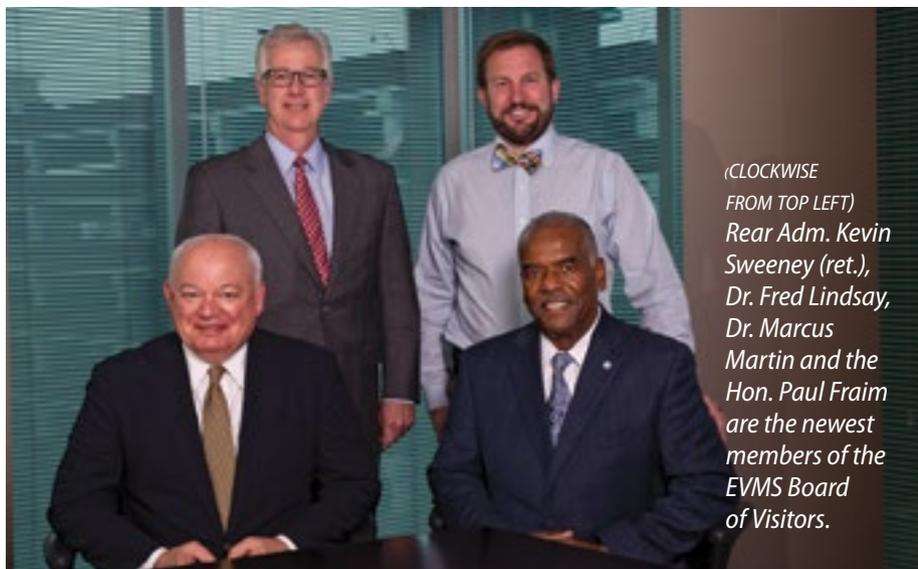
As the number of older Americans continues to climb, Glennan Center geriatricians are teaching their trade to the health-care providers of tomorrow.

Education Coordinator Madeline Dunstan has been on the Glennan



At the 1996 ribbon-cutting of the Glennan Center for Geriatrics and Gerontology, Virginia Glennan Ferguson looks on as Edward Brickell, EdD, EVMS President at the time, unveils her portrait.

Center staff since the beginning. "I think Dr. Franklin and Mrs. Ferguson would be gratified to see how the center has helped spotlight the importance of geriatric care," she says, "and has made a difference in the lives of so many families over the last two decades." □



(CLOCKWISE FROM TOP LEFT) Rear Adm. Kevin Sweeney (ret.), Dr. Fred Lindsay, Dr. Marcus Martin and the Hon. Paul Frain are the newest members of the EVMS Board of Visitors.

Four Virginia leaders join EVMS Board of Visitors

The longest-serving mayor in Norfolk's history, a graduate of EVMS' inaugural MD class and two retired Naval officers have joined the EVMS Board of Visitors.

The Hon. Paul Frain, Esq., served on Norfolk City Council for 30 years. He was appointed mayor in 1994 and re-appointed every two years until 2006 when he became the first popularly elected mayor since 1916. Twice re-elected as mayor, he did not seek re-election in 2016. Not only does he hold a law degree from the University of Richmond, he also earned his master's degree in education from the University of Virginia (UVA).

UVA is where Marcus Martin, MD (MD '76), is Vice President and Chief Officer for Diversity and Equity. He holds two bachelor's degrees from North Carolina State University and was EVMS' first African-American graduate. Dr. Martin is a past president of the Society for Academic Emergency Medicine (SAEM) and the Council of Emergency Medicine Residency Directors. Among his numerous awards is the SAEM Diversity Interest Group Leadership Award, now named the Marcus L. Martin Leadership Award in his honor.

Fred Lindsay, DO, was selected by Presidential appointment to attend the

U.S. Naval Academy. He graduated from the Philadelphia College of Osteopathic Medicine, completed a residency at Naval Medical Center San Diego and was named head of Otolaryngology at the Navy's hospital in Rota, Spain. He later joined Naval Medical Center Portsmouth and was deployed to Germany to manage all medical evacuations from southwest Asia. Dr. Lindsay is in private practice with Hampton Roads ENT-Allergy, based on the Virginia Peninsula.

Rear Adm. Kevin Sweeney is also retired from active duty in the U.S. Navy after having served as Commander, Carrier Strike Group TEN; Commander of the Harry S. Truman Strike Group; and Executive Assistant to both the Under Secretary of the Navy and the Commander, U.S. Joint Forces Command and NATO's Supreme Allied Commander for Transformation. He was Interim President and CEO of the Hampton Roads Economic Development Alliance and is now Vice President of Track Patch 1 Corporation. He holds two master's degrees and was a senior executive fellow in Harvard's Kennedy School of Government. □



Find out more about EVMS' new BOV members at evms.edu/digitalmagazine.

Here's what you've missed recently in EVMS' digital newsroom, the Pulse:



- How to decide between an ophthalmologist and an optometrist.
- Five tips for getting a better night's sleep.
- How EVMS students made a difference for elementary-school students.
- Four reasons men should see a doctor.
- What to do about ringing in your ears.
- Five types of cancer that are priorities for EVMS researchers.
- Six simple ways to reduce high blood pressure

Check your EVMS Pulse daily.



Read these stories and more at evms.edu/pulse.

Leadership changes in Health Professions programs

Five programs in the School of Health Professions have transitioned to new leadership for the 2016-2017 school year.

Master of Physician Assistant, MPA

Thomas Parish, DHSc, PA-C, retired from his role as Professor and Director of the EVMS Master of Physician Assistant (PA) Program in August. During his 12-year tenure as program director, Dr. Parish led the charge to update the PA program admissions process, enhance the curriculum, develop a core faculty of talented, dedicated PAs and improve the PA board performance of new graduates.

Kimberly Dempsey, MPA, PA-C (MPA '03), former Associate Program Director, has assumed the role of Director. "I graduated from the EVMS PA program in 2003, so this is especially meaningful to me," Ms. Dempsey says. "I hope to continue the legacy Tom created by continuous improvement of the curriculum and by creating a more robust research presence."

Biomedical Sciences, PhD; Biomedical Sciences-Research, MS; and Biotechnology, MS

Earl Godfrey, PhD, stepped down as Program Director for all three programs after nine years in the position. Dr. Godfrey, Professor of Pathology and Anatomy, led the charge to create the Biotechnology Master's program and worked with faculty over the past two years to develop a new curriculum for Biomedical Sciences-Research and Biomedical Sciences, PhD programs.

Margaret Morris, PhD, Associate Professor of Internal Medicine, stepped into the Director role for all three programs. Dr. Morris is an active researcher and has worked with the program over the past year on curriculum reform.

"I love interacting with the students and helping to shape the future of science," Dr. Morris says. "One of my main goals



Kimberly Dempsey,
MPA, PA-C



Margaret Morris, PhD



Richard Handel, PhD



Thomas Parish,
DHSc, PA-C



Earl Godfrey, PhD



Michael Stutts, PhD

as Director is to work with EVMS Diversity and Inclusion to improve our relationships with the local historically black colleges and universities, and through these improved relationships, bring an extramural training grant to EVMS."

Clinical Psychology, PhD

Michael Stutts, PhD, stepped down as Director of the Doctor of Philosophy in Clinical Psychology after 13 years. During his tenure, he also served as director of the Virginia Consortium Program in Clinical Psychology, overseeing all components of the program including those from the College of William and Mary, Norfolk State University and Old Dominion University.

Dr. Stutts led the program's change from awarding a PsyD degree (Doctor of Clinical Psychology in Psychology, geared toward clinical practitioners) to a PhD degree with a heavier research component. He also successfully led the program to earn the full seven-year re-accreditation by the American Psychological Association.

Richard Handel, PhD, Professor of Psychiatry and Behavioral Sciences, is now Program Director. He has taught and mentored students in the Clinical Psychology program for more than a decade.

"I am extremely excited to assume of the leadership role for our highly competitive doctoral program in clinical psychology," Dr. Handel says. "I look forward to working closely with our institutional partners, Norfolk State University and Old Dominion University, in training future psychologists to be skilled researchers, teachers and clinicians." □

Hooked for Life

Faculty member finds passion for casting with a conscience

On campus, Ann Campbell, PhD, serves as Associate Dean for Student Affairs and Professor of Microbiology and Molecular Cell Biology. Off campus, she enjoys tying flies and casting lines with family, friends and colleagues — but with an environmentally friendly twist.

How did you become interested in fly fishing?

When my son and husband bonded through sports, I refused to get left behind. They took up golf, so I gave that a try. Seven lessons and two sets of clubs later, I realized that was not the sport for me. One day I accompanied them fly fishing in the Smith River and suddenly realized that it resonated with my love of nature and need to experience tranquility.

What do you enjoy most about it?

I love to be outdoors and to connect with nature and biology. There's always something to study — the river, the insect hatches or nymphs under rocks, the birds or the terrain.

How do you practice environmentally friendly fly fishing?

Fly fishermen are environmentally conscientious and are advocates for clean air and water. Fish need quality water, dependable temperatures and a rich food source, all of which demand a natural balance within an ecosystem. And we fish with barbless hooks: catch-and-release only.

Do you fish with any of your co-workers?

Yes. There are a surprising number of my virologist colleagues who are also enthusiasts. At EVMS, both Drs. John Semmes and Ed Johnson are avid fly fishermen. John even keeps his equipment in his car, so he is ready to go at any time!

How does it connect to your work at EVMS?

It's an extension of my previous work as a scientist — a respect and curiosity of nature and an appreciation for the delicate balances within biological systems. Like a successful experiment, catching a fish on a fly rod is all about getting the many variables just right. In my current role, students have taught me the importance of maintaining a life balance, so that fits, as well.

What are you most passionate about in your work at EVMS?

Each student brings to EVMS unique experiences, talents and aspirations. In my role in Student Affairs, I am passionate about helping students recognize their potential, develop professionally and discover their niche.

Why have you remained at EVMS for 34 years?

EVMS has given me so many opportunities at each stage of my career. Any limitations were my own. □



To learn more about Dr. Campbell's fly fishing, visit evms.edu/digitalmagazine.



The real-world context of service learning helps students integrate their foundational science knowledge and clinical skills with problem-solving abilities.

Service Learning

Where education meets the needs of the community

On a recent Thursday evening, new patients fill the waiting room at the EVMS HOPES Clinic — the state’s first student-run free clinic. An EVMS MD student asks the first patient, “Como puedo ayudarte?” The conversation continues in Spanish, because tonight the clinic is operating under a different name: La Clinica Comunitaria Esperanza.

It is the inaugural Spanish-speaking HOPES Clinic offered by EVMS as part of the Service Learning program.

Working in the HOPES Clinic or being certified in medical Spanish are just two of the 12 Service Learning initiatives students can choose from as part of their degrees. They fall under five areas of need in eastern Virginia: first response; nutrition and exercise; underserved and health inequities; elderly and chronically ill; and infectious disease.

“It is our desire to develop extraordinary community-oriented physicians, and we see service learning as a key part of that development process,” says Ronald Flenner, MD (MD ’89), the James E. Etheridge Jr. Distinguished Professor, Vice Dean for

Academic Affairs and Professor of Internal Medicine. “It strengthens foundational science knowledge, clinical skills and problem-solving abilities in the context of real-world experience.”

In addition to the benefits for students, making a difference in the community is a guiding principle of the EVMS vision. “Clinica Esperanza was designed to combine two areas of need to better serve the community,” says Don Robison, PhD, Director of Service Learning and Assistant Professor of Family and Community Medicine. “We hope to continue to combine projects like these and make a greater impact.”

One Clinica Esperanza patient told Brian Colchao, MD Class of 2019, that he was surprised to find so many Spanish speakers in one clinic, and because of that, he felt confident in the care he was receiving. “He reminded me how much of a difference it makes in the patient experience when the physician is able to connect on a social, cultural and linguistic level,” Mr. Colchao says. The patient’s words left a lasting impression. Mr. Colchao says this experience will inform the way he practices medicine.

PATHWAY

First Response

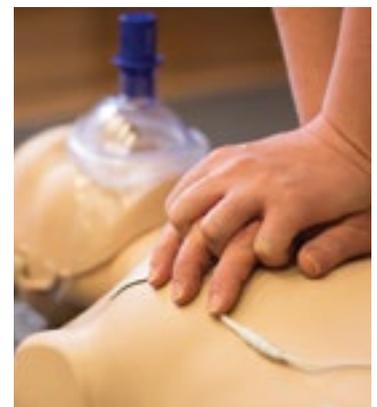


Bystander CPR

When EVMS faculty and students learned that only 12 percent of Norfolk patients who had heart attacks received bystander CPR, compared to the national average of 34 percent, they created the Bystander CPR initiative. After medical students become certified in Bystander CPR instruction, they work with an inter-professional team to conduct trainings in high-risk communities.

Community Stroke Awareness

Nationwide, stroke accounts for one in 20 deaths. Receiving immediate treatment can significantly reduce odds of post-stroke disability. In this service-learning initiative, students first qualify as Advanced Stroke Life Support instructors and then train residents in high-risk stroke communities on ways to identify stroke victims.



PATHWAY

Nutrition and Exercise



Choosing Healthy Options for Wellness (CHOW)

CHOW is focused on combating chronic illnesses, such as hypertension and diabetes, with nutrition and exercise. The objective is to empower and educate patients, students and healthcare professionals to pursue healthy eating and exercise.

Lifting Spirits, Improving Bodies, Feeding Souls, Transforming Lives (LIFT)

LIFT is a nonprofit foundation that offers nutrition, fitness and job-placement training and services to homeless individuals and others in need. Participating students help support these efforts in the areas of nutrition, food shopping and education.

Young at Heart

Students work with administrators and educators at Norfolk schools in low-income neighborhoods. The goal is to provide a structured and safe environment for the children in these communities and provide supplementary instruction in exercise, nutrition, foundational education and the fine arts.

PATHWAY

Underserved and Health Inequities



HOPES Free Clinic

Under the supervision of a physician, students at the HOPES clinic address the health needs of underserved individuals. Utilizing Norfolk Department of Public Health facilities, MD and health-professions students see patients during evening hours to provide long-term primary and specialty care to uninsured Norfolk residents.

Chesapeake Care Clinic

This safety-net clinic is focused on providing quality health and dental care to uninsured and low-income Chesapeake residents. Students explore the dynamics of safety-net care and develop an appreciation for transportation and social services challenges that underserved patients face.

Medical Spanish

Individuals of Hispanic origin are the fastest growing population in Virginia; however, they are often underserved due to a language barrier. In response, EVMS developed the Medical Spanish initiative that certifies students as Spanish-speaking clinicians. From there, students work in clinics and with Spanish-speaking church congregations to begin clinical outreach.

PATHWAY

The Elderly and Chronically Ill



Beyond Clinic Walls

Students form inter-professional teams to make home visits to underserved elderly. Students check the food supply, inspect the home for safety hazards, review medications and socialize with the participants.

Albero House

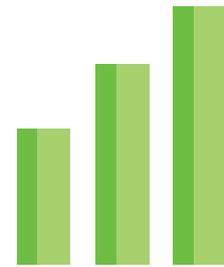
Albero House is a division of St. Mary's Home, a long-term care home for young adults with severe physical and intellectual disabilities. EVMS students help residents perform daily activities, such as eating and transport. They also research new ways to improve care.

“It is our desire to develop extraordinary community-oriented physicians, and we see service learning as a key part of that development process”

Ronald Flenner, MD

PATHWAY

Infectious Disease



HIV Treatment Quality Improvement

Students identify resources and develop strategies to assess the needs of community members living with HIV. By determining baseline data, students prioritize which performance measures or needs might provide the maximum benefit to patients. With their team, students create a project that improves performance in a selected measure.

STI-Focused Community Needs Assessment

Students study methods for gathering relevant community-focused data on sexually transmitted infections (STIs). They analyze and synthesize the data presented in a research project that makes recommendations on how to reduce the risk for STIs.





As Time Goes By

Primary-care physicians are learning to help
their patients age gracefully

The sunlight beckons. It dances through the glass storm door, stretching across hardwood flooring and stopping just short of Kathleen O'Hara's wheelchair.

The 89-year-old entertains the notion of going outside for a moment, then opts to stay inside where neighbors won't be watching. For the better part of 40 years, she has called this place home. It was polio that took her ability to walk nearly 70 years ago, but it didn't slow her down. She's raised three children from this chair.

"I used to say I could do everything except hang the curtains," Mrs. O'Hara says, while straightening her back in pride. "I could get them down to wash them, just couldn't get them back up."

Nothing could hold back this woman who could boost herself up onto kitchen counters to get things out of cabinets, this woman who used one arm to hold herself up and with the other, hang laundry on the line.

Nothing, that is, until now.

Kathy O'Hara shares the responsibility of caring for her mother, Kathleen, with her sister, brother and sister-in-law.



Needs caption. *Niet inis volentibus
vername ratiatis eaque volenderent lam
iunt ius, optaten dipsum.*

A post-polio onset three years ago caused an infection in her arm that took away her ability to use it, and in some ways, her determination to overcome.

She couldn't get in and out of bed. She couldn't get on and off the toilet. It was a sudden downward spiral.

"It was really a failing on our part because we took for granted that she would always be able to function," says her oldest daughter, Kathy O'Hara. "It's really silly when you think about it because everyone loses some ability to function as they age, but we just never had that critical discussion about mom."

Her mother's sudden decline hastened Kathy's decision to retire, so she could help care for her. Today, Kathy, her sister, brother and sister-in-law share the responsibility.

"For someone who was always so independent, to depend on people, that's

hard," Mrs. O'Hara says. "I require so much now, but nobody wants to go into a nursing home. There comes a time that you worry, what's going to happen to me?"

She isn't alone.

The changing landscape of healthcare

According to the National Academies Institute of Medicine, by 2030, the number of Americans 65 and older is expected to exceed 70 million — a jump from 12 to 20 percent of the population since 2005. That means that by 2020, the number of older people will outnumber children younger than 5 for the first time in history.

"Issues of aging will be the theme of healthcare between now and 2050," says Daniel Bluestein, MD, the Charles F. Burroughs Jr. Chair in Family and Community Medicine and Professor of Family and Community Medicine. "The

"Issues of aging will be the theme of healthcare between now and 2050. The demographics tell us that the prevalence of elders, especially frail elders, will be comparable to the prevalence of diabetes patients being seen in primary care."

—Daniel Bluestien, MD

demographics tell us that the prevalence of elders, especially frail elders, will be comparable to the prevalence of diabetes patients being seen in primary care."

And just like you can't send every diabetic to a diabetes specialist, he says, you can't send every senior to a geriatrician.

There simply aren't enough medical professionals going into the specialty. Plus, most people prefer to see the family doctor who has known them for years.

That's why it's vital for primary-care physicians to learn how to care for senior patients, Dr. Bluestein says. A primary-care physician is typically the first contact for a patient with an undiagnosed health concern and the coordinator of any specialty care.

Dr. Bluestein leads several grants related to this issue, including the EPIC-GP (Excellence in Primary Integrated Care-Geriatric Patients) model, aimed at better integrating geriatrics into primary-care practices.

And EVMS' new CareForward Curriculum emphasizes the importance of geriatric care in the first year of



"We took for granted that [our mother] would always be able to function," Kathy O'Hara says.

Myths and Realities of Aging



Dr. Robert Palmer is a nationally recognized leader in geriatric care. He has published numerous articles and books about how to age well. Here, he addresses the myths and realities of aging.

Myth: To be old is to be dependent.

Reality: The percentage of seniors living in nursing homes has been steadily declining and is now only about 5 percent of people over 65.

Myth: Older people require less sleep.

Reality: It's not that they require less sleep; it's that they tend to get less. And when sleep patterns are disrupted by daytime napping and frequent nighttime awakenings, the quality of sleep is poor.

Myth: Genes determine longevity.

Reality: While genes do play an important role in who will get diseases early in life, by the time people reach their late 40s, lifestyle and environmental factors play a far more crucial role in longevity.

When a Geriatric Assessment Can Help

Dr. Robert Palmer says that if an older patient has a severe chronic condition, such as cancer or heart disease, and two or more of the following challenges, a geriatric assessment can help. It shapes the treatment plan and empowers the patient and family members to make informed healthcare decisions.

- Multiple health problems
- Confusion or memory loss
- Behavioral changes
- Difficulty performing daily activities
- Physical weakness, frailty
- Extreme weight loss or malnutrition
- Difficulty swallowing or breathing
- Difficulty managing multiple medications
- Difficulty walking or balancing
- Loss of bladder or bowel control
- Osteoarthritis or osteoporosis
- Significant functional decline, including falls

medical school, introducing virtual patients with conditions prevalent in the age group.

“We are teaching our new physicians and re-educating practicing clinicians that senior care is part of the core business of primary care,” Dr. Bluestein says. “The seeds are being planted here with our young faculty and our learners.”

Working the system

Robert Palmer, MD, stands before an audience of 60- and 70-somethings. He furrows his eyebrows and poses the question, “How many of you hope that you can end your life living in a nursing home?”

Then with a laugh, he asks, “Could you hear me? Seriously, just raise your hand.”

In all the years he’s asked the question, only one person has raised his hand.

According to the 2015 publication *Medicare & You*, as many as 70 percent of people over 65 will need long-term-care services and support at some point in their lives.

But despite knowing the typical pitfalls of aging, Dr. Palmer says, many people are still not prepared for it.

“Think of aging like driving a fancy sports car on a flat road,” says Dr. Palmer, the John Franklin Chair of Geriatrics and the Director of the EVMS Glennan Center for Geriatrics and Gerontology. “You’re driving along at high speeds doing great, and suddenly you hit a brick wall.”

That wall can be a number of illnesses or incidents that are more easily overcome at a younger age.

“When people are over the age of 80, they are in a vulnerable place in their lives where an illness or injury can be catastrophic,” Dr. Palmer says. “It’s important for doctors to talk to patients and their families earlier about how to avoid crashing into that brick wall.”

Which is why it’s important that those in their 60s look at their own health and seek out preventative care and interventions to address health concerns that could impact quality of life and independence down the road. Talk to your family and your physician about your preferences and plan things out, Dr. Palmer says — physically, financially and legally.

“There should be no surprises,” he says. “Where you are going to live, how long you are going to drive, what do you want in place 10 years or 20 years from now, these should be conversations.”

At 69, Linda Hawkins found herself battling health issues on several fronts — from diabetes to neuropathy, heart issues to joint pain. The former schoolteacher and grandmother of two didn’t think her health would be an issue so early in her retirement years.

“My mother is 91 and she is much healthier than I am,” Mrs. Hawkins says. “She has to take only one pill a day; I take a handful.”

That reality has driven Mrs. Hawkins to take better care of herself.

She is tackling her health issues and taking advantage of Medicare Wellness visits with her family physician. She also is looking at



“There should be no surprises. Where you are going to live, how long you are going to drive, what do you want in place 10 years or 20 years from now, these should be conversations.”

—Robert Palmer, MD

downsizing to a smaller home where she doesn't have to worry about maintaining the yard but can live unassisted, much like her mother.

“I am an only child and have only one child myself,” Mrs. Hawkins says. “I realize that my daughter is less fortunate than I am because she has me and my mother to be concerned about, as well as her own little family.”

Discussing the options

At 87, Frances Hicks still lives on her own and drives to church, doctors' appointments and the bank. Her daughter, Heidi Jeffreys, helps to make sure the bills are paid on time.

If her mother needs her, Ms. Jeffreys lives just two minutes away by car, 10 by foot.

“I see my place as being crisis intervention, not as a caregiver or as being in control,” Ms. Jeffreys says. While her inclination after her father passed away was to step in and take over, she has learned not to take things so seriously.

“On one hand, I am her significant other,” Ms. Jeffreys

says, “But on the other, she is relatively healthy and able to make her own decisions and life choices, so I figure if there's not a crisis, it's a good day.”

And good days at any age, she says, are a very good thing.

Today is a good day for Mrs. O'Hara. She props herself up as best she can, elbows cocked at odd angles and back curved. Her fingers trace along the lines of a crossword puzzle, and she softly hums an old, familiar song: *Eliminate the negative/Latch on to the affirmative/Don't mess with Mister In-Between*.

Tomorrow she will have cataract surgery to help improve her eyesight. Soon, there will be tougher conversations about when she will have to move.

But for today, this puzzle is the most complex thing she faces, and she has “Little Kathy” to help her along the way.

“We are very fortunate,” Kathy O'Hara says. “In some families, there is one person who takes it all on. Among all of us, we will do the right thing.” □



Learn more about how EVMS is helping primary-care physicians address the health needs of seniors at evms.edu/digitalmagazine.



“Service is ingrained in our culture”

EVMS named finalist for national community-service award

“As both a public servant and pediatric neurologist, I have made children’s health a priority. Eastern Virginia Medical School works equally diligently. . . . I am proud to endorse EVMS for the AAMC Spencer Foreman Award for Outstanding Community Service.”

That text is from a letter by Virginia’s Lt. Gov. Ralph Northam, MD (MD ’84), Assistant Professor of Pediatrics, in support of EVMS’ application for a national community-service award, presented each November by the Association of American Medical Colleges (AAMC). Although the school didn’t win this year, EVMS was chosen as one of three finalists.

“Community service is ingrained in our culture,” says Richard Homan, MD, President and Provost and Dean of the School of Medicine, referring to EVMS’ founding in 1973 by a grass-roots effort of the community. “But recently we have codified that service ethos in two key ways, and I believe that contributed to our selection as a finalist.”

One way, Dr. Homan explains, is by formally integrating community service into education through a service-learning curriculum (*see story on page 10*). Another way is through the 2012 establishment of the M. Foscue Brock Institute for Community and Global Health, which provides a mechanism for engaging with community partners around key health needs.

“When it comes to community service, EVMS has an embarrassment of riches,” says Cynthia Romero, MD (MD ’93), Director of the Brock Institute and former Virginia State Health Commissioner. “Narrowing down the focus of our award application took a month’s worth of meetings.”

In July, four members of the AAMC award-selection committee spent a day visiting EVMS. They viewed videos and had presentations by faculty and staff during a bus tour that gave them a first-hand look at EVMS’ community-service efforts. The tour went through a Portsmouth neighborhood served by a Healthy Communities program; out to Suffolk to meet a patient at Western

Tidewater Free Clinic, which was co-founded by an EVMS professor; and back to Norfolk’s Young Terrace subsidized-housing community, where EVMS students volunteer at an elementary school.

The AAMC visitors also learned about HOPES Free Clinic, the first student-run free clinic in Virginia; Beyond Clinic Walls, an outreach project in which students make home visits to underserved elderly clients; CINCH (Consortium for Infant and Child Health), a 200-member health coalition led by EVMS Pediatrics’ Division of Community Health and Research; and the Maury Medical and Health Specialties Program, a 30-year partnership with Norfolk Public Schools.

“Being selected as a finalist for this award,” Dr. Homan says, “shows we’re making great progress toward our vision of being the most community-oriented school of medicine and health professions in the nation.” □



Blue-ribbon day for the community

Leaders from EVMS and the community came together in May 1987 to celebrate the birth of what is now the EVMS Strelitz Diabetes Center. On hand for the ribbon-cutting ceremony were (left) Don Seyboth, then President of Cosmopolitan International; and the late Henry Clay Hofheimer, then President of the EVMS Foundation. Cosmopolitan International helped establish the EVMS center and continues today as a loyal supporter.



EVMS residency alumna Sarah Baddorf, MD, at the South Pole.

A physician's love affair with the Antarctic

Some people will go the ends of the earth in search of adventure. Emergency physician Sarah Baddorf, MD, has been there — twice.

Dr. Baddorf (Emergency Medicine Residency '13) first spent three months in Antarctica last year at the Palmer Station, a U.S. research station on the Antarctic Peninsula.

"I'd been wanting to go to Antarctica since I was an undergrad, when a firefighter was talking about wanting to work there, and my interest was sparked," Dr. Baddorf says.

As a physician at Palmer Station, Dr. Baddorf was prepared for lots of down time. She would be caring for just 30 colleagues,

and she envisioned a frigid, desolate landscape. Instead, she found herself constantly occupied — penguin-watching, ice-climbing, boating and snow-skiing.

The experience cemented her interest in Antarctica. "I thought I was checking it off my bucket list," she says, "but really all I did was develop a not-understood-by-many love for this continent."

She came back to the U.S., worked a "real job" in Memphis for a few months to keep up her emergency-medicine skills and then returned to Antarctica — this time to the South Pole.

During the summer season, October to February, she was the sole doctor for a group of 150 scientists and support staff at Amundsen-Scott South Pole Station. In a note to her former teacher, Frank Counselman, MD (MD '83, Emergency Medicine Residency '86), EVMS Foundation Distinguished Professor in Emergency Medicine and Professor and

Chair of Emergency Medicine, Dr. Baddorf remarked on the weather — "It's fairly warm today" at 22 degrees below zero — and gave her impressions of the South Pole.

"This is the most bizarre place on the planet," she wrote. "The station is like a cross between a submarine and a space station (so say the people who have been in both places), and it exists entirely for the pursuit of science. All I can see for miles in any direction is flat, white grounds and plain sky, but it is so beautiful."

"Where I trained," she added, "comes up in conversation frequently, and I always think fondly of EVMS and the people there."

Dr. Baddorf is back in the states once again and contemplating her next adventure. Though her fascination with Antarctica remains, "I'm actually thinking more tropical this time." □



Follow Dr. Baddorf's latest adventure and discover the challenges of practicing medicine in a remote location at evms.edu/pulse.



Alumni from the EVMS class of '76, the school's first graduating class, reconnected with faculty members during the annual Alumni Weekend in October.



During Alumni Weekend, the EVMS Wine Chalet at the Town Point Virginia Fall Wine Festival hosted EVMS alumni from a variety of programs over the years.



To see more photos from Alumni Weekend, visit evms.edu/digitalmagazine.

classNotes

- **Ashley Bussey** (MPH '16) recently joined S.L. Nusbaum Realty Co.
- **Patrick Eulitt, MD** (MD '14), is currently completing an Internal Medicine residency at The Ohio State University Wexner Medical Center.
- **Neeta Goli, MD** (MD '13), recently completed a residency in Pediatrics at Cincinnati Children's Hospital and is currently working in primary care pediatrics in Garland, Texas.
- **Brad Holbrook, MD** (Medical Master's '06, MD '10), completed a residency in OB/GYN at the University of New Mexico and is currently in his final year of a Maternal-Fetal Medicine fellowship at the same institution. Dr. Holbrook presented at the Central American Congress of Associations of Gynecology and Obstetrics in Tegucigalpa, Honduras, in March 2016, and at the National Congress of Gynecology

and Obstetrics in Guatemala City, Guatemala, in July 2016. He has accepted a position with a private practice in Missoula, Montana, beginning in August 2017.

- **Laura Huang, MD** (MD '12), is now an Assistant Professor with the Department of Physical Medicine and Rehabilitation at the University of Miami Miller School of Medicine.
- **Rhorie Kerr, MD** (MD '14), is currently a PGY3 in Otolaryngology at The Cleveland Clinic in Cleveland, Ohio.
- **DeVon Preston, MD** (MD '13, Internal Medicine Residency '16), is a fellow in the Department of Medicine, Division of Allergy and Immunology, in the University of Virginia Health System. His residency research, "The Relationship Between Asthma and Food Deserts in the Hampton Roads Area" has been accepted at the ACAAI

National Conference that will be held in San Francisco in November.

- **Anton Quist, MD, MPH** (MD '13), earned his Master's in Public Health from the University of Washington in summer 2016 and currently serves as Chief of Preventive Medicine for the Moncrief Army Health Clinic in Columbia, South Carolina.
- **Josiah Wrensford, MD** (MD '12), completed his residency at Baylor Family Medicine Residency at Garland in Texas in June of 2015. He is currently working in emergency/urgent care in Dallas, Texas.
- **Claudia Kim, MD** (MD '11, Surgery Residency '16), has joined Genesis Surgical Associates with a specialization in general surgery.
- **Jillian Capucão, MPH** (MPH '16), has joined Virginia Health as an Epidemiology Analyst. □

Doctors' planning and skills save lives of mother and child

Katie Neihoff with her son, AJ, who survived a high-risk pregnancy thanks to EVMS.

PHOTO BY HEIDI CALMA

At 32 weeks along, Katie Niehoff hadn't told anyone outside her family that her pregnancy wasn't exactly normal. It was a Saturday, and her husband, Jason, was painting the dining room when she noticed she was bleeding.

It was time. She had known this day was coming, when what was supposed to be a joyful occasion would be clouded with blood transfusions, the ICU and emergency surgery.

In her fourth pregnancy, Katie was diagnosed with a rare condition called placenta accreta — when the placenta attaches too deeply into the uterine wall and doesn't detach during delivery — causing life-threatening blood loss. She had quietly struggled for months with the knowledge that as soon as her baby was born, her own fight for survival would begin.

"We just had to keep looking forward," she says. "We're going to get through this. We're going to trust our doctors, do what

they say, keep marching forward."

On Aug. 10, 2015, AJ was born and Katie started bleeding profusely. She lost her entire body's volume of blood. Her doctors at EVMS didn't lose a minute. Drs. Camille Kanaan, Margarita deVeciana and Letty Romary had everything in place—the team, the operating room, the donated blood.

The last thing Katie remembers is hearing AJ cry. Seconds after he was born, her hysterectomy began. She was pumped with one unit of blood every 15 minutes through a vein in her neck while her husband, awaiting news, ran between the NICU and the ICU.

A day later, with wires and ports and special permission, she held her baby boy in her arms. "We had a heck of a time, didn't we, buddy?" she asked him with tears in her eyes, petting his forehead.

And looking up at her husband, "He smells so good."

More than a year later, the Niehoffs

still praise the care they received at EVMS. "We knew that they were the best, and they were going to take care of us," she says. "And they did exactly what was needed to get everybody out of that delivery room safely."

As the magnitude of what they experienced set in, Katie wanted to give back. On AJ's first birthday, she organized what she hopes will be an annual blood drive to say thank you to both the Red Cross and her EVMS doctors.

"I have so much respect for them," she says, "and just truly don't know how I could ever thank all of them collectively for what they did for us." □

Featured EVMS Physicians

Camille Kanaan, MD, *Professor of Obstetrics and Gynecology.*

Margarita deVeciana, MD, *Professor of Obstetrics and Gynecology.*

Letty Romary, MD, *Maternal-Fetal Medicine Fellow.*



To view a video about the Niehoffs, visit evms.edu/digitalmagazine.



Up close and personal EVMS' M. Foscue Brock Institute for Community and Global Health recently invited Bruce Waldholtz, MD, Assistant Professor of Clinical Internal Medicine and Immediate Past Chair of the American Cancer Society, South Atlantic Division, to speak on the importance of colon cancer screenings. Afterward, the audience got a better idea of what colorectal cancer looks like inside a 14-foot inflatable colon.



Great cast Wine, Women and Fishing, Chesapeake Bay Wine Classic Foundation's annual tournament, has raised \$450,000 for EVMS breast-cancer research. Pictured at the 2016 event are John Semmes, PhD, Director of the EVMS Leroy T. Canoles Jr. Cancer Research Center (left), tournament organizer Linda Church and Richard Homan, MD, President and Provost of EVMS and Dean of the School of Medicine.

View all of these photos and more at evms.edu/digitalmagazine.

OUR VISION: Eastern Virginia Medical School will be recognized as the most community-oriented school of medicine and health professions in the United States.

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