

EVMS

MAGAZINE

THE GRAYING OF HIV

*LET'S TALK
ABOUT SEX*



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CONTRIBUTORS

Kelley Freund

Liz Ly

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EVMS

MAGAZINE

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The Graying of HIV

EVMS looks at the changing face of a national epidemic.

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When AIDS and HIV became a public-health crisis in the 1980s, there was little chance that those who contracted the virus would live into their elderly years. But thanks to advances in treatments, nearly 50 percent of people with HIV today are older than 50, with many now in their 70s and 80s.

In HIV's transition from a frightening terminal disease to a well-managed chronic condition, older people who are HIV-positive must now consider its impact on other conditions associated with aging. And there is another reason for HIV's increase among seniors. In our cover feature (*see page 14*), learn why a discussion about safer sex among seniors is long overdue.

This month, about 500 new students came through the doors of EVMS for the first time. If they are anything like I was, they might benefit from the wisdom of those who recently went out those same doors. In "What I Wish I Had Known" (*see page 10*), recent EVMS graduates offer guidance to their incoming counterparts.

Once those new students connect with the EVMS community, many will jump at the chance to learn patient care first-hand by taking part in medical mission trips. The photo essay in this issue (*see page 22*) offers a glimpse into their meaningful service work.

A commitment to service is a value we strive to instill in our new students. It starts their second day here when they give back through Community Impact Day and continues through our extensive service-learning program and the diverse volunteer opportunities we afford them.

Albert Einstein once said, "Only a life lived for others is a life worthwhile." EVMS students, we are proud to say, are shining examples.

Sincerely,

Richard V. Homan, MD

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Welcome, residents and fellows

In June, EVMS welcomed 101 residents and 25 fellows to begin the next step of their medical education.



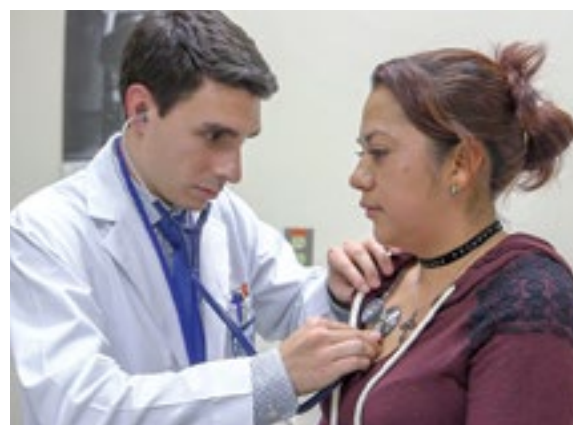
New center provides unique care

The EVMS Aesthetic Center is the only cosmetic program in Hampton Roads that includes physician expertise from three specialties, Plastic Surgery, Facial Plastic Surgery and Dermatology.

Board-certified physicians Lambros Viennas, MD; Edward Prodanovic, MD; and Eric Dobratz, MD, provide non-surgical and surgical rejuvenation within an academic medical center that provides access to the latest techniques and research.



Pictured from left to right: Edward Prodanovic, MD; Eric Dobratz, MD; Lambros Viennas, MD.



More opportunities to serve

Over the summer, Service Learning at EVMS launched seven new initiatives for students to choose from under six pathways. These programs give students opportunities for learning that cannot be experienced in a classroom alone.

- Take a Breath
- YMCA After-School Health Literacy
- Street Health
- Community Innovations
- Community Based Research
- Mother and Baby Mermaids
- Medical French

Check your **EVMS Pulse** daily. Read these stories and more at evms.edu/pulse.



Creating citizen superheroes

Norfolk Fire-Rescue recently launched the PulsePoint Respond app through a partnership with EVMS. The free app, which can be downloaded through Google Play and the App Store, alerts people trained in hands-only CPR to nearby cardiac emergencies. EVMS' Bystander CPR service-learning team, composed of EVMS' medical students, was integral in PulsePoint's implementation Norfolk. During the past four years, the team has worked with Norfolk Fire-Rescue to teach hands-only CPR within the community.

Graduate certificate programs launched

As the region's healthcare workforce needs grow and change, so does EVMS. The School of Health Professions now offers graduate certificate programs in Contemporary Human Anatomy, Healthcare Analytics, Implementing Change and Achieving High Performance in the Healthcare Environment, Medical and Health Professions Education (with five tracks to choose from) and Public Health (with three tracks to choose from). Anyone interested can learn more at the school's open house Saturday, Oct. 27, from 8:30 a.m. to 1:30 p.m.



More than 50 area businesses and over 100 golfers raised more than \$60,000 for EVMS on a sunny June day at Virginia Beach's Bayville Golf Club, during the annual EVMS Charity Golf Classic. The tournament's two winning teams were Servpro of Norfolk and DACS, Inc. Pictured here are DACS, Inc. team members (from left) David Attanucci, Clark Avery and Troy Culpepper.



evmsedu • Follow

evmsedu We put @timkaine to work! Today our team at the EVMS Sentara Center for Simulation and Immersive Learning taught him how to intubate a patient! Maybe medicine after politics? We would welcome him with open arms at EVMS!



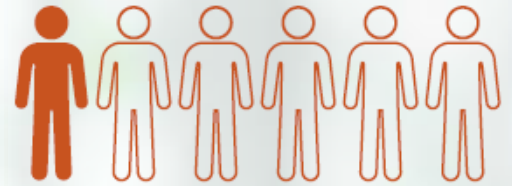
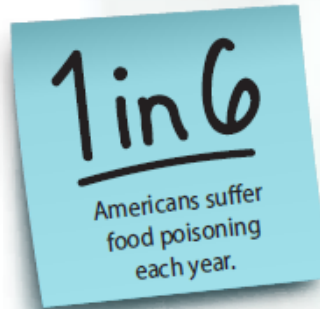
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Out of the Box

Preparing safe lunches can prevent food-borne illness.

For many parents, “back to school” means back to packing lunches. With National Food Safety Education Month coming up in September, here are tips to pack safe lunches for school and work — and what can happen if they’re not so safe.

Why packing safely is important



Follow these tips for a tasty and safe lunch



Keep It Clean. When making lunches, a vital ingredient is cleanliness. Start by washing your hands, then keep surfaces clean and avoid cross-contamination.



Be Picky. When choosing what to pack, consider the environment. A packed lunch is not the place for sushi or a homemade Caesar dressing with raw yolks.



Pack Right. Just as at home, foods need to be stored appropriately. Pack hot foods in a thermos. Cold foods need frozen water bottles or gel packs with them.



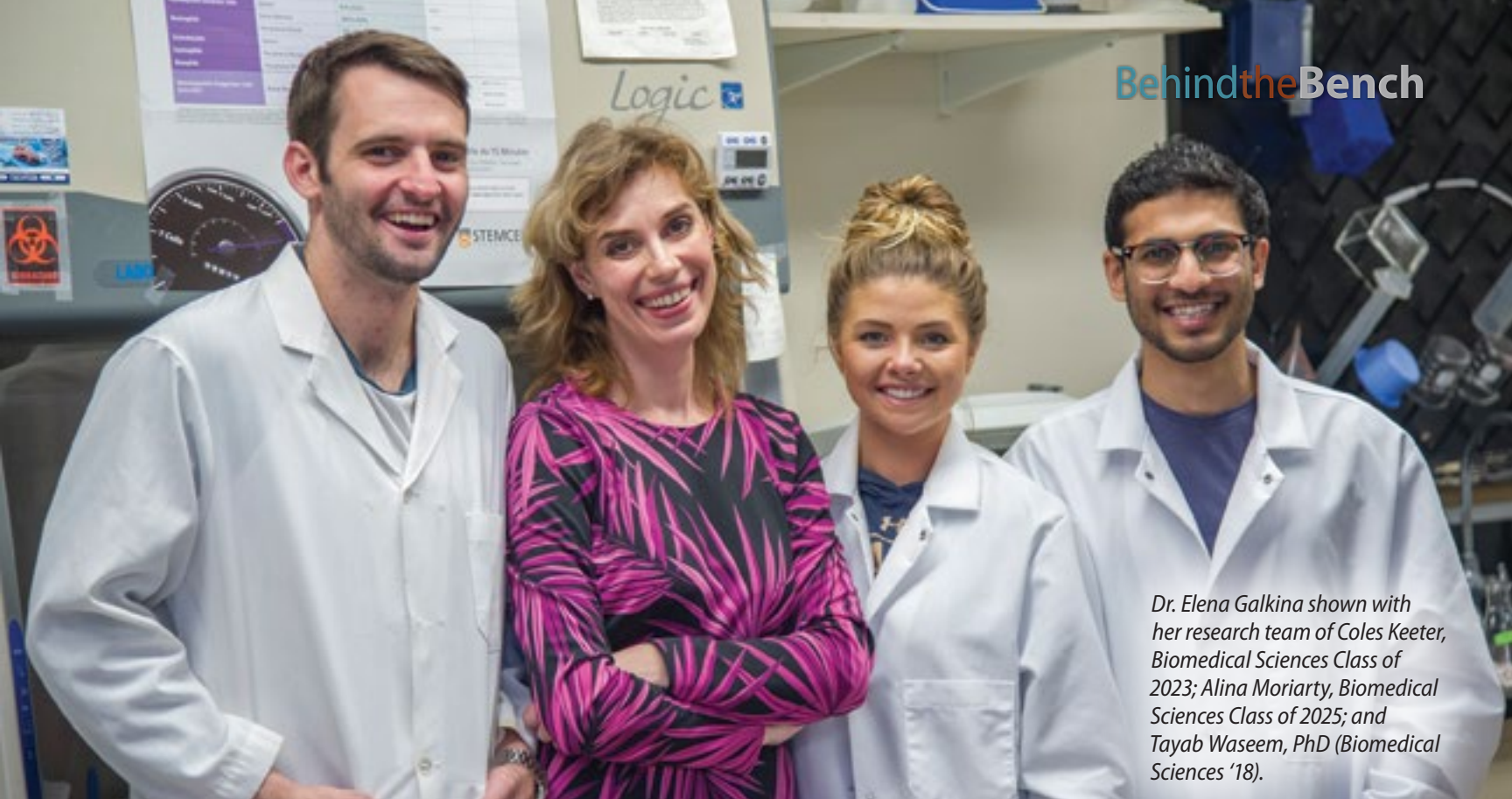
Trash It. You might be tempted to have your leftover lunch for dinner. But when food has been in a lunchbox all day, that could be risky. Throw it away instead.



Wash It Out. Clean your lunchbox or softside container with soapy water after every use, and remember to dry it thoroughly to prevent mold.



Sources: John Snellings, MD, Assistant Professor of Family and Community Medicine at EVMS; Centers for Disease Control and Prevention; USDA.gov; TheKitchn.com.



Dr. Elena Galkina shown with her research team of Coles Keeter, Biomedical Sciences Class of 2023; Alina Moriarty, Biomedical Sciences Class of 2025; and Tayab Waseem, PhD (Biomedical Sciences '18).

Scientist's complex questions may find answers to atherosclerosis

If atherosclerosis is ever eradicated, there's a good chance Dr. Elena Galkina's research will have played a part.

During her 10 years at EVMS, Elena Galkina, PhD, Professor of Microbiology and Molecular Cell Biology, has run a research lab focused on atherosclerosis, a progressive disease that leads to artery-clogging fatty deposits — called plaque — that cause heart attacks, strokes and peripheral vascular disease.

A recent \$2.5 million grant from the National Institutes of Health is enabling Dr. Galkina and her team to study the role of specific immune-system cells in atherosclerosis. The team also is collaborating with EVMS diabetes experts on research related to type 2 diabetes and plaque buildup, work that's supported by a \$2.4 million NIH grant.

Her team's newest direction, for which Dr. Galkina will soon seek funding, involves partnering with EVMS Sleep Medicine specialists to study how sleep fragmentation affects atherosclerosis.

"I'm interested in asking complex questions and blending different fields," she says. "Sleep problems, as we know, can affect all parts of the body."

Dr. Galkina has been asking complex questions since she was drawn to biology and chemistry as an undergraduate in Saint Petersburg, Russia, where she grew up. After earning her

doctorate at the Institute for Experimental Medicine there, she was invited to the prestigious National Institute for Medical Research in London for postdoctoral training.

Dr. Galkina did her second postdoctoral training at the University of Virginia, where she worked with Jerry Nadler, MD, now EVMS' Vice Dean for Research, the Harry H. Mansbach Chair in Internal Medicine, and Professor and Chair of Internal Medicine. When Dr. Nadler came to EVMS, he knew Dr. Galkina would be an asset to the school's growing research enterprise, so he recruited her from UVA.

One result of Dr. Galkina's early work was the development of a new method to study leukocyte content in large blood vessels, a method now used by many labs around the world.

"Science is highly competitive right now," Dr. Galkina says. "To get grants, you have to be at the top of your field. You have to find your own niche, and you have to like what you do."

Tayab Waseem, PhD (Biomedical Sciences '18), is a recent EVMS graduate who worked in Dr. Galkina's lab for several years.

"She really pushed me," Dr. Waseem says. "She's been a wonderful mentor and teacher." □

The team's newest direction is investigating how sleep fragmentation affects atherosclerosis.



FARMER JOHN (Snowden)

Tending data by day, crops by night

On campus, systems analyst John Snowden tackles perplexing computer programming challenges. Off campus, “Farmer John” relishes his other passion. He raises vegetables in the same rich, dark soil that his grandfather farmed in rural Currituck, North Carolina, and regularly shares his wide-ranging knowledge of food, nature, astronomy, publishing, business and life with visitors.

Why did you get into farming?

I was the publisher and editor of a weekly newspaper in Currituck at the time, and I decided I needed a hobby. I wanted something to get me away from the computer and get me outside where I could walk around.

What do you like about farming?

My late sister and I got into farming to do what I’m doing now: to teach people and to feed people. I want to teach people to be self sufficient. I’m diabetic, so that’s another reason I got into farming. I was concerned about what I was eating, especially the chemicals often used in farming. I’m also drawn to wildlife on the farm. We often see bald eagles, great heron, ospreys — even the occasional bear. A lot of times, I leave here, get home, eat dinner, go out at night and sometimes work until 1 a.m. It’s not tiring at all, and my blood sugar is lower. It’s therapy.

Do you see any connection between programming and farming?

The projects I see here can appear overwhelming. Running a farm can be overwhelming. I break things down into steps. That’s what a systems analyst does. I like planting a seed and seeing the end product. That can be a vegetable. Or it can be planting a seed of knowledge in a co-worker and stimulating it to grow, or nurturing a strong work ethic in kids who come to work on the farm.

What do you like about your job at EVMS?

If I won the lottery tomorrow, I’d still show up to work here. I love working at EVMS. I love the people. I love what we do. I tell people, “I’m not a doctor, but I help make them.” We don’t interact with the students a lot, but if they have problems, I go out of my way to help them because they’re the reason we’re here. □



Learn more about Farmer John at
evms.edu/digitalmagazine.



The first year of a medical or health-professions program can be a trying experience. But these graduates want those who follow in their footsteps to know there is a light at the end of the tunnel. For students just entering that tunnel, here is more guidance on how to get through it.

“I wish someone would have told me simply, ‘It’ll all be OK.

Your grades will be fine. You will do great in your clinical years. You will match into the specialty of your choosing.’ Simply saying, ‘It will be OK,’ would have soothed a lot of the anxiety that first-years feel, especially as they adjust.”



Jelani Williams, MD (MD '18)

Surgery resident

University of Chicago Medical Center



“It is not easy.

But, it’s not impossible.

No one is going to hold your hand through the process. Be responsible for your actions and take control of your education. It’s kind of a tough-love situation, but remember, we are responsible for human lives.

We have to take it seriously.”

Joslyn Del Signore, MPA (MPA '18)

Physician Assistant, Emergency Physicians of Tidewater



Eric Lehrer, MD (MD '18)

Radiation Oncology resident, Stony Brook Medicine/Mather Hospital Program in Port Jefferson, NY

“I wish someone told me that you mature so much during medical school. You don’t realize it until you have time to reflect at the end of your time at EVMS. And when you think back, you realize just how much more mature and wiser you became over the past four years.”

“I wish I had known that the next four years were going to go by faster than I could ever imagine. Work hard but have fun and cherish these next four years. The relationships you create with your peers will last a lifetime.”



Sharmeen Husain, MD (MD '18)

Surgery resident, MedStar Union Memorial Hospital
Baltimore, MD



Amanda Miller, MPA (MPA '18)

“With academic stressors, it can seem like there is no conceivable way you can be involved on campus. However, this is certainly not true. In fact, by being fully immersed in student activities and organizations, I firmly believe I’m a more holistic person and provider.”



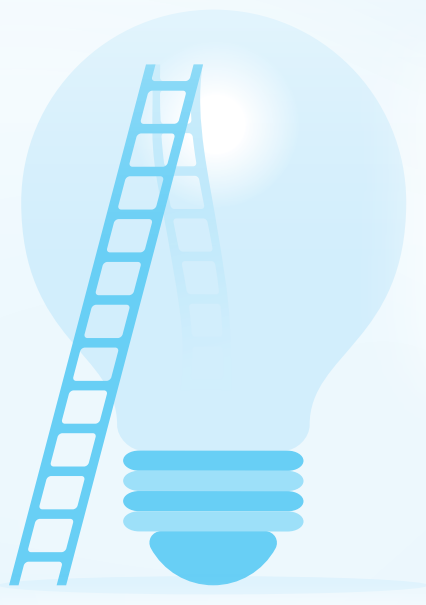
Scott Binder, MD (MD '18)
Internal Medicine resident, Johns Hopkins University/Bayview Medical Center in Baltimore, Maryland

“I wish that I had known to enjoy the little moments throughout medical school. It goes by so much faster than you think, and looking back, I will definitely miss the friends I’ve made and the amazing mentors I’ve had.”



Marie Ally, MS (MS'18)
Graduate, EVMS Medical Master's Program

“I wish I hadn’t waited to use all of the resources that are available to us as students. Academic Development provides peer tutors and academic counselors to enhance our skills and help us develop strategies to be successful.”



“I would say it’s important to have allies and those friends who encourage you when you’re struggling. And definitely don’t be afraid to reach out to preceptors and mentors. They are here to help.”



Melissa Spicer, MSA (MSA '18)
American Surgical Professionals: Virginia



“This is part of the reason I chose to attend EVMS”

Students help the underserved get healthy through LIFT program

Whether an avid walker or more comfortable on the couch, everyone inside this gym is an athlete.

That’s because they’re all participants in the EVMS service-learning program LIFT, part of a partnership with Jim White Fitness & Nutrition Studio in Virginia Beach.

The studio launched the LIFT Fitness Foundation to provide fitness, nutrition and job placement training to the homeless and those in need.

“We would hold training events across Hampton Roads,” Jim White says, “and people regularly approached us wanting to participate, but they didn’t have the money. When people are living paycheck to paycheck and trying to make ends meet, eating healthy and joining a gym rarely make the cut.”

That decision can come at a cost. A recent Centers for Disease Control and Prevention report shows that low-income American adults have higher rates of heart disease, diabetes, stroke and other chronic disorders than wealthier Americans.

Mr. White wanted to serve this population but wasn’t sure how to staff the operation. In 2014, he teamed up with EVMS service-learning students to hold 30-, 60- and 90-day fitness

and nutrition programs across Hampton Roads — at no cost to participants. The students teach exercise and nutrition classes, check vitals and provide blood pressure and diabetes screenings.

Student Molly Snyder was drawn to EVMS because of the program. “I worked as the program coordinator for LIFT before matriculating at EVMS,” says Ms. Snyder, MD Class of 2021. “In fact, the opportunity to volunteer is part of the reason I chose to attend EVMS.”

During screenings, an attending physician oversees students. Susan Kim-Foley, MD, volunteered to help after learning about the program from her daughter, Caitlyn Foley, MD Class of 2019. Dr. Kim-Foley believes medical students should interact with those in need to better understand the challenges many

“As a family physician for 25 years, I have seen how difficult it is for most people to maintain a healthy lifestyle.” — DR. KIM-FOLEY

patients face. “As a family physician for 25 years, I have seen how difficult it is for most people to maintain a healthy lifestyle.”

Ms. Snyder says seeing the effect LIFT has on the athletes is the most rewarding part. “Not only do they see physical improvements, but many of them also report improvements in confidence and their willingness to set and pursue goals. It’s incredible to witness when that manifests as a new job or housing opportunities.” □

Stories on the Vision Quest page reflect ways in which EVMS strives to achieve its vision of being the most community-oriented school of medicine and health professions in the United States.

THE GRAYING OF HIV



**A LOOK AT THE
NEW FACE OF A
NATIONAL EPIDEMIC**

AN EARLY MORNING MIST
SETTLES OVER THE
RUNNING PATH IN THE
HOUR BEFORE DAWN, WASHING
EVERYTHING IN A COOL, DENSE
GRAY THAT CLINGS TO THE AIR.

THE SQUARE OUTLINES OF HOUSES
AND THE CITYSCAPE RISE FROM
THE HORIZON. THE ONLY SOUNDS
BREAKING THE SILENCE ARE THE
CRUNCH OF AMANDA'S* WET-SOLED
SNEAKERS AND THE OCCASIONAL
LONELY WHIR OF A PASSING CAR.



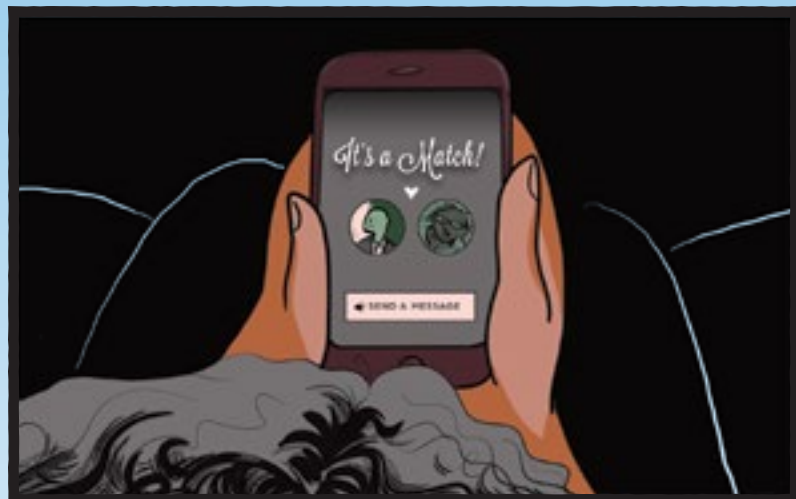
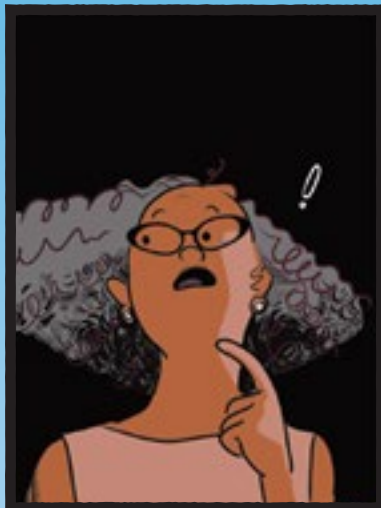
HERE, IN THE GRAY
MARGINS OF MORNING,
SHE IS COMFORTABLE.
IT'S A PLACE SHE
LONGS TO STAY. BUT
DAWN BRINGS BLUE
SKIES, WARM SUN
AND A REMINDER.
THE REALITY OF
LIFE AFTER AN
HIV DIAGNOSIS
AT 62 AWAITS.



IT'S THAT
SECRET,
NOT THE JOGGING,
THAT MAKES AMANDA'S
HEART BEAT
HARD IN
HER CHEST.



*NOT HER REAL NAME.



"IT'S NOT EXACTLY something you want to chat up the bridge-club ladies about," Amanda says. "HIV isn't something people in my social circle and at my age know, or care to know much about."

And therein lies the problem.

According to the Centers for Disease Control and Prevention, more than 45 percent of all people in the U.S. living with diagnosed HIV are over the age of 50. That's thanks in great part to better treatments and disease management that enable people to live far longer, says Catherine Derber, MD, Associate Professor of Internal Medicine who also works in the division of Infectious Diseases at EVMS.

But even if the issues around the aging of HIV and AIDS stopped there, healthcare providers and their patients would already have plenty of uncharted territory to manage, Dr. Derber says.

"We have patients living into their 80s and 90s," she says, "and with that comes issues of aging. The combination of HIV and geriatrics isn't one that had been thought much about, so it leaves a lot to consider and manage."

Yet the graying of HIV is not just the result of better treatment.

According to the CDC, as many as one in seven new diagnoses of HIV or AIDS in the U.S. is in a person over 50. While older people have the same HIV risk factors as younger people, research suggests they are often less aware of their susceptibility.

"You can get HIV just as easily at 70 as you can at 17," says Robert Bailey III. "It's as simple as that."

A 57-year-old peer educator with the HIV/AIDS Resource and Consultation Center at EVMS, Mr. Bailey works to educate the community about HIV risks.

"You have to know your risk factors," he says.

UNCOMFORTABLE DISCUSSIONS

Amanda did everything right by social standards, she says.

She waited a respectful amount of time after her husband of 34 years passed away before her foray into the dating world. She didn't rush — not into dating and certainly not into bed. She dated just one man. Talking about condoms makes her blush.

"It's silly really when you think about it," Amanda says. "I just thought this was something that happens to other people, younger people. Not to me."

I'm excited for our first date. Can't wait to meet you!

Same goes here!

I just have to tell you one thing.

...



But no one is immune.

It's a simple fact that registered for Cindy Lewis, a Nurse Educator with the HIV/AIDS Resource and Consultation Center at EVMS, when her sister started talking about dating for the first time in over four decades.

"She was going to attend a senior prom, so I went to visit, and I threw a handful of condoms in my suitcase to take along," Ms. Lewis says. "She was married for over 40 years, so I knew that dating today was something we needed to talk about."

It was an uncomfortable discussion, Ms. Lewis says. "We giggled a lot, and it was a little embarrassing, but it was a really good talk."

Unfortunately, that "talk" isn't something many people have with family members over the age of 55.

"Who's going to ask their mom or their grandma if she is having unprotected sex," Ms. Lewis says. "You just don't see conversations happening that way."

Plus, stigma and misperceptions about the disease still linger.

"The questions and comments I hear never cease to amaze me," says Tanya Kearney, PhD, MPA, Director of the resource center.

HIV/AIDS IN VIRGINIA



VIRGINIANS

living with HIV or AIDS as of December 2016 (the most recent statistics available from the Virginia Department of Health).



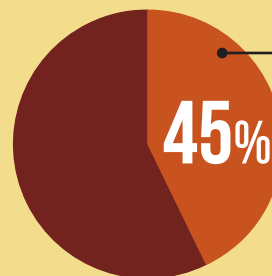
7,464

were in the Eastern Region, which includes Hampton Roads and the Eastern Shore.

That accounts for

31%

of all Virginians with HIV or AIDS — more than any of the other four health regions in the state.



And like the national trend, more than 45 percent of those are

OVER 50



At a recent social event, a woman in her 70s told Dr. Kearney she carries silverware to restaurants in her purse for fear she may “catch HIV” from the restaurant staff.

“In the older generations especially, there is still a lot of misinformation and misunderstanding,” Dr. Kearney says.

They think it is a young person’s disease and stereotype it as something that only affects people who are promiscuous, gay or drug users.

They don’t consider that the disease could just as easily affect the handsome widower in church, Ms. Lewis says.

Yet the Virginia Department of Health reports that as of December 2016 (the most recent statistics available), 24,396 Virginians were living with HIV or AIDS. Of those, 7,464 were in the Eastern Region, which includes Hampton Roads and the Eastern Shore.

That accounts for 31 percent of all Virginians with HIV or AIDS — more than any of the other four health regions in the state. And just like the national trend, more than 45 percent of those are over the age of 50.

That’s a largely gray margin in a disease typically identified by a red ribbon, Dr. Derber says.

EMBARRASSED AND INVISIBLE

The U.S. Administration on Aging refers to seniors as “an invisible at-risk population” in regards to HIV.

Not only are seniors less likely to understand their risks or get tested for the virus, experts say, they also are often too embarrassed to talk with their doctors about it.

Even healthcare providers struggle with the HIV conversation when it comes to their older patients.

“Physicians are less likely to ask their patients who are older about getting tested for HIV,” Dr. Derber says. “And older patients are less likely to volunteer information about sex and behaviors that put them at risk.”

But it’s an important conversation to have, Dr. Derber says, because there are challenges to HIV and AIDS care in the 50-and-up age group.

Older patients may not remember to take their medications every day, Dr. Derber says, while other seniors may suffer from depression or feelings of isolation due to their diagnosis.

There is also a balancing act between the nuances of aging and the side effects of HIV medications. Practitioners have to be more in tune to patients living with HIV and other common chronic illnesses, like diabetes and heart disease.

Mr. Bailey knows that all too well. The Portsmouth resident has been living with HIV at undetectable levels since 2007, thanks to the care he receives at EVMS and the support he has through the resource center.

Most days, he says, his Type 2 diabetes is harder to manage than his HIV, and overall he is in excellent health. Still, dementia runs in his family, and he worries about cognitive impairment — from age, from dementia, from the known side effects of HIV medication.

“When I don’t feel good, I have to stop and ask myself why,” Mr. Bailey says. “Is this just a bad day? Is it my getting older? Is it my diabetes or my HIV? It’s not a cut-and-dried answer.”

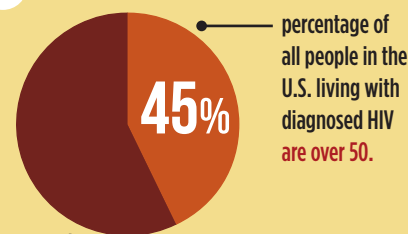
Mr. Bailey has an excellent support system — doctors who oversee his care, a partner and friends who love and encourage him and coworkers at the resource center who support him in his mission to educate others.

This much is clear to Mr. Bailey: He isn’t seeing much in the way of articles in his AARP magazine about how to live as a senior with HIV.

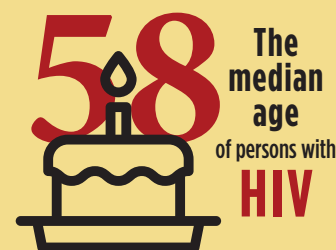
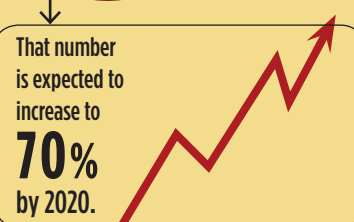
That’s why he speaks often about the issues facing seniors who have HIV and to audiences from all walks of life. He is living a very public life, even though his own parents, now in their 70s, don’t know he is HIV-positive. Mr. Bailey says he feels an obligation to further the conversations around healthcare and social challenges faced by those living with HIV in their 50s and beyond.

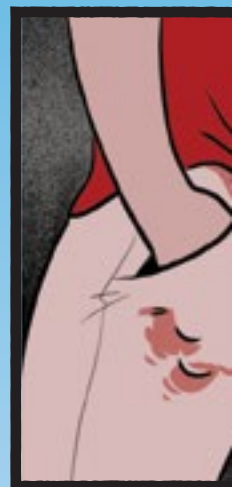
“I’m in exactly the right place and time to help bring this conversation to the forefront,” he says, “and if that means my parents find out, OK, then we will have that conversation.”

AGE IS NOT A CONDOM



That number is expected to increase to 70% by 2020.





LET'S TALK ABOUT SEX

HIV prevention and treatment come down to education — for both society and the medical community at large.

As the Director for Case-Based Learning, Lauren Mazzurco, DO, Assistant Professor of Internal Medicine who works with the Glennan Center for Geriatrics and Gerontology, has spent the past two years developing and integrating care of the elderly and chronic disease threads into EVMS' CareForward Curriculum.

She recently “brought to life” a virtual family case through the use of a standardized patient in the classroom with the intent of asking difficult and uncomfortable questions. In the case, students were presented with the diagnosis of HIV in a 60-year-old

patient for whom the class had not received any social history.

The idea behind the exercise is to encourage students to consider the patient as a person with his or her own story, Dr. Mazzurco says, and to use that story to help guide the meaningful development of management plans for care.

Social circumstances and influences. Support systems. Culture. Risk factors. Transportation. Finances. These are all important pieces of the patient puzzle, she says.

“And it’s not just things that are unique to HIV or to chronic illnesses,” Dr. Mazzurco says. “It’s all the pieces of information that may not be at the forefront of our minds but that can be relevant to a patient’s care.”

And understanding the patient’s story and



STARTING THE CONVERSATION

! Seniors who have been sexually active, especially with multiple partners, should be concerned about possible infection with HIV. Older women, in particular, who are beginning new sexual relationships after divorce or the death of spouse should have a conversation with their primary-care provider to learn about how to avoid sexually transmitted diseases, including HIV.

THIS CONVERSATION IS EASIEST TO BRING UP AT A ROUTINE APPOINTMENT WITH THE PROVIDER OR FOR AN INCIDENTAL ACUTE PROBLEM VISIT. THE CONVERSATION MIGHT BEGIN WITH A QUESTION TO THE PROVIDER, SUCH AS, "IS THERE ANYTHING I SHOULD BE CONCERNED ABOUT WHEN I HAVE A RELATIONSHIP WITH A NEW PARTNER?"

experience ultimately lead to better care.

"If you don't get to know your patient as a person, then you are limited in how you can help him because you are making decisions with limited information," she says. "We want our students to become healthcare providers who understand true patient-centered care and have that ingrained in them from the very beginning of their careers."

Patient-centered care is the kind Amanda receives from her EVMS doctor. Today, her physician is one of only two people she talks to about her diagnosis and treatment. The fear of people passing judgment about her HIV status still keeps her silent on the topic, especially at Monday's bridge club.

"I just told my daughter this past spring, and that's only because she was helping to get my prescriptions filled," Amanda says. "I might get to a place where I can tell others without feeling so self-conscious, but I'm not there yet." □

Providers are taught to ask questions about sexual activity. By informing the provider that you are now "seeing other people" the conversation can be launched. For seniors uncomfortable with asking providers questions about sexually transmitted diseases, it might be easiest to ask the provider if you "can speak in confidence about a concern I have."

ONCE THE ICE IS BROKEN, IT WILL BE MUCH EASIER TO OPEN UP ABOUT YOUR CONCERNS AND TO ASK QUESTIONS.

Robert Palmer, MD, MPH, the John Franklin Chair in Geriatrics; Professor of Internal Medicine; and Director, Glennan Center for Geriatrics and Gerontology at EVMS

Alexandra Leader, MD, MPH, Assistant Professor of Pediatrics and Director of Global Health, led a team of students, faculty and volunteers on a service trip to Chiapas, Mexico, in March. They worked with local physicians and treated patients at rural hospitals and clinics. They also were able to donate 12 bags of medical supplies gathered from Hampton Roads medical offices.



A mission of service

EVMS faculty, staff and students travel abroad in pursuit of health equity for all

Kenya, Costa Rica, Mexico and the Dominican Republic — these are just four of the remote places EVMS students, staff and faculty have spent time over the past year working with physicians and patients. Their service is cultivated through sustainable partnerships with local medical teams, Ministries of Health and non-governmental organizations. While trips may last from a few days to a few months, they have a lasting impact because they are built on longitudinal partnerships and integrated into sustainable initiatives that are mutually respectful and beneficial.



Eleven MD students traveled to Costa Rica in June to donate medical supplies and participate in global health outreach projects. They rotated in hospitals, took medical Spanish classes, gave lectures and instructed a suture lab.



Ashley Serrette, MD, Pediatrics resident, gave a health education talk at Evertone School in Ngong, Kenya, in March during a global-health elective rotation there.



EVMS Summer Scholars spent a week in March working with the Ministry of Health in the Dominican Republic. Bryan Cochran, MD Class of 2021, learned neonatal resuscitation techniques on low-fidelity simulators as part of a regional neonatal-mortality initiative.



Erin Madison, MD Class of 2021, fits a patient for glasses after performing an eye exam. More than 100 pairs of prescription glasses were provided to patients during the students' visit to the clinic in Chiapas, Mexico.



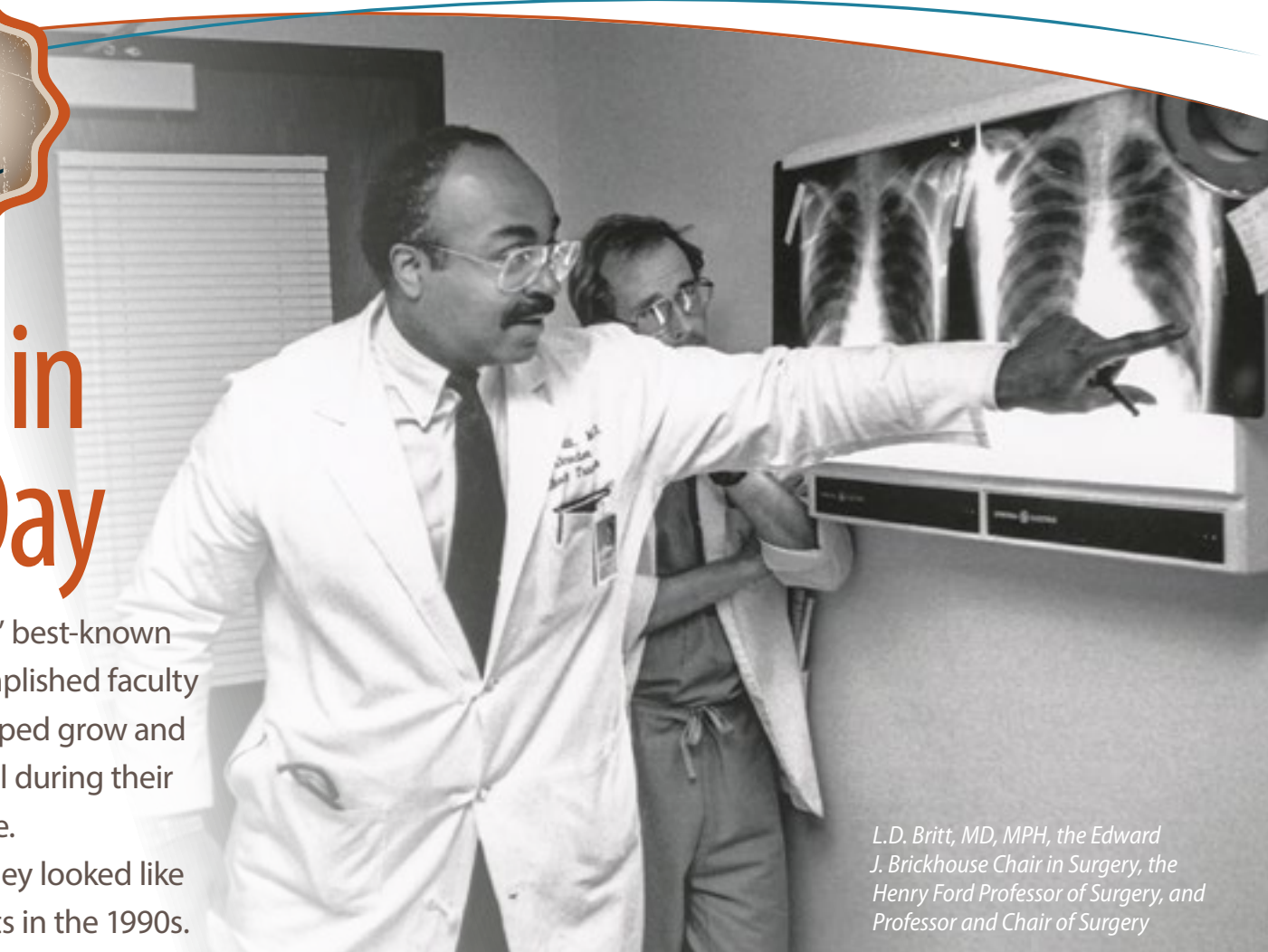
A group of medical students traveled to Genevieve, Haiti, in December 2017. Here, Sasha Alexander Varzari, MD Class of 2020, performed a foot exam during a health clinic in a local church. In all they saw more than 250 patients during their trip.



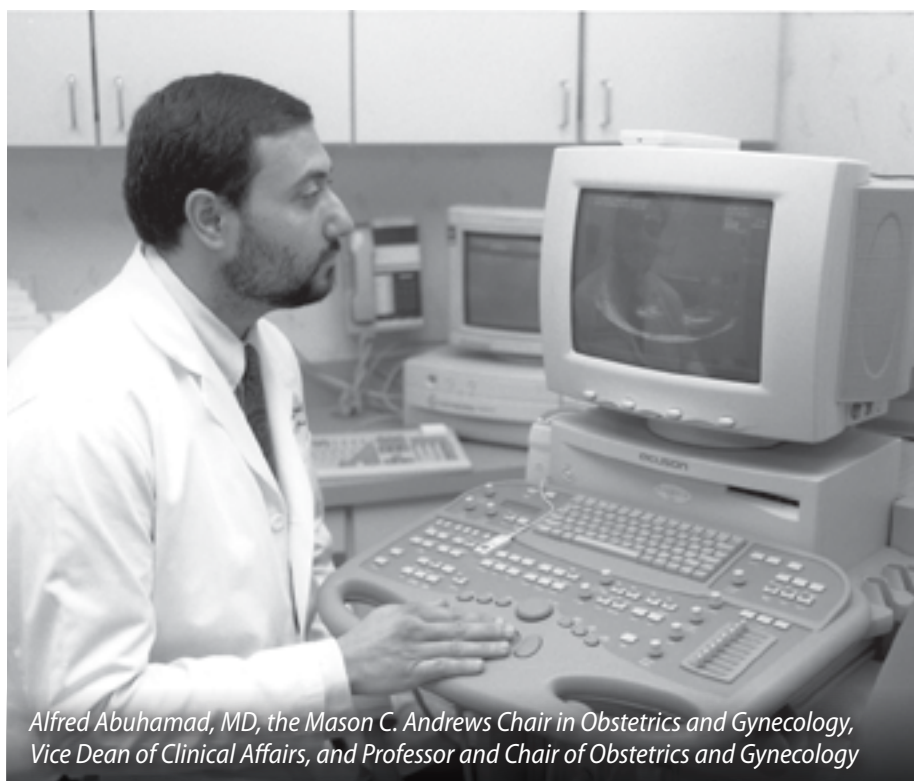
Back in the Day

Three of EVMS' best-known and most accomplished faculty leaders have helped grow and shape the school during their long history here.

Here's what they looked like to EVMS students in the 1990s.



L.D. Britt, MD, MPH, the Edward J. Brickhouse Chair in Surgery, the Henry Ford Professor of Surgery, and Professor and Chair of Surgery



Alfred Abuhamad, MD, the Mason C. Andrews Chair in Obstetrics and Gynecology, Vice Dean of Clinical Affairs, and Professor and Chair of Obstetrics and Gynecology



Julie Kerry, PhD, the EVMS Foundation Distinguished Professor in Biomedical Sciences and Professor and Chair of Microbiology and Molecular Cell Biology



Sadhana Jackson, MD (MD '07)

Scientist studies the brain at NIH after learning heart at EVMS

When Sadhana Jackson, MD (MD '07), was a student at EVMS, she was able to interact with doctors from a variety of specialties. And she noticed something special about the pediatricians: They seemed to be the happiest physicians.

"I thought, I want to be one of the happiest physicians, too," she says.

Dr. Jackson also knew she wanted to contribute to cancer research after two of her family members were affected by the disease. While completing a pediatric hematology/oncology fellowship at St. Jude's Children Research Hospital, she developed an interest in children with brain tumors. In 2015, that interest led her to the National Cancer Institute within the National Institutes of Health.

As a clinical investigator with one of the world's top medical-research centers, Dr. Jackson works with patients and directs lab research on brain cancer that examines the blood-brain barrier.

The barrier is a collection of cells that prevents toxins from entering the brain. But it also can stop effective chemotherapy agents from getting through to brain tumors. While some researchers work on manipulating these chemotherapy agents to reach the tumor cells, Dr. Jackson studies how to temporarily decrease the strength of the blood-brain barrier to improve drug delivery.

"I want to tell the brain what to do while others want to tell the drug what to do," Dr. Jackson says, "which is fine. Either way, we need to figure out the answer. If the chemotherapy can't get to where we want it to go, it becomes dead in the water. We need to improve the delivery so that we can improve survival."

Dr. Jackson attributes her heightened compassion to the "great pediatric advisers" she had at EVMS. "They loved teaching, they loved their patients, and they loved solving medical issues. I felt like that was what I wanted to become."

Outside the lab, Dr. Jackson likes to play board games with her children — Life and Monopoly are two favorites. As a family, they go on nature walks. They also dress up and act out books. Her hope, she says, is that her children can see her research pay off someday, and she wants them to recognize the compassion she has for patients and their families.

She attributes her heightened compassion to the "great pediatric advisers" she had at EVMS. "They loved teaching, they loved their patients, and they loved solving medical issues," Dr. Jackson says. "I felt like that was what I wanted to become." □



For more alumni profiles, visit, evms.edu/digitalmagazine.



Couple finds happy beginning at the Jones Institute

Newlyweds Eric and Emily Hunley of Portsmouth were on their way to happily ever after. They held good jobs, had a beautiful wedding, bought their first house.

“Everything was easy for us early in our relationship,” Mr. Hunley says. “So the natural progression was OK, let’s have a baby. And we thought that would go just as easily.”

It didn’t.

In summer 2015, they miscarried. Months of infertility followed.

“We started going to every specialist in town,” Ms. Hunley says, “and they all kept saying nothing was wrong. They said wait a year. It will happen when it happens. But it just wasn’t happening, and I had a gut feeling something wasn’t right. We were so frustrated going from doctor to

doctor. We felt like we couldn’t catch a break.”

Disheartened, she says, “We started thinking, what if we can’t have children?”

In fall 2016, they brought that question to the EVMS Jones Institute for Reproductive Medicine. “Even my original OB-GYN doctor said that if you really want to get serious about treatment, that’s where you need to go,” she says.

From their first appointment, they were comfortable. “I thought, I’m finally with a doctor who knew what was going on,” Ms. Hunley says.

That doctor was Silvina Bocca,

MD, PhD, Professor of Obstetrics and Gynecology and an infertility specialist.

In spring 2018, the Hunleys brought their twin boys home from the hospital.

“This is what the Jones Institute does,” Mr. Hunley says. “They’re like the Michael Jordan of in vitro fertilization. They are, for sure, the pros at this.”

For other couples struggling with infertility, Ms. Hunley says it’s important to find a balance between being hopeful and positive and being realistic. “And,” her husband says, “trust the Jones Institute.”

The couple continued with EVMS experts for their prenatal care, Ms. Hunley says, “so we’ve been with them the whole way. I don’t know what we’ll do without them now.” □



View video My Stories at
evms.edu/digitalmagazine.

FISHING FOR A CURE

One of the most colorful events held by the Chesapeake Bay Wine Classic Foundation is WINE, WOMEN AND FISHING, which benefits breast cancer research at EVMS.

The annual billfish tournament brings together women of all levels of fishing expertise and includes a Crazy Crew contest and festive Dock Party.

Tournament chair Linda Church works tirelessly to raise funds to find a cure in memory of her best friend, who lost her battle with breast cancer in 2006.

As a result, the foundation has donated more than \$675,000

raised by WINE, WOMEN AND FISHING to the EVMS Leroy T. Canoles Jr. Cancer Research Center and recently established the Chesapeake Bay Wine Classic Foundation Endowment, which will continue to fund breast cancer research for years to come.

Thank you, Chesapeake Bay Wine Classic Foundation, for your generous spirit and your dedication to breast cancer research at EVMS.



To join this organization and countless others in support of EVMS, please contact EVMS Development at 757.965.8500 or visit evms.edu/giving.



Chesapeake Bay
Wine Classic Foundation

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

ALUMNI WEEKEND 2018

*Celebrating the Classes of
1978, 1983, 1988, 1993, 1998,
2003, 2008 & 2013*

October 19–20, 2018

**Visit evms.edu/alumni
for event details!**

EVMS

ALUMNI RELATIONS

