Bodies of Knowledge
6 STUDENTS EXPLORE LIFE THROUGH DEATH

- A CASE study
- Brunson’s BREAKTHROUGH
- Keeton’s ‘BITTERSWEET DECISION’
Second-year medical student Kendra Robinson Taylor, foreground, snaps a mustache selfie of herself to the amusement of her mustachioed classmate Ashley Villarreal, background. The two were observing Movember, an event held in November, National Prostate Cancer Awareness Month. At UMMC, first- and second-year medical students raise awareness of the disease by participating in “no-shave November,” or “Movember.” Mississippi men suffer some of the highest rates of prostate cancer in the country.
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On the cover: Gross Anatomy, one of the most exacting courses in medical school, brought these six first-year students closer together through four months of dissection, memorization and mutual commiseration. The students who worked at the lab's Table 25 are, clockwise, from left, Cathy Chen, Rachel Sharp, Brent Necaise, Colton Lee, Kate Garner and Kim Zachow.
6 students explore life through death

by Gary Pettus

Most of the students at Table 25 encountered their first human heart about a month into the course. They are, clockwise from left, Kate Garner, Rachel Sharp, Cathy Chen, Brent Necaise, Kim Zachow, and Colton Lee.
LET’S START WITH THE DREAMS.
In one of hers, Rachel Sharp sees her brother getting hurt playing football. She can see through him, to the damaged artery inside. She’s seen one like it before, a real one, inside the body of a man whose name she doesn’t know.

There’s another one: She and Colton Lee and Kate Garner are in Walmart when they spot an elderly man; he has symptoms of diabetes mellitus, a disease that attacks the kidneys. They’ve seen something like this, too, in the body of the man whose name they don’t know: traces of renal disease.

Dreams for Kate had been rare – until medical school. Now, she dreams almost every night.

For about 16 weeks, Rachel, Kate and Colton work closely with three other students: Cathy Chen, Brent Necaise and Kim Zachow. These are the first-year medical students at Table 25.

“The table is small and the work is hard,” says Cathy Chen. “If you don’t get along and work together, it’d probably be miserable.” These students don’t have that problem.

They even allow me to shadow them throughout the life-changing experience, to get a peek inside their exclusive club: Gross Anatomy.

So I dream, too. The outsider who only came to observe, who swore he wouldn’t get too close. But, eyes shut, in bed, I see human bones and distorted faces in the dark.

The dreams begin not long after The Talk, which comes on Day One: Gross Anatomy is the day medical school starts, says Dr. Allan Sinning, director of the course and professor of neuroscience and anatomical sciences.

During their essential rite of passage, students learn the arteries. They learn signs of disease. They don’t learn the names of the men and women on the tables, but discover some of their secrets.

They see things most people will never see, or want to – on the tables and in their dreams.

It is one of Rachel Sharp’s worst fears: She’ll recognize “the person under the sheet.”

Playing with a Dr. Barbie as a kid growing up in Sturgis did not prepare her for medical school. Taking UMMC’s six-week pre-matriculation program in the summer did.

She was trying to get emotionally adjusted, she says, before the grade counted in the fall.

She saw her first cadavers that summer. “Seeing dirt under their fingernails,” she says, “that’s what gets me.”

This fall, prepping for the practical exam, she enters the lab one weekend to study all the cadavers. She finds a woman with bright, pink fingernails. The journal by the table says she died of senile dementia.

Rachel knows families find it hard to care for relatives with dementia. Many are put in nursing homes. “It’s a very sad disease.”

Rachel thinks about this woman, picturing a daughter or granddaughter who visited her to paint her fingernails on one of the last days of life.

“This lady must have been loved,” Rachel thinks. Remembering this, always, is how she copes.

There is a debate over the use of cadavers for dissection.

After all, there are medical scans and imaging, such as MRIs; simulated dissection via computer programs; specialized mannequins. Couldn’t students learn Gross Anatomy just as well with those tools?

At UMMC, the belief is that a student should explore the geography of the human body through sight and touch, as a doctor would examine his or her patient. This journey cannot be duplicated.

The difference between studying pristine textbook illustrations and holding a human heart in your hand is the difference between watching a baseball game on TV and playing catcher in one.

On the first day of dissection, instructor Dr. Ryan Darling explains it to me. “When they touch this,” he says, pointing to a cadaver’s chest, “we like them to touch this,” he says, tapping his own torso.

“We want them to realize that this tissue is this tissue,” he says, meaning the cadaver’s and the students’.

“Anatomy is all about relationships: functional, relationships, spatial relationships. All you’re doing is relating,” he tells the students.

Later, it occurs to me that, as they take apart the body with their hands, they’re putting it back together in their heads. This is how they learn.

I turn to Jessica Jenkins of Jackson, a student at Table 16 who has taken a Gross Anatomy course before. She agrees that hands-on dissection is the best way to learn.

“As it gets tougher,” she says, “you learn more about yourself.”

I learn this about myself: I will never get used to the smell.

Decades after medical school, doctors still talk about it: formalin and flesh. It irritates the nose and can burn the
MEET THE STUDENTS OF TABLE 25

1. CATHY CHEN, 23, of Oxford is fascinated with the intricate anatomy of the hand. A Barksdale Scholar, she is committed to helping those who are overlooked and underserved. Before entering medical school, she majored in chemical and biological engineering at Princeton University. Taking Gross Anatomy, she says, is “really humbling. Can you believe that everything just connects and there [was] a living, functional person? There’s so much that could go wrong but when we open him up there it all is … It makes life seem like a miracle.” Her family includes a younger sister, a father who is the chief technology officer for a mortgage technology company and her two siblings, a brother and a sister, who works at a Catholic priest. "I wish I could say that I watched Patch Adams when I was 7 and the rest was history," he says. “My choice to pursue medicine is the summation of my life. I was raised on a farm and have doctor animals for 20 years, my parents taught me to be my brother’s keeper, and I dealt with an autoimmune disorder that nearly wrecked my vision as an undergraduate student. Any one of these reasons is enough to want to practice medicine, but they are only three of a thousand small influences.”

2. KATE GARNER, 25, of Natchez has a bachelor’s in radiologic sciences and worked as an x-ray technician at UMMC before medical school. She and her two siblings, a brother and sister (a nurse), are first-generation college students. Along with Colton Lee, she provides much of the comic relief at Table 25. “It’s always important to remember that the cadaver was a person and many people loved them and we’re respectful of that,” she says. “But I also have a wonderful lab group and we’ve become such good friends. I don’t think I could have made it through this experience without them. We pretty much know everything about each other now and we talk about anything and everything while dissecting.” She tries not to come across as soft-hearted, but inside her lab coat pocket she keeps a note Colton sent her to keep up her spirits.

3. COLTON LEE, 22, of Poplarville says his parents sacrificed a lot for his education. The brother of a physician’s assistant, he cannot imagine being anything but a doctor. “I wish I could say that I watched Patch Adams when I was 7 and the rest was history,” he says. “My choice to pursue medicine is the summation of my life. I was raised on a farm and have doctor animals for 20 years, my parents taught me to be my brother’s keeper, and I dealt with an autoimmune disorder that nearly wrecked my vision as an undergraduate student. Any one of these reasons is enough to want to practice medicine, but they are only three of a thousand small influences.”

4. BRENT NECAUSE, 34, of the Kiln in Hancock County is the “old man” of Table 25. Before medical school, he held management jobs in the banking and restaurant businesses. He earned a Bachelor’s of Philosophy, graduated from seminary and studied in Belgium on a DeRance Scholarship at the Katholieke Universiteit Leuven. He was almost a Catholic priest. While working on a bachelor’s in biology, one of his professors, Jill Arnold, sparked his fascination with bacteria and infection. Gross Anatomy, he says, “is extremely stressful, and I know that I can depend on my teammates for help studying, with the dissection itself, or if I just need a laugh or a smile.”

5. RACHEL SHARP, 22, of Sturges begged her parents for a Dr. Barbie and a “real” stethoscope when she was a kid. As she matured, she worked concessions for the Winston County Youth Association, as an instructor for the Forest High School Color Guard, as assistant/receptionist in Starkville at the Research and Curriculum Unit and as a server at a Tutti Frutti Frozen Yogurt.

6. KIM ZACHOW, 24, of Jackson, is the daughter of Dr. Steven Zachow, a radiation oncologist. She was earning her B.S. in physics as a junior at Birmingham Southern College when she decided on medicine as a career. “I loved the combination of problem-solving and getting to interact with people (a component decidedly missing from upper level theoretical physics, which I was terrible at anyway),” she says. Reflecting on her experience in Gross Anatomy, she says, “Someone gave up the control they have over their bodies after death so you could have an opportunity to learn. That part stays with you forever.”

7. GARY PETTUS, 59, of Passacagoula never tried to get into medical school, and it’s just as well for everyone concerned. He graduated from the University of Southern Mississippi. He worked for nearly 37 years combined as a reporter and/or photographer for The Clarion-Ledger and The Hattiesburg American, after working briefly for The Mississippi Press and Gautier Independent. In 2012, he joined UMMC. In writing this article, his original intent was to describe Gross Anatomy through the eyes of these students, but, because of their kindness, became part of the experience as well. There are many sights he’ll never forget, but, most of all, he’ll remember Brent, Cathy, Colton, Kate, Kim and Rachel.
back of the throat. A chemical reek mixed with the odor of wet dog, it can’t be washed from your memory.

If the Dementors from Harry Potter have a smell, it should be this. An ex-newspaper reporter, I’ve seen one or two bodies of people who died violently. Still, for me to endure the sight and smell of a cadaver for the first time requires serious negotiations with my own organs.

I tell my brain that being dissected in the lab is more useful than decaying in the grave. I tell my stomach and nose: “Man up.”

Across the lab, students are pushing handles on the metallic bins. Lids open and the cadavers rise. I look around at the students, many of whom are seeing extra-funeral death for the first time. Some, as they remove the white sheets from the bodies, look as if they’re about to open Christmas presents.

Others seem to be praying with their eyes open. On her first time in Gross Anatomy, Kim Zachow was hoping she wouldn’t faint. Even at funerals, she avoids looking at the bodies – mostly because she wants to remember the people when they were alive.

Kim Zachow took her first course in Gross Anatomy at Mississippi College, where she had pursued her Master’s in Biological Medical Sciences a year earlier. That was her first close look at a dead body. She endured, but the student next to her almost passed out. And the lab group at MC chose Kim to make the first cut.

In the lab at UMMC, as she was at MC, she is mindful that the body has a family, and that all the people lying on the tables had made the decision to give their bodies to science. She remembers this as she makes the cut.

“It means a lot,” she says. “It’s not something I’m sure I could do.”

There are six to each table. It’s tricky, trying to introduce yourself to six people who are dissecting a body. They’re pretty much focused on that. Asking them to tolerate me throughout the long course didn’t seem fair. I don’t enter the lab with a good strategy for winning acceptance – unless you call loitering by the nearest exit a strategy.

Anyway, it works. Mercifully, the students nearest the door adopt me, and over time I come to feel less like a stray cat and more like an honorary member of their team: Table 25.

Still, the sights in the lab, which is newly-renovated and brightly lit, can overwhelm me if I let down my guard. At times, I suspect, it’s the same for them. They cope by quoting lines from Mean Girls or from a video they’ve shared. They’re particularly fond of catchword from a Wife Swap YouTube clip.

“This is so dark-sided,” someone will say. They laugh, and go back to work.

They’re tough alright. But not invulnerable.

It was difficult for Cathy Chen to look at him at first – a pale-yellow figure that seems as rigid as marble, except for his white hair.

One of the students at Table 25, she is 23. The man on her table was 91. Cathy went to Princeton. He carried mail for a living.
This body, separated from the spirit, makes her “uncomfortable.”

“I guess it’s just because I feel so connected with, and alive in, my body right now,” she says later. “I’m sure he, too, felt very connected to his body when he was alive.”

First, they dissect his back. Place the cadaver in prone position, make the skin incision, reflect the skin off the back, Dr. Adel Maklad had instructed them.

“The whole idea is to divide the skin into ... convenient flaps,” Maklad told the class.

Everything will be disconnected now.

Like Cathy, most of the 150 or so students are in their 20s, their eyes alert behind their safety eyeglasses and above a smattering of surgical masks. Most of the 30 or so men and women they work on died much older.

That the students might identify with their “first patients” seems unlikely to me, and, in fact, unwise. But sometimes, they can’t help it: Weeks into the course there will be a moment when Cathy backs away from the body and gasps. Fluids had dripped from the area around the cadaver’s ACL, where signs of osteoporosis lurk.

In college, Cathy injured her knee in a pickup basketball game. Now, when she examines the knee of the man on the table, it’s almost as if she’s looking at her own.

“Always think of an onion – the different layers,” Darling says, standing beside some students working on the upper back.

Later, when the arteries, veins and muscles of the arm are laid open, I will think, not of an onion, but of exposed wiring.

“Follow the striations of the muscle,” Darling continues. “You see how thick that white line is – that’s what you want to look for when you start looking for the nerves.”

He shows them how to stabilize their scissors, pressing his forefinger against the bottom of the blades, where they intersect.

One student’s face colors slightly. She says she once had trouble dissecting a pig. Darling tells her to take a break.

She says, “Yeah, I don’t want to be that student. All that paperwork.”

No one can know for sure how they’ll react the first time.

“They ask you if you’ll be OK with this,” Colton Lee says. “You CAN’T say no.”

It’s like driving a car for the first time, he says. In Gross Anatomy, the keys are forceps, scissors and scalpels.

Colton Lee’s original Day One arrived during a pre-med course at William Carey University, where he dissected his first cadaver. “An intense moment of self-doubt.”

As with the other students at Table 25, the inherent grossness of Gross Anatomy is not the problem for him. In fact, one day he shows me his “favorite” muscle, which controls the wrist.
“Because it’s square,” he explains his preference to Dr. Marianne Conway. “I’m weird.”

Brought up in Poplarville, he worked for two years in Central Sterile/Surgery in a Hattiesburg hospital. He had held surgical instruments before. This is different.

“This was someone’s dad, brother, son or friend,” he says. “He lived and laughed exactly like I do, and now he doesn’t do any of those things and I’m cutting him open.”

Each table is equipped with a journal. On the first page is a brief bio with no name. That’s how the students at Table 25 know they’re dissecting a former employee of the U.S. Postal Service.

When Colton is dissecting, he can imagine himself as a kid, waiting for the man who brings the mail.

The cadaver journals serve another purpose.

At each table, the students are divided into two sub-groups of three. They make alternate appearances in the lab on dissection days. For the most part, the sub-groups are together in lab only for the dissection “hand-off” and for quizzes.

The discoveries and observations one sub-group records in the journals keep the other up to speed: scars, signs of a mastectomy, pacemaker, injection ports, tattoos. They must also record what they accidentally destroy.

At one point, the students at Table 25 note this: sutures in their cadaver’s right shoulder — evidence of surgery.

But, like some other students, they record extra-curricular observations as well: “Dr. Darling’s ponytail is better than mine.” The handwriting is Kate’s.

Before the first cut at Table 25, Kate Garner’s nerves tear into her.

She had enjoyed her work as an X-ray technician, but she wanted to do more. That’s why she’s standing here, hovering over her first cadaver. Right here, medical school becomes real.
The man’s fingernails and hair are also real; they remind her that this is a person. For the most part, the face will stay covered under a blue cloth until it’s dissected – out of respect, and to keep it from drying out.

But, on the first day, it’s Kate who lifts the blue cloth to take a peek. More reality.

Over the coming weeks, there will be days when she’d rather do anything than dissect. But she’s always grateful to be here. Her friends are glad she’s here too.

Keep a professional attitude toward the cadavers and each other. Work as a team. Take no photos in the lab.

“You would not take a picture of your patient without their permission and put it on Facebook,” Sinning tells the students.

These are the rules.

Students are graded on written tests, practical exams in the lab and according to the quality of their dissections. Dissecting is a strong point for the students at Table 25.

Under questioning from their instructors on quiz days, they encourage each other. They exchange high-fives.

Brent Necaise has probably seen more of life than the others at Table 25. He’s the oldest member of the team by nine years. But he can’t imagine medical school without them.

At 34, he has been, among other things, a bank manager and a near-priest.

About a year ago, Necaise started working on a biology degree; after shadowing a doctor, he decided he wanted to be one.

In preparing for the ministry, he had encountered the faces of death and grief, but, as medical school approached, he grew anxious.

He remembered what it was like to work in the bank, dealing with all that cash, treating it respectfully and responsibly. But there were times, as he struggled to pay his bills, when he made himself forget the money was real.

This technique of disassociation, he believes, will serve him well as he dissects a human being. He tells himself: The body is not the person.

There is a heart in my hand. This is a first for me.

...I do it to be polite, and to prove to myself that I can.

There is a heart in my hand. This is a first for me.

I’m holding it at the invitation of Kim Zachow; I do it to be polite, and to prove to myself that I can.

It’s a month into the course. The students have worked through the vertebral canal, spinal cord, various nerves and vessels, the pectoral region, flexor forearm, palm of the hand, joints of the upper limb and more.

At one point, Dr. Yue Lu gives me an inventory: 140 nerves, 120 blood vessels, 210 muscles – 80 in the head and neck alone.

Today, it’s the lungs and heart. Kim, Cathy and Brent use an electric saw with a curved blade about two inches wide. Slicing through the ribs and sternum,
Before I actually removed the sheet, I was hoping he would be old.

As odd as it sounds, I couldn’t accept the idea of encountering a cadaver that appeared too young. Maybe it would be too hard to separate myself from the tasks ahead, or I hoped that he had lived long enough to experience everything life had to offer – good or bad.

Then I was hoping I wouldn’t pass out from either the aroma or the sights.

Prior to lab, I had not seen a body. Even at a funeral I avoided getting too close. I was scared for different reasons. I didn’t want to start crying, in spite of the fact I never actually knew the man, and I didn’t know how my body would react.

I didn’t want to see someone that looked familiar. Not necessarily someone I knew, but someone I could imagine myself being friends with in church or a teacher from my favorite class in high school.

That type of familiarity can be challenging to get past considering what had to be done to complete the work for Gross Anatomy.

Once the sheet was removed, I thought, “This guy looks like he’s sleeping in spite of the pallor and coldness of his skin.”

He looked like he was a stern man; maybe he had a soft spot for those he cared for, but did not deviate from the strong line of his lips or the downward turn of his eyebrows.

For the first cut, I wanted to be as delicate as possible. I kept thinking how I didn’t want to hurt him, in spite of the fact he couldn’t feel anything.

On my first observation, I immediately noticed his tattoos. They were both names. I felt that seeing those tattoos made him a “softie,” because I always thought those bold enough to put someone’s name on their body takes so much dedication.

When my group had to remove those areas for the sake of the dissection, it made me feel as if we were violating something sacred.

He had people in his life that literally went everywhere he went. For those names to be so quickly removed with a scalpel blade, I felt that we had stripped him of his earthly connections.

This act solidified how we were/are turning this man into someone unrecognizable.

It was unusual, purposely cutting someone so deeply, even though it was for the sake of knowledge.

Separating myself from the person only came once distinguishing characteristics were removed. Things like the tattoos, bruises, hair and skin are gone and what is left is precisely what I see in my Gross Anatomy book and atlas.

I can now think of the cadaver as a 3-D study aid and no longer as an individual. I can hold the muscles, arteries and nerves without seeing the man with the names tattooed on his body.

Once I leave the lab for the day I begin to focus less on the person and more about learning about what I had seen. The lists for learning the anatomy get so long I feel less of the human connection. It is my brain’s way of acknowledging that he donated his body for the sake of students’ learning.

The thing that never leaves me is the smell. That distinct smell leaves its mark not only on the scrubs and lab coat. I have to be meticulous in terms of cleaning, otherwise it can get stuck in everything from my car seats to my hair. When I visit my mother, it doesn’t take long before she turns her nose up while stating, “You’ve been in that lab!”

My experience in Gross Anatomy serves as a reminder of how fleeting life can be. I thought back to how I was talking to people about wanting to go to medical school while I was in junior high.

It’s hard to believe that was over 10 years ago and I’m quickly approaching the halfway mark of my first semester of medical school.
A DONOR’S STORY: THE REST GOES TO HEAVEN

Over the course of Gross Anatomy, students uncover clues to how their donors died. It’s harder to know how they lived. Even harder to know what they believed, and what motivated them to make this gift of themselves.

Here’s the story of two – Mary and Jack Crouch, a married couple from Poplarville.

Mary and Jack Crouch in the early 1970s

She was born on June 14 – Flag Day. “I have my very own birthday song,” she said. “Stars and Stripes Forever.”

Shortly after World War II, her family moved to Cotton Valley, a town in north Louisiana adorned with a creek and a spirited young fellow named Jack.

“The creek was just past where my family lived,” she said. “The Crouch family lived up the hill a little way. I always said I was from the right side of the creek and Jack was from the wrong side.

“When he was 16 he said he got ‘tired of daddy telling me what to do,’ so he went to New Orleans and enlisted in the Marines. He survived some of Korea’s bloodiest battles.

“The contrariest person in the world is a man who is a husband who is a Marine. I will have so many stars in my crown, I won’t be able to hold my head up.”

But before Mary and Jack got together for good, she met another man. They married, moved away and had a son. Her first husband died in 1959, killed in a traffic accident one night on the way to work.

After leaving the Marine Corps, Jack held a couple of different jobs, including motorcycle police officer in Shreveport, working security details for Elvis Presley, who was getting his start at the Louisiana Hayride.

He laid pipe after that, working all over the South. He got married and became the father of three before his divorce.

For her part, Mary had moved back to Cotton Valley and worked as a clerk in a family grocery store. One day a young pipe-liner, who came home to visit his parents, walked into the store to buy cigarettes.


Throughout most of their marriage, Jack kept his memories of the war to himself, sucking up the misery with the cigarette smoke.

“The doctors told him that cigarettes and welding were about 50-50 the cause of his COPD,” she said.

Later, he served as a captain on Halliburton’s service ships until 1983, when the oil industry tanked and he was laid off. He started his own engraving business.

Mary, in the meantime, had worked as a bookkeeper, co-owner of a floral shop and as a data processing clerk.

In New Orleans, where Halliburton had moved them, Jack was elected as the Grand Secretary of the Masonic fraternity for the state of Louisiana in 1985, she said; Mary worked as data processing clerk and as office manager.

“He tried for 30 years to get me to call him ‘boss,’” she said, “and he finally succeeded.”

They retired on Sept. 30, 1999 and moved to Poplarville, where their son and his family lived.

A year or two later, they made their decision to become donors.

“Jack had emphysema; he would not get any better,” she said.

She is 82, and expects to live well into her 90s.

“God blessed me with such good health, but I’m afraid one day he’ll say, ‘OK, Mary, I’ve let you go long enough. Here it is.’”

There were no religious qualms about their decision to become donors; she said, “It didn’t come up. We are Baptist. What would be the problem?

“I have everything God gave me except a few teeth, and I still have most of those. So I figure, somewhere down the line, someone can use me.” So did Jack.

“The rest of me is going to heaven anyway,” she said.

They ended up with nine grandchildren and two great-granddaughters: Megan, who’s almost 7 now, and Karen, 9, who call them “Nana” and “Poppy.”

“They love that Poppy,” Mary Crouch said. “He would take time with them, even when he was sick.

“It was a very interesting life for the two of us. We traveled to Canada and, I would venture to say, half the states, including Alaska and Hawaii.

“He went into the hospital a couple of weeks after we took our Megan and Karen to the fair. We had no idea how sick he was. He didn’t want us to worry – that’s a husband, man and Marine.

“I said, ‘Honey, I ask you how you feel – that’s a husband, man and Marine. I said, ‘Honey, I ask you how you feel’

“‘I know he’s in heaven; we just can’t see him.’”

Mary told her they’d pretend he had gone to Hawaii.

“Karen said, ‘No, we’ll pretend he has re-enlisted in the Marines.’”

The memorial service was on Dec. 7, 2013, Pearl Harbor Day. There was a Masonic graveside service and Marine honor guard at First Baptist Church in Poplarville.

“Karen gets up, marches to the piano and plays How Great Thou Art,” Mary Crouch said.

“Then she comes back, sits down and says, ‘Nana, I saw a Marine crying.’”

Mary and Jack Crouch in early 1970s

Mary and Jack Crouch in early 2003
HOW TO BECOME AN ANATOMICAL DONOR

Complete authorization forms, which can be requested by contacting Dr. Allan Sinning, asinning@umc.edu, or Dr. Marianne Conway, mconway@umc.edu. Or write to the Director of the Anatomical Gift Program, Department of Neurobiology and Anatomical Sciences, University of Mississippi Medical Center, 2500 N. State St., Jackson, MS 39216. Or call 601-984-1649.

Sign the forms in the presence of two witnesses, which will satisfy legal requirements governing such gifts.

Inform your family, friends, physician and attorney of your decision to make sure that your wishes are met.

MORE INFORMATION:

www.umc.edu/Education/Schools/Medicine/Basic_Science/Neurobiology/Anatomical_Gift_Program.aspx

The men and women who have donated their bodies, including the man at Table 25, are memorialized in an annual Ceremony of Thanksgiving like this one, held in the UMMC Cemetery.

Dr. Allan Sinning, professor and Gross Anatomy course director, reads the names of anatomical donors to a gathering of about 500 family members, friends, faculty and students during the Medical Center’s annual Ceremony of Thanksgiving, April 23, 2014 at the UMMC Cemetery.

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Instead, I see a machine. A beautiful pump.
What’s happening to me? I wonder.

Sometimes, in class, Colton thinks, “Holy crap, I’m going to be a doctor.”

“Then someone in class says something and you think, ‘Holy crap, he’s going to be a doctor.’”

Maybe the pressures of medical school can bring out the worst in some people. But, with these six students, it seems to bring out the best.

They give each other compliments, when they aren’t giving each other hell – a friendly, teasing give-and-take, moments of normal, sane human contact that, at the least, help settle my nerves in this unsettling place.

Kate: “You can’t get a tattoo. You’re going to be a doctor, Colton.”

Colton: “I’m not going to be a naked doctor.”

October 15: It looks like a MASH unit has exploded.

From behind her mask, Kim says to me, “It’s a very peculiar day.”

Pelvis and perineum dissection day.

Dr. Andrew Notebaert is Table 25’s instructor today. He seems impervious to the sights. He could be picking flowers in the park.
But, to me the lab reminds me of a painting I’ve seen in a book, “Garden of Earthly Delights.” It is a painting of hell.

In the lab, students stand outside a room with a large sink, holding the leg quarters they’ve removed with saws.

Overheard: “Never in a million years did I think I’d be standing in line waiting to wash a cadaver leg.”

Across the lab, the jokes rarely stop. This is how the students manage.

At Table 25, where Brent, Cathy and Kim are working, I say, “You must want to be doctors really bad.”

Brent says, “That’s what we keep telling ourselves.”

It’s November now. Three months of dissecting have dehumanized the bodies. Or so it seems.

But when the blue cloth comes off at Table 25, Kim makes the first cut and winces.

“I feel the scruff of his beard,” she says.

Try to cut into that and not think about the person who grew it.

No doubt, the students will handle it, as they have everything else; but how?

Next door, at Table 14, Ian Taylor and Nicholas Boullard are discussing Mister Rogers’ Neighborhood. They’re trying to remember the name of a fantasy segment they used to watch as kids. Brent overhears them.

“The Land of Make Believe,” he calls out.

Ian and Nicholas smile. “That’s it.”

It’s heavier than it looks, about eight pounds. Kim has let me hold it in my gloved hand.
The students used a saw, scalpel, mallet and chisel to get to it. “It’s amazing,” Kim says.

At the back of the room, Jeremy Stocks is examining the one pulled from the skull at Table 7. Soundlessly, he mouths one word: “Beautiful.”

In March, the students will dissect their specimens, but, until then, each one is bagged up, preserved and stored.

Before theirs is put away, Cathy, Brent and Kim place their hands on the brain from the man at Table 25.

“Let’s say goodbye,” Kim says.

Outside the lab, life went on for the students. And death. Brent buried his grandmother before Thanksgiving.

One student was the victim of what appeared to be attempted burglary. Over the course of four months, a lot more must have happened to them that I’ll never know about.

But, inside the lab, I got to know them. To paraphrase a sports cliché, Gross Anatomy, and medical school in general, doesn’t build character, but can reveal it.

A lot of character was on display at Table 25. Many of the things I saw and heard, I’ll always remember. Certainly, I’ll never forget what Rachel said to me one day as they put away the body – a routine that requires spraying it with a solution to keep it from drying out.

“I kept thinking,” Rachel says, “don’t get it in his eyes.”

Long before this day, Colton had admitted that he feels possessive of the man on the table.

I’ve come to feel the same way. Maybe it happens the day Rachel asks me if I’d like to help.

While she scrapes away fascia in the chest cavity, I use forceps to hold the trachea out of her way. It strikes me that I’ve taken this man, in a literal and profound way, by the throat.

This man, whose good heart I had held, must have been filled with trust. And self-respect.

He must have imagined what would be done to his body after death. But he wanted to remain useful.

This was his last job on earth, and I’ve had the privilege of watching him work.

“We’re glad you’re here, Mr. Gary,” Colton says to me one day. “You’re as much a part of our group as our cadaver.”

I take this as the highest compliment.
Myrlie Evers-Williams lends name to UMMC institute pledged to health equality

Myrlie Evers-Williams, widow of slain civil rights leader Medgar Evers, helped dedicate the UMMC Myrlie Evers-Williams Institute for the Elimination of Health Disparities during a June 13 ceremony at the Jackson Medical Mall Thad Cochran Center.

The launch of the institute represents a new partnership between the University of Mississippi Medical Center and the Jackson State University College of Liberal Arts, and signifies the renaming of the Mississippi Institute for the Improvement of Geographical Minority Health Disparities, created to close the gap between those who receive proper medical care and those who don’t.

The revamped organization will focus on three main areas of concern in Mississippi: child health disparities, minority men’s health and research training — issues that resonate with Evers-Williams, who spoke to a gathering of an estimated 130 people.

“I am so honored to lend my name to this wonderful, motivational group of programs we have here that will move Mississippi from the bottom of the list to the top,” Evers-Williams said.

“If Mississippi is going to be a strong state in every way, we have to be healthy, too.”

The three areas of focus were also chosen based on their capacity to dovetail with existing programs at UMMC and JSU, said Dr. Bettina Beech, executive director of the institute and UMMC associate vice chancellor for population health.

“For instance, UMMC has the only children’s hospital in the state and deals with vulnerable children,” said Beech, referring to the Blair E. Batson Hospital for Children.

designed to address.

Evers-Williams has a “passion” for children’s health and men’s health, said Beech, who introduced Evers-Williams as “one of the foremost civil rights figures of our time.”

“The area of minority men’s health has been overlooked in this country, for the most part,” Beech said.

“Our partnership with JSU will enable groups of faculty and students to make a real impact in these areas of research.”

The institute will also collaborate with Wake Forest Baptist Medical Center’s Maya Angelou Center for Health Equity, where Beech formerly served as co-director.

Housed in the Medical Mall, the institute also plans to team up with Alcorn State University — the alma mater of Medgar and Myrlie Evers — and the Medgar and Myrlie Evers Institute in Jackson, created to continue the legacy of Medgar Evers, who was assassinated June 12, 1963 in Jackson. The dedication was held the day after the 51st anniversary of his death.

“When I came back to Mississippi a year ago, I had no intention to stay,” Evers-Williams said. “I wouldn’t have thought it was possible to embrace the state. Anything is possible.”

Naming the institute after Evers-Williams is a “historic milestone” in the growing relationship between the university and the Evers family, Beech said.

A Distinguished Scholar-in-Residence at Alcorn State, Evers-Williams will be involved in the organization named for her, said Dr. Claude Brunson, UMMC senior advisor to the vice chancellor for external affairs.

“Her international prominence will enable us to collaborate with other folks that we may not have had access to otherwise. Her name will provide us with some opportunities that we may not have had without her being an active part of its work.”
UMMC researchers tout promising Alzheimer’s treatments

A promising, new clinical trial, along with improved brain imaging and other technologies, are potential keys to discovering treatments for Alzheimer’s disease, two UMMC researchers told a conference in Jackson.

Dr. Thomas Mosley, director of the Memory Impairment Neurodegenerative Dementia (MIND) Research Center, and Dr. Junming Wang, associate professor of pathology, described these developments for about 150 attendees during the Aug. 12 round table session featuring U.S. Sen. Roger Wicker of Mississippi.

Sponsored by the Mississippi Chapter of the Alzheimer’s Association and the Greater Jackson Chamber Partnership, the assembly included remarks by Patty Dunn, the chapter’s executive director, and Mike Quayle, a Jackson business owner diagnosed with Alzheimer’s more than two years ago.

The conference also served as a kind of pep talk stressing the need for increased funding of research that may find a cure for the debilitating illness that affects more than 50,000 Mississippians like Quayle.

“It changes your outlook on life,” Quayle said. “Mentally, I’ve slowed down; physically, I’ve slowed down. I have trouble tying my shoes. Sometimes I don’t know where the heck I am.

“But don’t feel sorry for us. Some people have heart disease; some people have cancer. I have Alzheimer’s.”

A brain disease that shrinks memory and reasoning, Alzheimer’s has struck more than five million Americans, reports the Alzheimer’s Association. But, without effective courses of treatment, it threatens to afflict up to 16 million by 2050, costing the nation, in today’s dollars, $1.2 trillion.

“We can’t afford that,” said Wicker, who proposed establishing an XPRIZE type contest to find new treatments and a cure, comparing such an offer to the incentivized competition that awarded Charles Lindbergh $25,000 in 1927 for the non-stop, transatlantic flight that hatched the aviation industry.

So far, Mosley said, “everything we’ve thrown at this disease has been a bust.”

The National Institutes of Health (NIH), the largest funder of research in the world, Mosley said, spends about $450-500 million on Alzheimer’s research a year, compared to more than $4 billion for heart disease research, $6 billion for cancer research, and $3 billion for research on HIV/AIDS.

The Alzheimer’s Association is asking Congress to make Alzheimer’s a research priority at the NIH and to pass legislation guaranteeing the diagnosis and care of people with the disease.

Medical Center, Mayo Clinic establish partnership

The Medical Center, University of Mississippi, and Mayo Clinic recently established a formal partnership agreement on Sept. 30 in Rochester, Minn.

Dr. James E. Keeton, UMMC vice chancellor for health affairs and medical school dean, and Dr. Greg Gores, executive dean of research at the Mayo Clinic, signed a formal agreement. Under the pact, the two institutions will cooperate on matters of research, clinical trials and education.
Dr. Darrell Kirch, president and CEO of the Association of American Medical Colleges, speaks to the School of Medicine’s Class of 2014 during the May 22 Long Coat Ceremony.

AAMC president Kirch pays tribute to graduates’ families

Darrell Kirch, president and CEO of the Association of American Medical Colleges, addressed the School of Medicine’s Class of 2014 during the school’s Long Coat Ceremony May 22 at the Jackson Convention Center.

Kirch, who also had spoken to the class at its Short Coat Ceremony in August 2010, said, “The white coat you put on then wouldn’t have felt natural, and wouldn’t feel natural until you filled it with experience.”

Referring to the “powerful memories” the students had built during medical school, he added, “The people here created some of those memories. Someone here purchased your first Fisher-Price doctor kit. Now you’re about to become the real thing.”

A psychiatrist and neuroscientist, Kirch became AAMC president in July 2006 after serving in leadership and faculty positions at the Hershey Medical Center at Penn State University, the Medical College of Georgia and George Washington University. In 1993, he was recognized for his contributions to the National Institute of Mental Health when he received the Outstanding Service Medal of the United States Public Health Service.
UMMC’s University Heart made its public debut Sept. 4 during a celebration at the new center, which offers a complete scope of heart care under one roof and both inpatient and overnight-stay patient rooms for a wide range of cardiovascular procedures. Replacing a ribbon-cutting with the symbolic cutting of an EKG printout are, from left, Kevin Cook, chief executive officer of University Adult Hospitals and Clinics; Bill Brown, University Heart administrator for cardiovascular services; Dr. William Little, the Patrick Lehan Professor of Cardiovascular Medicine and chair of the Department of Medicine; Dr. Michael Winniford, medical director of University Heart; Dr. James Keeton, UMMC vice chancellor for health affairs; and Dr. Dan Jones, University of Mississippi chancellor.

State Rep. Phillip Gunn, back row, center, Mississippi Speaker of the House, is on hand to congratulate the Medical Center’s recipients of the 2014 Mississippi Rural Physicians Scholarships, July 10 at the Old Capitol Museum in Jackson. The M1s are, front row, from left, Kaycee Burcham of Iuka, Evan Ciarloni of Grenada, Hollie Ables of Florence, Rachel Sharp of Sturgis, Meagan Henry of Pontotoc and Robert Barnes of Coldwater. Back row, from left, are Ben Lambert of Como, Ryan Humphries of Louisville, Nicholas Bouillard of Brandon, Gunn, Brad Murray of Glen and Johnny McKenzie of Tylertown.
In his historic first speech as president of the Mississippi State Medical Association, Dr. Claude Brunson confronted the issue of health-care access – or lack of it – for many in the rural state.

Elected to serve as the association’s first African-American leader in August, he has made access one of his top priorities while helming the 4,700-member statewide organization comprised of physicians and medical students.

His commitment to bettering the quality of life for Mississippians was created during his childhood in Alabama, where he was brought up to value responsibility and education as vital tools needed in life.

But, during his journey toward a college degree, Brunson took a detour. A mere two weeks following his high school graduation, he opted to enlist in the U.S. Navy.

“It took me another two weeks to break this unforgivable news to my mother and family,” Brunson said.

Admitting he never liked sleeping in the woods, Brunson said he knew if he were to enlist it would have to be with the Navy or Air Force. After signing up as a Hospital Corpsman, he was assigned to the Fleet Marine Force.

“Spent the next three-and-a-half years sleeping in the woods,” he said.

Four years of service went by, and Brunson returned home, where he had grown up in the shadow of Auburn University, the third of four children raised by his mother and grandmother.

Before enlisting in the Navy, he had even enrolled in summer classes at Auburn. Whether it was his proximity to the university or the work ethic of his mother who was employed at AU, Brunson said he always knew education was a must, an area where he was expected to excel.

So he enrolled at the University of Alabama. “They operated the medical school in Birmingham,” he said. The idea made sense to him.

“It was the second unforgivable sin I had committed from my family’s perspective,” he joked, saying it took nearly a decade before his Auburn family forgave him.

After UAB, Brunson completed an internship in internal medicine at Baptist Medical Centers in Birmingham and a residency in anesthesiology at the University of Mississippi Medical Center. He joined the School of Medicine faculty in 1991.

Today, Brunson serves as the senior advisor to the vice chancellor for external affairs and as a professor of anesthesiology, a position that began with his family’s encouragement to pursue education. That focus is one he freely admits to passing on to his children.

“I am a father of three beautiful daughters,” said Brunson. “My oldest, Christina, just finished Ole Miss Law School in 2013 and completed an LL.M. program in May 2014 in health-care law at the University of Houston Law School.

“My middle daughter Chelsea and youngest Claudia are still in college,” he said.

Now tasked with leading the state’s medical association, Brunson knows he has a position that allows him to influence, even more, those who are pursuing education and a better quality of life.

As the first African-American elected to lead the Mississippi State Medical Association through such challenges, Brunson has said it’s remarkable how unremarkable his election was.
“I think, until you break through the glass ceiling, people around you may not think it’s possible. Once it happens, that issue goes away,” he said. “I think I happen to be the first, but I won’t be the last.

“And now no person of color can say, ‘Well, I’ll never get to be president. They don’t allow that to happen.’ You can’t say that anymore.”

Medical leaders around the state chimed in on Brunson’s historic election to lead the association.

“We are delighted to have a MSMA president from UMMC, where every physician is a member,” said Charmain Kanosky, MSMA’s executive director.

“Dr. Brunson is an ideal representative of academic and office-based members. He has served MSMA in numerous leadership positions and has been a tremendous asset to the association.

“Just as notable, he benefitted MSMA while making equally valuable contributions to the practice of medicine and the University of Mississippi Medical Center.”

In his role as MSMA president, Brunson said he’s encouraged to help bring more physicians and specialists to all the corners of the state, the long-term goal in trying to give Mississippians the best access to the best health care.

Part of the group working with Gov. Phil Bryant to bring 1,000 more doctors to the state by 2025, UMMC is dedicated to helping the state reach the goal, Brunson said.
Applauding the state Legislature for also stepping up to the challenge, Brunson said the Mississippi Rural Physicians Scholarship Program, authorized by the state legislature in 2007, is another tool for improving health-care access.

“We give scholarships to students that come from rural areas to pay for medical school so they don’t have debt coming out,” Brunson said. Those future doctors then go into a primary care specialty and then are committed to return to their hometowns where there are few, if any, physicians practicing.

The commitment to educating and retaining more physicians while bringing more health-care options to Mississippian’s is a top priority for Brunson as he leads the state’s medical association.

“That will all play into this Medical Center’s mission to improve health care and improve access to health care,” Brunson said. “And it’s right in line with what the Mississippi State Medical Association wants to do, and I believe has a responsibility to do.”

Regarding Brunson’s ability as a problem-solver, Dr. Scott Hambleton, medical director of the Mississippi Professionals Health Program said, “One thing is certain about Claude: Regardless of the complexity of the situation, he will accurately assess it and diplomatically cut to the heart of the issue, usually before most folks know that there is a situation.”

And the man whom Brunson succeeded as head of MSMA, Dr. James Rish, voiced his full faith in the new leader.

“He is a very thoughtful and articulate leader who has worked hard on behalf of the association,” Rish said. “MSMA will be in good hands under his leadership.”
... I have been informed that this is an historic inaugural event; apparently I am the first bald anesthesiologist you ever elected. And speaking to my specialty as an anesthesiologist, I will try not to practice that art tonight ...

My mother could not be with us tonight as she is dealing with a progressive medical illness but I can feel her presence and her smiling approval of her youngest son’s achievement. A person who I dearly wish could have been here is my grandmother who meant so much to me and who was always confident that I and my brothers and sister would achieve wonderful things. She listened incessantly to my early stories about wanting to be a doctor and so lovingly encouraged it. I know she is smiling in heaven...

(W)hat is the solution to all of this upheaval and experimentation in our new and ever changing health-care delivery world? It’s you. It’s all of us who practice quality medicine and care about our patients and the health care they receive. I believe the new model of practice, particularly in the primary care specialties, must encompass a medical care team approach with a physician at the head of a team of multidisciplinary providers who manage the entire spectrum of a patient’s health...

The physician is the ultimate patient advocate and must be a part of the ultimate solution to this health-care issue.

To get the MSMA engaged on this task, I call for the establishment of a Presidential Commission on Health Equity. This commission will be made up of health-care experts from across disciplines and across the state.

They will be charged to study the issue of Mississippi’s poor health grades, access and provider issues and anything else that impacts the access to quality health care and an overall improvement in our citizens’ health. They will be asked to report back with a blueprint that we can use to begin the work of improving the health of Mississippians ...

I have asked former president of the American Medical Association and MSMA, Dr. Edward Hill, to lead this effort and he has kindly agreed to do so...

Finally, as I lightheartedly mentioned earlier, this is an historic inauguration. This inauguration takes place in the 50th year anniversary of Freedom Summer when the civil rights movement was in full force and our society was deeply divided along racial lines. It was a time when African Americans could not become members of the MSMA ... It was a time when I could not be addressing you in this manner or even listening to the address.

But here I stand tonight addressing you as your 147th President. And I submit to you that the importance of this achievement is not defined by my standing here, but by your sitting there. Because it is you collectively who made this moment possible ...

[To view a video of Dr. Claude Brunson’s inauguration, go to: youtube/JE5JvyZ8Im4/]
Before Dr. Steve Case joined the admissions committee in the School of Medicine, his predecessors were already trying to turn the clock ahead.

But Case and his committee made it spin.

The lasting impact Case has made on the School of Medicine began when he and his colleagues began asking themselves certain questions, such as: “Is a student’s head for medicine more important than the student’s heart?”

The answer is found in the balance and blend of backgrounds that mark the medical school classes since Case began serving in admissions 14 years ago.

Now, as his career comes to an end, a great part of his legacy will be this: He helped students find something he had once longed for: a sense of place.
On Long Island, N.Y., where he grew up and played baseball and where the high school football team held its games on Saturdays, he took up the trombone.

He liked music and his arms were long.

But, on game days, instead of playing with the band on the football field, he worked with his father in the cemetery.

The man was actually Case’s stepfather, and he’d been a cop before he got a job setting place cards for the dead.

“I spent a lot of Saturdays and holidays putting in grave stones with him,” Case said.

“What I admired about my father was his worth ethic. What I didn’t admire about him was that he never came to one of my baseball games. We never took a family vacation.”

The rest of the family included one sister and a mom who worked, in effect, as a nurses’ assistant. She had remarried after her divorce.

Much of the adult attention Case received came from his uncles, who pitched in when he was 8 and sent him to 4-H camp, a place he retreated to every summer until he was in his 20s.

“I was looking for a way to stay out of my house.”

By the time he was 12 or 13, he was a counselor at camp, where he would learn how to frame cabins and do plumbing and electrical work and to drive a dump truck.

Camp nurtured him and gave him a sense of responsibility, accomplishment and camaraderie. At least for the summer, it was home.

Dr. Nina Washington was with Steve Case the day he ran out of gas.

An undergraduate at the time, she had been accepted to several medical schools, but she’s from Jackson – one reason she chose UMMC.

Another was Case – the man who drove to New Orleans to recruit her and a fellow Xavier University undergrad, Rozell Chapman.

“The three of us were on the way back to Jackson, and Dr. Case and I were just yakking,” Washington said, “and on I-55 the van suddenly stops and we’re stranded outside Terry, so we had to call Rozell’s dad.

“That shows how open and causal and charming Dr. Case is – that we could be talking away, not realizing we didn’t have enough gas in the tank.”

But what he really did to draw her to UMMC was this, she said: “He believed that, to be a physician, you didn’t have to have a 4.0 or a high score on the MCAT. He believed you didn’t have to look a certain way.

“He looked for the well-rounded person. He saw beyond the numbers.”

Dr. Rozell Chapman is now a pediatrician in Lexington. Washington is an assistant professor of pediatrics at UMMC.

Case was one of many at the Medical Center who wanted them to succeed, she said. “From the beginning, this was home.”

They came from Pennsylvania to California in a bug – a yellow, ’71 Volkswagen – pulling a U-Haul trailer that held about all they owned: wedding gifts.

Case and his new wife Gay slept in an Army pup tent by night and saw America by day, traveling across the country so she could work in California as a nurse and he could earn his Ph.D. at USC on a tuition-free fellowship in cellular and molecular biology.

They arrived in Los Angeles with $100, cash. “We were on an adventure,” Case said.
But music didn’t interest him the way science and numbers did. Apparently, his aptitude made an impression on “the professor I hated the most.”

“My senior year in college, for some reason, he looked out for me,” Case said.

With his professor’s connections, Case was able to pursue his master’s at Wilkes College (now a university) in northeast Pennsylvania, paying his tuition with a teaching assistantship in chemistry, “which I also hated,” he said.

Later, he switched to biology, to try and satisfy his curiosity about fruit flies and genetics, which fascinated him. As did “that nursing student down in Philly.”

He and Gay began dating again.

“She gave me direction and focus,” Case said. “Once we became a pair, I had a purpose. Until then, I hadn’t any.”

Soon, together, they would also have a home.

Dr. LouAnn Woodward, Class of ’91, was an M1 when she noticed the “tall, scary man.”

That was her original impression of Case — a notion that soon vanished under the power of his charm.

“He remembers students’ names,” she said. “He remembers details of conversations with them. He makes them feel comfortable.”

This was Case during his career as a researcher and molecular biology instructor in the late 1980s.

Until his retirement, he reported to his former student: Woodward, UMMC’s associate vice chancellor for health affairs and vice dean of the School of Medicine.

He did so as associate dean for medical school admissions, a position he held since 2000. He did so, apparently, without worrying that he’d be second-guessed.

“He’s so good, you just stay out of his way and don’t mess it up,” Woodward said.

Each year, the admissions committee accepts 145 hopefuls, interviews more than 200, and is lobbied by more than 300.

“You call him up about a certain applicant and he knows just who you’re talking about,” said Dr. James Keeton, vice chancellor for health affairs and dean of the medical school.

“It’s phenomenal. There could not have been a more perfect person for that job.”

In the world of medical school admissions, Case built a national model.

His committee is known for overseeing a series of mini-interviews, calling it “speed dating.”

It’s known for building relationships with other colleges and universities, particularly those that are historically African-American.

In the pre-Case era, 44 percent of African-American students accepted to the School of Medicine chose to enroll here. Today, it’s 83 percent. Before Case, 55 percent who applied were accepted; it’s 94 percent today.
The committee is known for its “holistic review” – weighing not only the prospects’ academics, but also their character and compassion, to ensure that Mississippi’s doctors look like its patients.

How is that working? Medical school students come here with GPAs and entrance exam scores below the national average; by graduation, their test scores have shot above the norm.

Because of the admission committee’s work, more women and minorities are practicing medicine in Mississippi, Keeton said. “The impact is dramatic.”

But, as Case will tell you, diversity is not about just gender and race. It’s also about people like Eric McDonald, a husband and soon-to-be father of six who worked 10 years as a firefighter before taking a stab at medical school.

“If Dr. Case didn’t have the ability to look outside the box, to look at someone like me, I wouldn’t be here,” said McDonald, a fourth-year medical student.

Recently, McDonald dropped by Case’s office, where the two exchanged a bear hug. As if one of them had left and come back home.

UMMC was not on his A-list.

“I had a long, hard discussion with Gay,” Case said. “Los Angeles, Fort Knox, Stockholm, Yale. And now Mississippi?”

The road to his Ph.D. and beyond – actually, the road, ocean and airway – led from California to Kentucky, where he learned to “shoot, drive and take apart tanks” in the Army Reserve, and then to Sweden, where the National Institutes of Health (NIH) paid for his post-doctorate fellowship in histology.

It led back to the States, to Yale University, where he earned a second fellowship, in the Department of Biology. Now, he was ready for a real job.

He wanted to do research, preferably in a medical school. He interviewed at UMMC – to “rehearse.”

But UMMC “kept rising to the top of my list,” he said. The new chair of biochemistry was building the department, equipment was state-of-the-art; he’d enjoy “maximum lab time.”

In Mississippi, the cost of living was as friendly and pleasant as the people.

“It was a combination no other school could touch,” Case said. “Gary said, ‘Let’s give it a try.’ ”

The tryout lasted 35 years, beginning under the vice chancellorship of the late Dr. Wallace Conerly, Case said.

“I once told him, ‘You gave me the chance to have two different careers and keep the same parking space.’ ”

Case came here, with an NIH grant, as a researcher in recombinant DNA and chair of what is now called the institutional biosafety committee. But, when it came time for a grant renewal, there was no talk of leaving the Medical Center or Mississippi in the Case household.

“We had found everything we came looking for,” Case said.

They brought up two children, Chad and Jill. Because of their parents’ work schedules, they spent much of their early lives at the Medical Center with a dad who picked them up from daycare and took them with him to the lab, where they fell asleep on his desk.

Then he’d take them home and put them to bed.

He worked a lot of weekends in the lab, but he took time out for his kids. He even attended the away games of his son’s high school baseball team and daughter’s high school basketball team, although he doesn’t remember her getting off the bench the first season, he said.

“Later, she told us the parents of some of the starters never showed up.”

Case believed that was no way to make a home.

Lyssa Taylor had a sister who “broke a boy’s heart.”

Normally, this would not be big news – unless she, that is, Lyssa, was trying to get into medical school, which she was, and unless the boy was Dr. Steve Case’s son, which he was.

“I was terrified that Dr. Case was not going to like me because of my sister,” she said. “I was so nervous during the interview that I finally brought it up. He acted as if he hadn’t even made the connection.

“I say that to show that he has tons of integrity, to show how impartial he is, which is hard in his position – people begging to get in medical school.”

Lyssa Taylor did not get in the first time. But it wasn’t her sister’s fault. It was, she believes, because of her MCAT score, combined with her admissions essay, a “cookie-cutter” work she wrote with her head.

On her second try, she wrote from her heart. Today,
whenever she visits Case, it’s as Dr. Lyssa Weatherly, third-year resident in internal medicine, and one of those success stories he might have never helped write if he had left UMMC. Which he almost did.

After 20 years as a “lab jock,” he said, “the thrill was gone.” He might have been, too, if the departing chair of admissions, Dr. Virginia Read, hadn’t encouraged him to give her job a try.

“It was an opportunity to give back to the institution. Dr. Conerly gave me two years to try it out. I found out I had a passion for it,” Case said.

He had a passion for finding the “right students” to fulfill the Medical Center’s mission. It put the thrill back in his work. He enjoyed thrilling the students as well.

“There was an emergency room tech working here who had applied to medical school,” he said. “So I got on a gurney and hid under a sheet in the hospital hallway. A nurse, who was in on the plot, reamed him out for leaving a corpse on the floor.”

The ER tech was mortified – especially when the corpse heaved a big sigh and sat up.

“I had his acceptance letter on my chest,” Case said.

Even if Case hadn’t found a new career at UMMC, he said, he and his family would not have left the state that will always be home.

He has a dream in which he’s playing golf.

His own dad had played, he said. “He had a beautiful swing.”

The difference is Case plays the game with his son and youngest granddaughter. It’s a dream he expects will come true many times after Dec. 31, 2014 his official retirement date, in his and Gay’s new place in Oxford.

That’s 60 miles closer to West Point, where his son and his family have made their home.
Dr. R. Stephen Manuel, a national figure in medical school admissions, will help determine the future of health care in Mississippi as UMMC’s new associate dean for admissions in the School of Medicine.

Manuel left his post as assistant dean of admissions at the University of Cincinnati College of Medicine in Ohio to take over for Dr. Steven Case, whose effective retirement date was Nov. 11. Manuel arrived at UMMC in mid-October.

Also appointed assistant professor of family medicine at UMMC, Manuel will lead UMMC in selecting the state’s future physicians.

It’s a dynamic time to arrive at UMMC, he said. “We have a brand-new School of Medicine coming.

“Dr. Keeton has talked about expanding the class. Over the next two or three years, we’ll focus on recruiting quality students while enlarging the pool of candidates.”

Under Manuel’s guidance at the University of Cincinnati, the medical school became the first in the country to use multiple mini-interviews to select applicants. He has written and spoken considerably on this subject.

In fact, he met Case about three years ago at a workshop in Cincinnati, where Case was introduced to the mini-interview, a tool he then used at UMMC.

Case said his successors’ reputation is well-known. “I believe he will take this process and make it more sophisticated.”

For his part, Manuel said he has “big shoes to fill. Dr. Case has put UMMC in position as a national leader in admissions and the admissions process.”

Dr. LouAnn Woodward, associate vice chancellor for health affairs and vice dean of the School of Medicine, said, “Trends in admissions are changing, and Dr. Manuel, like Dr. Case, has the ability to keep us ahead of the curve. He has the flexibility to see what’s coming next.”

Arriving at UMMC with Manuel was his wife, Dr. Nicole Borges, as professor of pediatrics and assistant dean for medical education research and scholarship.

At Wright State University in Dayton, Ohio, she was assistant dean of medical education research and evaluation, and professor in the Department of Community Health at the Boonshoft School of Medicine. Elected into Alpha Omega Alpha Honor Medical Society, she has more than 50 peer reviewed publications and has served on Association of American Medical Colleges and APA committees.

Before his stint in Cincinnati, Manuel was director of admissions at Northeastern Ohio Universities College of Medicine, Rootstown, Ohio.

He then joined Cincinnati’s College of Medicine, where he distinguished himself as assistant dean of admissions for the past 9½ years. Manuel, who received his Doctor of Philosophy degree in educational administration from Indiana State University in 2001, also held leadership positions in admissions at ISU and at Wabash College in Crawfordsville, Ind.
In the field of dermatology, the late Dr. James G. Thompson helped write the book. Today, a gift in his name is helping UMMC residents pay for it. 

For the benefit of the Department of Dermatology, the Thompson family, including Russell and Lucy Thompson of Ocean Springs, has established the James Grant Thompson M.D. Textbook Endowment in the name of Russell’s father. The gift of $25,000 will help dermatology residents and/or fellows buy required textbooks and allow the Department of Dermatology to extend the reach of research and education.

During a July 28 ceremony, the Medical Center recognized the Thompsons for their generosity and awarded textbooks to the endowment’s first recipients: residents Dr. Lauren Craig and Dr. Michael Cosulich.

“I believe my father would have said this is the best thing in the world,” Russell Thompson said of the presentation. The donation represents “the perfect blend of my father’s passion for education and dermatology,” he said.

The Thompson family’s ties to the university are strong. A graduate of the University of Mississippi law school in Oxford, Russell Thompson first worked at the Medical Center as a biochemistry lab assistant for two years in the early ’60s. That’s where he met Lucy Mobley, his future wife and a 1959 graduate of UMMC’s School of Nursing.

Now, in their retirement, they are committed to remembering and honoring James Thompson’s eminent career.

During the presentation of the textbooks, Dr. Robert Brodell, professor and chair of the Department of Dermatology, praised “the profound impact he has had on the health of citizens in Mississippi.”

A medical pioneer, James Thompson was the state’s first board-certified dermatologist and the first president of the Mississippi Dermatological Society.

His reputation reached well beyond the state’s borders, as his son learned on a trip to Norway years ago.

“I was with a college group taking pictures on a fjord, when a man with a nice Southern drawl started talking to me,” said Russell Thompson, who once practiced law as a member of the Judge Advocate General’s Corps, U.S. Air Force.

“When I told him where I was from, he said, ‘I know only one person in Mississippi – Dr. James Thompson.’

“It’s a small world.”

Russell Thompson, second from left, and his wife Lucy Thompson, with flowers, are recognized during a July 28 presentation for their family’s donation establishing the James Grant Thompson M.D. Textbook Endowment in the name of Russell’s father. The first recipients of the dermatology textbooks paid for by the fund are residents Dr. Lauren Craig, far left, and Dr. Michael Cosulich, second from right. Dr. Robert Brodell, far right, professor and chair of the Department of Dermatology, made the presentations.
The world of James Thompson began in Carthage in 1902, the year he was born.

Before earning his M.D. from the University of Tennessee in Memphis, he graduated from Ole Miss in 1929 with a B.S. degree.

After interning with the U.S. Public Health Service, he served on the house staff at Mississippi State Charity Hospital in Jackson and as assistant superintendent for one year. He finished his dermatology training at Columbia University’s Post Graduate Medical School and Hospital.

Among the many medical organizations and professional societies he led is the Mississippi State Medical Association (MSMA), 1951-1952, publishing a second-edition account of its history.

A professor of dermatology at UMMC, he was also on the staffs of several other Jackson-area hospitals.

According to the MSMA, his many achievements include being listed in Notable Americans of the Bicentennial Era, and receiving, in 1974, the Wilson Award of Honor by the Wisdom Society for the Advancement of Knowledge, Learning and Research in Education for “enriching the resources of the human mind and enabling the highest aspirations of the human spirit for the betterment of all mankind and future generations.”

Thompson died that same year, on Feb. 23.

During the July 28 observance, he was remembered by former students and colleagues as a “typical Southern gentleman” known for his composure and sense of humor.

Those who spoke about him included Dr. Louis “Skip” Wise, a member of the UMMC affiliate faculty, and another early pioneer in the practice of dermatology; and Dr. Billy Walker, a dermatologist who also serves on the affiliate faculty.

Taught by Thompson at UMMC, Walker recalled a case of a patient with a persistent rash: “Physicians had tried everything to treat it, but nothing worked. Finally, Dr. Thompson was asked what he would do.

“He replied, ‘In that instance, I give him the full benefit of my personality.’”

For his part, Russell Thompson remembered his father as “a modest guy.”

“He loved his patients. He loved the practice of medicine. I believe he was good at it”

**Palmer’s Mind-set**

Motive to fund Alzheimer’s research is personal

Jackson businessman John N. Palmer has donated $1 million to The MIND Center, a University of Mississippi Medical Center institution dedicated to fighting Alzheimer’s disease.

Palmer, the chairman and founder of GulfSouth Capital Inc., a Jackson-based private investment firm, presented the gift to the Memory Impairment and Neurodegenerative Dementia Research Center, which is committed to finding treatments and a cure for dementia and Alzheimer’s.

The gift from the telecommunications pioneer and former U.S. ambassador to Portugal pushed donations to the MIND Center above the $10 million mark — a goal set in 2010, the year it opened at UMMC.

“I am convinced that continued support from the private sector will help our UMMC researchers find effective treatments for this disease,” Palmer said.

Although his contribution is earmarked for the MIND Center, Palmer channeled it through the recently launched Manning Family Fund for a Healthier Mississippi, a fund-raising campaign committed to battling a variety of health issues in the state.

The donor-supported program is a partnership between the Medical Center and the state’s First Family of Football, led by Ole Miss sports legend Archie and his wife Olivia Manning.

“I thought the Manning’s program was a fantastic idea when I first heard about it,” said Palmer, 80, a Corinth native who attended Ole Miss on a basketball scholarship in the 1950s.

“The Manning Family Fund will have a significant impact on the health of all Mississippians. I wanted to leverage my gift to the MIND Center and challenge others to support the Manning’s effort.”

The fight against Alzheimer’s is personal with Palmer, whose wife Clementine Palmer and her mother Clementine Brown of Jackson succumbed to it several years ago, he said.

It was while he was an ambassador to Portugal, 2001-2004, that he noticed his wife’s memory problems. Because of the rapid progression of the disease, he ended his tenure in Lisbon and returned so she could be cared for at home.

A brain disease that shrinks memory and reasoning, Alzheimer’s has struck more
than five million Americans, including more than 50,000 Mississippians, reports the Mississippi Chapter of the Alzheimer’s Association.

People over 80 years of age have a 50/50 chance of having this disease. As the population ages, the incidence of Alzheimer’s grows exponentially.

“It is a huge problem that is arguably the biggest challenge facing medicine for the next 100 years,” said Dr. Thomas Mosley, director of the MIND Center. The MIND Center, working in partnership with some of the nation’s most prestigious institutions, is able to pursue promising studies on dementia risk factors, genetics and the links between Alzheimer’s and other diseases. With a variety of contributions from businesses and the community, the center has added top researchers and state-of-the-art equipment, Mosley said.

Palmer helped put together a board and has served as the chair since the MIND Center was created. He and Mosley “shared a vision” that produced the research institute, which now also offers clinical treatment for patients with dementia, Mosley said.

“Ambassador Palmer’s most recent gift comes at a fantastic time.”

Palmer’s gift and others will enable the center to “ramp up” the recently created partnership with UMMC’s Telehealth program to offer dementia care to underserved parts of the state. These gifts will allow the Medical Center to recruit more top researchers to the MIND Center and motivate others to give, Mosley said.

“Seeing the kind of expertise we have at the MIND Center,” Palmer said, “and the scope and potential of UMMC, I thought, ‘This could make a difference.’”

Mannings spur crusade for healthier Mississippi

Football legend Archie Manning rallied hundreds of UMMC supporters to help the people of his home state during this summer’s launch of the Manning Family Fund for a Healthier Mississippi.

Accompanied by his wife Olivia, the patriarch of the state’s First Family of Football announced the campaign to boost UMMC’s commitment to improving Mississippian’s health on July 23.

The entire Manning family has loaned its name to the donor-supported program, which was unveiled at the event held on the Medical Center campus and attended by several state and local officials.

This new partnership between the Mannings and UMMC will raise money to attack heart disease, kidney disease, hypertension, cancer, dementia and other health-care challenges confronting the state.

“Olivia and I believe, with the support of people from Mississippi, we can help this medical center and this state do great

Archie Manning, center, and Olivia Manning announce the establishment of the Manning Family Fund for a Healthier Mississippi during a July 23 press conference at UMMC. Also on hand to answer questions were Dr. James Keeton, far left, vice chancellor for health affairs, and Dr. Dan Jones, far right, chancellor of the University of Mississippi.
things – even more than they’ve already done,” said Archie Manning, a Drew native who lives in New Orleans, where he quarterbacked the NFL’s Saints after his Ole Miss career.

“We know that people in Mississippi will help. All we got to do is kind of get them lined up.”

By establishing the fund, he said, he and Olivia hope to encourage others to face this challenge “for their own family and friends and for the people of Mississippi who need it the most.”

Among those on hand to endorse the campaign was Jackson Mayor Tony Yarber, whose daughter was treated for cancer at Batson Hospital for Children when she was an infant.

“No I have a vibrant 9-year-old who is doing amazing things and is cancer-free,” Yarber said. “So I want you to know, you and your family, Mr. Manning, that this is personal for me… I’m grateful for what you’re doing …”

This month, UMMC commenced a public awareness campaign for this long-term project, which extends the philanthropic bond between the Mannings and UMMC.

“What the Mannings are magical at doing is bringing people together,” said Dr. Dan Jones, chancellor of the University of Mississippi.

“(T)hey will bring us together in purpose for making a difference …”

The link between UMMC and the family includes An Evening with the Mannings presented by Bank Plus, a series of fund-raising events held between 2007 and 2011 that collected more than $2.9 million and funded the relocation and improvement of the pediatric clinics – renamed the Eli Manning Children’s Clinics.

Because of this connection, Dr. James Keeton, UMMC’s vice chancellor for health affairs, asked Eli Manning a year ago if he would help raise money for the expanding pediatric heart program.

“He said, ‘No,'” Keeton recalled.

“I said, ‘Oh, my God.’ He said, ‘No, I want my whole family involved.’

“And I said, ‘Oh, now we’re talking.’”

That family includes Olivia Manning, a Philadelphia native whose charitable work was honored in 2011 by the Ole Miss Women’s Council for Philanthropy.

“They are the most real people I’ve ever dealt with – totally committed to doing something for Mississippi and its health,” Keeton said.

The state consistently faces high rates for obesity, physical inactivity, diabetes, infectious disease, low birth weight and other health issues that donations to the fund will try to find answers for.

Donations to the Manning Family Fund for a Healthier Mississippi can be made online, on the fund’s web site at www.manningsforhealth.org, or they may be sent to Sara Merrick, Office of Development, University of Mississippi Medical Center, 2500 N. State St., Jackson, MS 39216. For more information, call Sara Merrick at 601-984-2302.

**Honor-bound**

Dr. William Geissler, standing, left, and Dr. George Russell, standing, right, were named recipients of, respectively, the Alan E. Freeland Chair of Orthopedic Hand Surgery and the James L. Hughes Chair of Orthopedic Surgery. The chairs are named in honor of Dr. Alan Freeland, seated, left, and Dr. James Hughes, seated right; each is a professor emeritus at UMMC. Dr. James Keeton, standing, center, vice chancellor for health affairs and dean of the School of Medicine, gave the welcoming remarks at a reception held June 11 at the Country Club of Jackson. Geissler is a professor in the Department of Orthopedic Surgery and Rehabilitation. Russell is professor and chair of the Department of Orthopedic Surgery and Rehabilitation.

Dr. Charles R. Pound, left, UMMC professor of urology, division chief of urology and program director, is the recipient of the W. Lamar Weems Professorship, named in honor of Dr. Lamar Weems, center, professor emeritus in the UMMC Department of Surgery and a legend in the practice of urology in Mississippi. Dr. James Keeton, right, UMMC vice chancellor for health affairs and dean of the School of Medicine, presided over the ceremony recognizing them both, Sept. 8, at the Country Club of Jackson.
Here’s what generally happens, not necessarily in this order, and not necessarily over the same period of time: Muscles all over your body become weak and shrink. Limb by limb, body part by body part, you lose function.

You cannot walk. You can’t use your hands.

Muscle movement occurs when motor neurons in the brain signal the motor neurons in the spinal cord. Motor neurons in an ALS patient die, and the ability of the brain to initiate and control muscle movement is lost.

Amyotrophic lateral sclerosis, or ALS, is always fatal.

For a newly diagnosed patient, “it’s extremely scary. It’s like giving someone a death sentence,” said Dr. V.V. “Veda” Vedanarayanan, professor of neurology, pediatrics and pathology in the School of Medicine.

As your face and tongue muscles waste away, your speech becomes impaired and you lose the ability to swallow. In the disease’s final stages, muscles that allow you to breathe no longer function. You can become totally paralyzed.

What’s keeping you alive is a ventilator and feeding tube.

Your mind is as sharp as the day you were diagnosed, which likely happened two to four years earlier. You have feeling, but not movement. Your hearing and eyesight are usually just fine.

“You know exactly what’s going on,” Vedanarayanan said. “You used to be able to do something, and now you need help. When you’re not able to breathe …. that’s when it’s fatal.”

Muscle movement occurs when motor neurons in the brain signal the motor neurons in the spinal cord. Motor neurons in an ALS patient die, and the ability of the brain to initiate and control muscle movement is lost.

Jayess resident and UMMC patient Shirley Armstrong was diagnosed a year ago. Armstrong, who’s in her mid-40s, got second opinions at the Mayo Clinic in Rochester, Minn., and the Ochsner Medical Center in New Orleans.

The mother of two young daughters can’t walk or use her hands and arms. She has a lift recliner, an electric wheelchair and a hospital bed that help her cope. “I’m not always comfortable, but I make do,” she said. “My husband works overseas and during the week he’s gone, so I have to have someone with me 24 hours a day.”
It’s hardest, she said, to use the bathroom and cope with impaired speech. “In my mind, I speak 90 to nothing. It takes me forever to get my thoughts out.”

About one in 100,000 people are diagnosed with ALS, usually no earlier than in their 40s or 50s.

Although much remains a mystery, it’s been tied to genetic abnormalities, said Dr. Alexander Auchus, professor and McCarty Chair of Neurology.

Just as someone taking the Ice Bucket Challenge sucks in his breath as ice-laced water is poured over their heads in exchange for a donation, a person getting a diagnosis of ALS is equally shocked.

“There’s not a particular test we can do that will confirm the diagnosis. We might wait, or get a second opinion before we confirm,” Vedanarayanan said.

UMMC’s neurology staff cares for an average of 20-25 ALS patients. “We aren’t just focused on a diagnosis. We start supportive care right off the bat,” Vedanarayanan said.

“That can be therapy, helping them through finances and their job, nutrition, equipment needs and special beds, figuring out if they have money to pay their bills. Medicare benefits kick in immediately.”

Occupational and speech therapists evaluate communication and nutrition. “Patients might first experience problems with their voice,” said UMMC speech and language pathologist Kathy Wentland.

She and the team give them high-tech communication devices ranging from iPads to devices controlled by a patient’s eyes. “It can be hooked up to email and the Internet so that they can stay connected to people,” she said.

Otolaryngology staff take X-rays to make sure a patient isn’t aspirating food into their lungs, she said. They get sophisticated breathing equipment, including portable ventilators and machines that push more air into the lungs.

“Our goal is to prolong oral feeding as long as we can,” Wentland said. “They may get fatigued over the course of a meal, so we recommend they eat smaller, more frequent meals, or eat more slowly and take smaller bites.”

And even with a feeding tube, “that doesn’t mean they can’t eat,” she said. “They may still be able to enjoy small amounts of food for pleasure.”

They may be given Riluzole, the one FDA-approved drug that can slow, if only by months, the progression of the disease. Nuedexta, a drug used to help people with uncontrolled crying or laughing, can help ALS patients who have “spasms of emotions” as their throat constricts, Vedanarayanan said.

Plans are under way for a specialized weekly comprehensive clinic for ALS patients at UMMC, Auchus said.

Auchus, Veda and Wentland point to internationally famous Stephen Hawking, the theoretical physicist who, for decades, has coped with a motor neuron disease similar to ALS. Hawking is almost entirely paralyzed and communicates through a speech-generating device.

They hold onto hope that research funded by initiatives such as the ALS Association’s Ice Bucket Challenge will bear fruit for their patients. “They’re like family,” Veda said.

Said Armstrong: “I’m thankful for the awareness. Even if I don’t receive a cure, someone else will not have to go through this.”
ask Nancy Smith why she opted for a pancreas transplant, and she’ll tell you about her heart.

There’s her son Carruth, 18, a high school senior. There’s daughter Braeden, 23, a college graduate and preschool teacher.

“They’re amazing,” the Jackson resident says of her children. Carruth copes with the challenges of Asperger’s syndrome, a form of autism, and a rare neuropsychiatric disorder associated with strep infections.

For them, Smith, a brittle diabetic, opted for a rare procedure not without risk or potentially devastating complications.

“He needs me, and so does she,” she said. “Nobody is like a mama.”

On Sept. 30, Smith became the first person in the state to receive an isolated pancreas transplant at the University of Mississippi Medical Center – not the more medically common combination of a pancreas and kidney.

“It’s an incredibly rare procedure,” said Dr. Mark Earl, an assistant professor of surgery at UMMC, who performed the transplant.

“It’s especially rare for someone who has no kidney failure, but has other life-threatening complications from type 1 diabetes.”

And, he said, the surgery marked the 10th transplant of a pancreas at UMMC in 2014, putting its transplant program on par with other acclaimed programs in the Southeast.

Diagnosed with juvenile diabetes, Smith, 52, said she and her doctors knew it would be a matter of time before she’d need a transplant. She lost sight in one eye. Her neuropathy was worsening.

Because Smith’s pancreas wasn’t producing the hormone insulin, her blood sugar level was unpredictable and would drop without warning, causing her to pass out.

“You pass out, and if it doesn’t come back up, you can die,” Earl said. “Because Nancy is a Type 1 diabetic, the insulin-producing cells in her pancreas had been killed by her own immune system.”

During a three-hour operation, Earl left her native pancreas alone; it worked well except for that one potentially fatal flaw. The donated pancreas he positioned into her abdomen produces crucial insulin, which stimulates cells to absorb sugar from the blood.

Before the surgery, Smith had tried to do all the right things: Frequently exercise. Watch her diet and weight. Pray. Try not to fret about the future.

But as her health continued to deteriorate, Smith in July 2013 secured a place on the transplant waiting list at Ochsner Medical Center in New Orleans. It was right before UMMC’s transplant program began performing pancreas-kidney procedures.

“They had to take me off the waiting list at Ochsner because I couldn’t find anyone who could go to New Orleans and stay there three months with me,” Smith said.

The timing could not have been better.

“It was ironic,” said Smith’s sister-in-law, Terri Gillespie of Jackson, UMMC’s chief nursing executive officer. “She came over to the house and said she wished UMMC would get approval for a pancreas transplant. I said, ‘Oh, my gosh. That happened yesterday.’”

Smith met with Dr. Kenneth Kokko, an associate professor of nephrology and member of UMMC’s transplant team. “Dr. Earl came in, and he said,
“You’re going to be the first person to receive a pancreas transplant, and if there was any person who needed a pancreas transplant, you’re it,” Smith said.

About eight months later, on Sept. 24, Earl called her: A donor pancreas had been located. She grabbed the bag that had been packed for months and headed to UMMC, only to find out that the pancreas wasn’t viable for transplant.

“We got back into the car, and Nancy said, ‘I feel like I had Braxton-Hicks contractions and I went to the hospital to have a baby, and I got sent back home,’” said her sister, Janie Robbins of Ridgeland.

“Carruth was so sad when I came back home,” Smith said. “He didn’t say a word. He just put his head on my shoulder. Braeden was bummed, but positive that all things happen for a reason.”

Just days later, Earl summoned Smith again with news of a potential pancreas. She hurried back to UMMC, donned a hospital gown, and counted down the hours before surgery in a patient room, Gillespie and Robbins at her side.

There would be a 30 percent chance she’d have to go back into surgery the first week. There was a 10 percent chance the blood supply to the new pancreas could become blocked during the first six weeks.

“There’s about a 20 percent chance of rejection, but in the overwhelming majority of folks, the transplanted pancreas lasts a long time and they are done taking insulin injections,” Earl told her.

“I’m the overwhelming majority!” Smith told him.

As Smith, Gillespie and Robbins waited for word from Earl on the pancreas’ viability, they shared a laugh over memories of Smith owning a cupcake store in the face of diabetes. And, they somberly contemplated the fact that because someone died, Smith could have a better and longer life.

“If I can just have five more years ….” Smith said, willing back her tears. “I just need a little more time.”

Earl sent Smith home just five days after she got her new pancreas.

“Everything’s a miracle,” said Smith, who wants to help people understand the importance of organ donation. “When I woke up from surgery, I didn’t have diabetes.

“I cannot imagine having anyone else in charge,” she said of Earl. “He has given me quality of life back.”

As Smith’s recovery continues, Earl said, so does her prospect of a long and healthy life.

“I want her to get 20 more years completely free of diabetes. My hope is that she goes on to die of something else as a very old lady.”
The problem with pain is that you can’t measure it like a mountain or sugar. Trying to pin it down is like asking: How long is a shadow? How much air is a balloon? “Pain is so personal. It’s almost like talking to a patient about his or her mother,” said Dr. Christian Paine, UMMC assistant professor of pediatrics.

In order to treat it, though, health-care givers must appraise it and make a judgment, in part by asking patients to rate theirs on a scale of 1 to 10.

“And my 10 may not be your 10,” said UMMC pharmacist Dr. Andrew Ostrenga.

Still, based on patient satisfaction scores, caregivers at UMMC had been doing a great job at this — until a couple of years ago; that’s when the scores — especially those linked to pain relief — plummeted. The Medical Center has been trying to find out why.

“We don’t do conversations about pain well — as nurses or physicians,” said Dr. Janet Harris, former chief nursing executive officer.

“Some patients come here believing they will not have to deal with pain after surgery.

“We have pain experts here, but they aren’t called as often as perhaps they should be.

“Everyone believes they’re managing pain but, clearly, we’re not,” she said, indicating the patient surveys. “And, to me, that’s all that matters.”

Failure has moral consequences, but it also has monetary ones: Hospitals are reimbursed by the Centers for Medicare and Medicaid Services (CMS) based in part on patient satisfaction. Frustrating a patient can be costly.

But the Medical Center, like other medical institutions, walks a tightrope — the one between the fear of failing its patients and the fear of addicting them.

Helping caregivers maintain their balance is one task of UMMC’s Pain Management Committee, which includes Ostrenga and Paine.

After completing a fellowship in pediatric hospice and palliative medicine, Paine now listens to patients more carefully.

“When patients are asked if the hospital staff cared for them, they don’t talk about their pneumonia,” he said.

“They weren’t just thinking, ‘Have they treated my illness?’ They talk about: ‘Did they bring me a drink when I was thirsty? Did they adjust my position or give me a pillow?’

“What they remember is how much people cared.”

Marcie Brown of Jasper has no complaints about that. In June, her son Jonathan Brown, in his early 20s, underwent surgery at UMMC after suffering a damaged hip and ankle in a traffic accident.

Marcie Brown did say her son’s scheduled medication didn’t always arrive on time. On the other hand, everyone was keeping tabs on his pain, trying to make him more comfortable.

“They were nice and helpful,” she said.

How important is comfort to a patient?

“Surgery patients are more concerned with pain than with death,” said Dr. Ike Eriator, professor in the Department of Anesthesiology and director of the Pain Fellowship.

But providers are often concerned about doing too much about pain.

From left: Jennifer Stephen; Dr. Christian Paine reassures his patient, Tisheanna Phinizee, 8, of Columbus; Dr. Andrew Ostrenga; Dr. Ike Eriator; Dr. Janet Harris.
When it comes to prescribing opioid pain relievers (morphine, codeine, etc.), Mississippi ranked sixth (per 100 persons) in 2012, the U.S. Centers for Disease Control and Prevention reported on July 1 – although it ranked 43rd for high-dose opioids.

Then, there are the providers’ personal biases.

“At UMMC we see the sickest of the sick, a large chronic pain population; that may make some caregivers jaded,” Ostrenga said.

There are patients who claim their pain is a 7 when it’s a 2. But that’s often because “they don’t trust us,” Ostrenga said. “They want to make sure they get some pain relief.

“There are patients who come in who are addicts, but we can’t assume they all are.”

Bias afflicts the culture as well: No pain, no gain. Bite the bullet.

“It is the belief that to be a man is to not complain,” Eriator said. “This needs to change.

“Providers must pay more attention to pain management.” That’s what the pain scale is for – not so much as a measure for preciseness, but to sound an alarm.

“We also have to believe it and do something about it,” Eriator said.

For her part, Jennifer Stephen decided to believe.

“Before that, I was the judge and jury,” said Stephen, clinical director of pediatric emergency and lab services. “I finally decided to be an advocate for the patient. It was very freeing for me.

“If you are aware of your own thoughts and doubts, you can better treat the patient. How you manage pain depends on the patient.”

Managing it does not necessarily mean medicating it. There are other treatments – distractions, music therapy, play (for children), massage, meditation.

“But we have to do something,” Stephen said.

Whatever is done, the patient should be involved. In her role, Harris made sure that every nursing unit designated a “pain champion” – someone trained to help patients deal with particularly harsh pain.

That means communication, which is also a key to managing a patient’s expectations, Ostrenga said.

“If you’re having major bone surgery, you’re going to have major pain. We must explain that to the patient and come up with a goal.

“If the patient agrees that 7 is the goal, then the answer will be: ‘Yes, my pain was controlled.’”

Managing pain well can speed recovery, Paine said. “If you feel better physically, then you feel better emotionally, spiritually.

“If you don’t treat the suffering in all its forms, then you’re not really making the patient well.”

### PAIN MANAGEMENT RECOMMENDATIONS

- Let your first allegiance be to your patient.
- Train “pain champions” – nurses, managers, educators, etc. – to be resources for patients and caregivers.
- Educate surgery patients beforehand about pain expectations.
- Establish hospital protocols for dealing with pain; this may include a “pain threshold” as a guide for when to give medication or other treatments.
- Set daily pain goals with patients.
- Communicate better with patients and their family members.
- When called for, use methods of pain relief or management in addition to medication.

**Sources:** Dr. Ike Eriator, Janet Harris, Dr. Andrew Ostrenga, Dr. C. Christian Paine, Jennifer Stephen

### FACTORS AFFECTING PERCEPTIONS OF PAIN

- Depression (from loss of job, disfigurement, etc.)
- Anxiety (such as fear of hospital, fear of death, worry about family)
- Anger (from delays in diagnosis, unavailable physicians, failure of therapy and more)

**Source:** Dr. Ike Eriator
Dr. James E. Keeton, vice chancellor for health affairs and dean of the School of Medicine, has announced he will step down from his role at the end of current academic year, June 30, 2015.

Keeton has served in the position since July 2009, the first six months on an interim basis.

“This is a bittersweet decision for me,” Keeton said. “Every day I’ve worked at the Medical Center since 2002 has been a privilege.

“To be able to serve my alma mater in this way has been pretty special. I’ve had opportunities to work with people – inside and outside UMMC – that would never have come my way but for this job.”

The vice chancellor, who has a dual role as dean of UMMC’s medical school, effectively acts as the chief executive of a $1.6 billion enterprise engaged in health professions education, research and patient care. The Medical Center encompasses six (including pharmacy) health sciences schools with more than 2,900 students and employs more than 9,600 people.

Keeton, a Columbus native who turns 75 in 2015, graduated from the University of Mississippi and earned his medical degree at UMMC. He trained in surgery and pediatric urology at UMMC and in London, England. In private practice as a pediatric urologist for 27 years, he also served two years in the Medical Corps of the United States Navy at the rank of lieutenant commander.

Keeton has led the Medical Center through some challenging times, including the recession of 2008 and the rollout of the national health-care law.

During his tenure, the Medical Center has seen the planning, funding and groundbreaking for a new School of Medicine building, the installation of a $90 million electronic health record system, and a recruitment effort to fill more than 30 senior leadership positions.

A national search is underway to determine Keeton’s successor. The process will yield two to three candidates for final selection by Dr. Dan Jones, chancellor for the University of Mississippi, with the approval of the Mississippi Institutions of Higher Learning board.
**FIRST CMO HONORED FOR YEARS OF SERVICE**

Dr. William H. Cleland, who became UMMC’s first chief medical officer in 2009, retired from the Medical Center on Aug. 31.

A professor of obstetrics and gynecology, he was honored for his years of service during an Aug. 14 reception, where he was presented with a wristwatch by Dr. James Keeton, vice chancellor for health affairs and dean of the School of Medicine.

Cleland, who earned his M.D. and did his residency at the Medical Center, had returned to work at UMMC in 2003.

His plans during retirement include visiting his new grandchild and spending time with his family at his second residence on the Mississippi Gulf Coast.

“It’s been a pleasure. I’ve enjoyed every minute of it,” he said of his time at UMMC. “And I would be remiss if I didn’t thank Dr. Keeton for his guidance and support in my work.”

**DOUGLAS BACON ASSUMES ANESTHESIOLOGY CHAIR**

Dr. Douglas Richard Bacon, professor and chair of anesthesiology at the Wayne State University School of Medicine, has joined the Medical Center faculty as professor and chair of anesthesiology.

After receiving his B.A. in history cum laude and his B.S. in medicinal chemistry cum laude from the State University of New York at Buffalo (SUNY AB) in 1981, Bacon earned his M.D. in 1985 at the State University of New York at Stony Brook. He had residency training in internal medicine from 1985-86 at Millard Fillmore Hospital and in anesthesiology from 1986-88 at SUNY AB before serving a cardiothoracic anesthesia specialty year from 1988-89 at SUNY AB. He earned his M.A. in history at SUNY AB in 1994.

Chief resident in anesthesiology at its affiliated hospitals from 1988-89, Bacon joined the SUNY AB faculty in 1989 as a clinical instructor in anesthesiology. He was promoted to assistant professor of anesthesiology in 1990 and associate professor of anesthesiology in 1996 before joining the staff of the Mayo Clinic, Rochester, Minn., in 2000. He served as an associate professor of anesthesiology from 2000-03 and professor of anesthesiology and history of medicine from 2003-12, and vice chair for faculty development at the Mayo Clinic Department of Anesthesiology before joining the Wayne State University faculty.

An active member of several professional organizations, including the Phi Beta Kappa and Sigma Xi honor societies, American Medical Association, American Association for the History of Medicine and the American Society of Anesthesiologists, Bacon has served on numerous editorial boards, is a reviewer for 10 different anesthesiology or historical publications, and is an associate editor for the journal “Bulletin of the History of Anesthesiology.” He was named editor-in-chief of the “Journal of Clinical Anesthesiology” on Oct. 1.

A highly sought speaker for national and international symposiums and meetings, Bacon has given more than 170 invited presentations, including 29 visiting professorships. He has authored or coauthored more than 70 articles in peer-reviewed professional publications, five books and 30 book chapters, and more than 50 abstracts.

His research interests include the organizational history of anesthesiology in the United States and the world, the history of residency training in the United States, post graduate education in anesthesiology and anti-neoplastic chemotherapeutic agents and their anesthetic implications.

**O’MARA TAKES HELM AS NEW CLINICAL AFFAIRS ASSOCIATE VC**

Dr. Charles S. O’Mara was appointed associate vice chancellor for clinical affairs, effective May 1.

Since August 2013, O’Mara has served as a special advisor to Dr. James Keeton, vice chancellor for health affairs and dean of the School of Medicine. This followed O’Mara’s long and distinguished career as a vascular surgeon and leader in the private medical community in Jackson.

In his new role, O’Mara reports to Keeton and will work with UMMC’s clinical leaders in mapping the direction of the clinical enterprise. He will continue efforts that focus on patient safety and clinical quality.
Simpson chosen as Medical Center’s Monitoring Maven

Dr. Kimberly Simpson, associate professor of medicine in the Department of Neurobiology and Anatomical Sciences, was selected to serve as the Medical Center’s director of assessment effective June 2, 2014.

The director of assessment monitors, measures and communicates UMMC’s effectiveness in meeting academic and administrative goals. Simpson will play a leading role in working with UMMC faculty and staff to coordinate and gauge the effectiveness of institutional efforts. This information will be used to guide opportunities for instructional enhancement and interprofessional education.

She will consult with Medical Center leaders and designated committees and groups that put in place the institution’s strategic planning initiative and objectives to comply with the accreditation requirements of the Southern Association of Colleges and Schools Commission on Colleges (SACS COC), Liaison Committee on Medical Education (LCME) and other school- and program-specific accreditation bodies.

Simpson will be responsible for the timely collection, analysis and editing of various data and other tasks.

Veteran Physician to Lead Practice

April Mann, who has spent much of her career working with students and their families, became the new director of alumni affairs on Oct. 1, replacing Geoffrey Mitchell, who retired in May.

A Birmingham native who earned her undergraduate degree at Mississippi State University, Mann arrived in Jackson from the University of North Carolina at Chapel Hill, moving here with Lily, her 9-year-old Yorkshire terrier.
“This is the closest I have lived to family and friends since college,” said Mann, former director of UNC’s Office of New Student and Carolina Parent Programs.

“It’s a great professional and personal move for me.”

She leads a six-member office, including Ginger Daniels, long-time associate director. The staff’s goal is to keep former Medical Center students connected and deeply engaged with their alma mater.

“For some folks, that may be speaking at an alumni luncheon, or volunteering for alumni board, or serving as a student mentor or giving back financially,” said Mann, who received her Master of Education degree at the University of South Carolina and is pursuing her Doctor of Education degree.

“What’s important is that we at Alumni Affairs provide that array of opportunities for them, whether they live in Jackson or anywhere in the world.” That’s one of her two major goals. The other is producing publications for all Medical Center alumni from all schools.

Pathology department welcomes Kim Geisinger

Dr. Kim R. Geisinger, professor of pathology and laboratory medicine at the University of North Carolina at Chapel Hill, has joined the Medical Center faculty as a professor of pathology.

After receiving his B.S. from Drexel University in 1972, Geisinger earned his M.D. at the Medical College of Pennsylvania in 1976. He was a house officer in the Department of Pathology at the University of Michigan, Ann Arbor, from 1977-81, and was a cytology service fellow in the Department of Pathology at Memorial Sloan-Kettering Cancer Center, New York, from 1981-82.

He joined the Wake Forest University-Bowman Gray School of Medicine faculty, Winston-Salem, N.C., in 1982 as an assistant professor of pathology and became an associate professor of pathology there in 1986. In 1991, he became professor of pathology and director of surgical pathology and served in those positions for 21 years. He also served as professor of internal medicine (gastroenterology) there from 2009-12. He served as director of cytology at North Carolina Baptist Hospital from 1986-2012 before entering private practice in North Carolina and becoming an adjunct professor at the University of North Carolina at Chapel Hill in 2012.

Senior associate editor of the journal Diagnostic Cytopathology since 2008, Geisinger is the author or coauthor of 257 articles and 11 invited review articles in peer-reviewed professional publications, 163 abstracts, four books and 41 book chapters, and is the book series editor of five different volumes. An accomplished speaker, Geisinger is a highly sought lecturer internationally who has given 246 invited presentations internationally. He is an active member of several professional organizations, including the American Medical Association, the American Society of Clinical Pathologists and the College of American Pathologists.

His professional interests include diagnostic cytopathology, gynecologic, gastrointestinal and orthopedic pathology, thoracic tumors, general surgical pathology and tele-pathology, rapid on-site evaluation of cytologic and histologic specimens and patient safety.

Blecker comes aboard as professor of pediatrics

Dr. Uwe Blecker, a pediatric gastroenterologist at Centre Hospitalier Emile Mayrisch in Luxembourg, joined the Medical Center faculty in July as a professor of pediatrics.

After receiving the B.S. in medical sciences in 1986, Blecker earned the M.D. magna cum laude at the Free University of Brussels, Belgium, in 1990. He completed a pediatric residency from 1990-93 at Academic Children's Hospital in Brussels. From 1993-94, he was a fellow in pediatric gastroenterology and nutrition at Hahnemann University Hospital in Philadelphia, Pa. In 1994, he continued his fellowship in pediatric gastroenterology, hepatology and nutrition at Wyler Children's Hospital at the University of Chicago. In 1994,
he returned to Academic Children’s Hospital to complete his fellowship in pediatric gastroenterology and nutrition.

Blecker served as director of the Sleep Lab and Pediatric Gastroenterology Admission Unit at the Free University of Brussels from 1995-96 before joining the Louisiana State University School of Medicine as associate professor of pediatrics and medical director of the LSU Medical Center Pediatric Weight Management Program. In 1998, he joined the faculty at Thomas Jefferson University as associate professor of pediatrics and director of nutrition support services at the Alfred I. DuPont Hospital for Children in Philadelphia, Pa.

In 2000, he became professor of pediatrics and chief of the Division of Pediatric Gastroenterology and Nutrition at the University of Arizona Health Sciences Center in Tucson. In 2001, he joined the staff of the St. Christopher’s Hospital for Children and Drexel University in Philadelphia as professor of pediatrics and chief of the Division of Gastroenterology, Hepatology and Nutrition. He returned to Tucson in 2002 as director of the Pediatrics and Gastroenterology Program at Tucson Medical Center and director of Pediatric Gastroenterology, P.C. He became professor of pediatrics and chief of the Division of Pediatric Gastroenterology and Nutrition at the West Virginia University Health Sciences Center in 2008.

He is board-certified in pediatrics and pediatric gastroenterology and nutrition.

Blecker has served as co-principal investigator or principal investigator for numerous studies, most recently “A Multi-Center, Randomized, Double-Blind Study of the Safety, Tolerability and Clinical Outcomes of Two Doses of Oral Pantoprazole in Children with Symptomatic GERD.”

He is the author of more than 100 articles in peer-reviewed publications, four books, six book chapters and nearly 300 communications at national and international meetings.

JAMES SONES APPOINTED DIVISION CHIEF, PROFESSOR

Dr. James Q. Sones has joined the Medical Center faculty as a professor of medicine and has been appointed chief of the Division of Digestive Diseases. He was formerly in private practice in Jackson.

In 1972, Sones earned his M.D. at UMMC, where he also did his internship and residency in internal medicine. His gastroenterology fellowship was at Parkland Memorial Hospital in Dallas, Texas, where he was also an Upjohn Fellow in clinical pharmacology.

Board-certified in internal medicine, he has served on the staff of several Jackson-area hospitals, where he was also a consulting, courtesy or attending physician.

Sones is a member of several professional organizations, including the American Gastroenterological Association, the American College of Gastroenterology and the American College of Physicians.

His research projects date back to 1977 and embrace the treatment of such ailments as Crohn’s disease, hepatitis C virus infection, diverticulitis, ulcerative colitis and many more.

Sones has authored or co-authored several articles published in the New England Journal of Medicine and Gastrointestinal Endoscopy.

JAMES WYNN ARRIVES AS PROFESSOR OF SURGERY

Dr. James Wynn, vice-chair of the Department of Surgery and Mason Distinguished Chair in Transplant Surgery and Immunology at the Medical College of Georgia at Georgia Regents University, has joined the Medical Center faculty as a professor of surgery in the Division of Transplant and Hepatobiliary Surgery.

A Davidson College undergraduate, he earned his M.D. at the Medical College of Georgia in Augusta in 1980, where he also did his internship and residency in general surgery.

Wynn completed his fellowship in transplantation surgery at the University of Florida School of Medicine in 1987.

A diplomate of the American Board of Surgery, he also has served at the Medical College of Georgia as chief of the section of general surgery, chief of the section of transplant surgery and program director of the General Surgery Residency Program.
In 2013, he was honored with the Medical College of Georgia Exemplary Teaching Award.

Wynn was a visiting assistant professor of surgery at the University of Wisconsin School of Medicine for six months in 1992.

He is the former president of the United Network for Organ Sharing and is former chair of the Scientific Advisory Committee of the Scientific Registry of Transplant Recipients.

Wynn has served in leadership positions for a multitude of other professional organizations and committees and is ad hoc reviewer for a variety of publications, including the American Surgeon, the American Journal of Transplantation, Surgical Endoscopy and the New England Journal of Medicine.

He has been published by Vox Sanguinis, Transplantation, the International Journal of Artificial Organs, the American Journal of Surgery, Critical Care Medicine, the New England Journal of Medicine and many more publications as lead author or co-author.

Wynn has been principal investigator, primary investigator or co-investigator for an array of research projects.

He is a member or fellow of multiple scientific and professional societies, such as the American College of Surgeons, the Southern Surgical Association, the American Society of Transplant Surgeons, the American Society of Transplantation, the American Society of Nephrology and the National Kidney Foundation.

His primary clinical interests include kidney and pancreas transplantation and hemo- and peritoneal dialysis access.

**Anesthesiologist Castillo dons director’s mantle**

Dr. Daniel Castillo, an anesthesiologist at the University of Florida at Jacksonville, has joined the Medical Center faculty as an associate professor of anesthesiology. He will serve as director of cardiothoracic and vascular anesthesia.

Castillo is an intensivist and a cardiac anesthesiologist, and his clinical interests are echo-cardiography, ultrasonography and the perioperative management of patients with cardiovascular diseases.

After receiving the M.D. from the Colombian School of Medicine, Bogota, in 1995, Castillo had postdoctoral training at Harvard Medical School (excitation – contraction coupling) from 1995-98, an internship in general surgery from 1998-99 at Boston University, an anesthesia residency from 1999-2002, including service as chief resident from 2001-02, and a critical care medicine fellowship from 2002-03 at Harvard Medical School’s Brigham and Women’s Hospital, Boston. He also was an anesthesia fellow from 2003-04 at the University of Miami’s Jackson Memorial Hospital.

He joined the University of Miami faculty in 2004 as an assistant professor of anesthesiology and served as staff anesthesiologist at the VA Medical Center, Miami, where he directed the Anesthesiology Simulation Center at the Center for Patient Safety. In 2009, he joined the University of Florida at Jacksonville faculty as an assistant professor of anesthesiology and residency program director.

Recipient of the 2013 University of Florida College of Medicine Exemplary Teacher of the Year Award, Castillo has authored or coauthored 15 articles in peer-reviewed scientific publications and is an active member of several professional organizations, including the American Society of Anesthesiology, the Society of Critical Care Medicine, the Society of Education in Anesthesia and the Society of Cardiac Anesthesiologists.

Castillo has been invited to speak at grand rounds and as a visiting professor at numerous institutions in Florida, Arizona, Mississippi, Colombia and Jamaica. His research interests include improving patient safety through simulation research.
Dr. Ian Paul, School of Medicine professor of psychiatry and human behavior, has been named the recipient of the second annual Regions Bank TEACH Prize at UMMC.

The Toward Educational Advancement in Care and Health (TEACH) Prize includes a $10,000 check and recognizes a faculty member who engages students, challenges them intellectually and demonstrates the craft of education.

“I’m certainly honored to receive this award,” said Paul, a neurobiologist and behavioral researcher who also directs the Graduate Program in Neuroscience in the School of Graduate Studies in the Health Sciences.

“However, this honor is as much a tribute to the faculty, students and staff of the Program in Neuroscience as it is to me. Without their dedication, creativity, hard work and patience, none of my work in graduate education could have gotten off the ground.”

Paul earned his undergraduate degree in behavioral neuroscience from the University of Pittsburgh in 1983 and his Ph.D. in neurobiology at the University of North Carolina at Chapel Hill in 1989.

He came to UMMC as an assistant professor in 1993 from the National Institutes of Health. Paul was awarded tenure in 2000 and became a full professor in 2005. Two years later he established the Program in Neuroscience as the first interdepartmental graduate program at UMMC.

Throughout the past several years, he and a group of neuroscientists from UMMC and University of California, San Francisco have published numerous groundbreaking studies on rodents that point to possible links between early-life exposure to antidepressants, abnormal brain development and autism-like behaviors.

As with all his research, student learning played a major role.

“Teaching, for me, is an opportunity to connect the scientists of the past with those of the present and the future,” Paul said.

“While all scientists want to make a difference during their careers, our successful trainees are really our most lasting legacy in science. If one scientist teaches just 10 successful students, his or her impact on the future of their field is tenfold greater than it could possibly have been, were they working alone in a laboratory.”

AO NORTH AMERICA TAPS ORTHOPEDIST MCGUIRE

Dr. Robert A. McGuire Jr., M. Beckett Howorth Professor and Chair of Orthopedic Surgery and Rehabilitation, associate professor of neurosurgery and director of the Orthopedic Surgery Residency Program, has been elected president-elect of AO North America by the organization’s board of directors.

McGuire will serve as president-elect through July 1, 2015, when he will begin a three-year term as president of AO America. He will succeed Dr. Michael Baumgaertner, whose term as president will end on July 1, 2015.

“It would be an honor for me to serve as president of AO North America,” McGuire said. “It will be my duty and privilege to preserve all that is right in the organization, to drive AONA to reach new levels of distinction, and to preserve the legacy of excellence in musculoskeletal care as set forth by our founding fathers years ago.”
PROFESSOR EMERITUS FREELAND CELEBRATED AS JOHNS HOPKINS DISTINGUISHED ALUMNUS

Dr. Alan E. Freeland, professor emeritus at UMMC, has been named a Distinguished Alumnus of Johns Hopkins University in Baltimore, Md.

Freeland earned his M.D. from the George Washington University School of Medicine and was a member of the Alpha Omega Alpha Honor Society. At UMMC, he practiced hand and upper extremity surgery from 1978 to 2013, the year he retired as physician and professor emeritus.

He founded the Orthopedic Hand Surgery Fellowship Program at UMMC in 1991 and was the director from 1991 to 2004. Freeland authored numerous articles, book chapters, and two notable books on the treatment of hand and wrist injuries using miniature implants.

He was chair or a leading faculty member on national and international hand-trauma courses and served as visiting professor. In 1998, he was the winner of the American Association for Hand Surgery National Teacher/Clinician of the Year Award, and served as the association’s president in 2002. The International Federation of Societies for Surgery of the Hand named him a “Pioneer of Hand Surgery” in 2013.

The Alan E. Freeland M.D. Chair of Orthopedic Hand Surgery has been established in his honor at the UMMC.

THIGPEN’S PROPOSAL SECURES ACP AWARD

Dr. Calvin Thigpen, assistant professor of medicine, submitted the proposal for the Mississippi Chapter of the American College of Physicians that received the Evergreen Award at the ACP’s Council of Residents national meeting May 9 in Orlando, Fla.

The Evergreen Award is given for the successful implementation of programs that boost membership, improve communication, increase member involvement, enhance diversity and foster careers in internal medicine, and improve management of the ACP chapter.

FAMILY MEDICINE’S DIANE BEEBE SELECTED FOR FOUNDATION BOARD MEMBERSHIP

Dr. Diane Beebe (1984), professor and chair of the UMMC Department of Family Medicine, is serving as immediate past chair of the American Board of Family Medicine, 2014-2015, and was recently elected to its Foundation Board.

In 1987, Beebe joined the faculty of UMMC, where she also completed her family medicine residency after earning her M.D. in 1984.

She has led or served in a variety of professional organizations, including the Accreditation Council for Graduate Medical Education Residency Review Committee for Family Medicine, the Future of Family Medicine Task Force on Education, the Academic Council for the National Institute for Program Directors Fellowship, and the Board of the Annals of Family Medicine.
WALKER REAPS SCHOLARSHIP AWARDS

Senior medical student Micah Walker and his daughter, Emery Clair, join in the excitement as Walker receives the Dr. and Mrs. Henry O. Leonard Scholarship during the School of Medicine’s 53rd annual Honors Day, May 2 in the Norman C. Nelson Student Union.

The scholarship is presented to a student who is planning a career in family medicine. Walker also received a Department of Surgery Medical Scholars Program Award.

RESEARCHERS PROVE THEIR MEDAL

Dr. Richard J. Roman, left, receives a Platinum Medallion from Dr. Richard Summers, professor of emergency medicine and associate vice chancellor for research, at the Excellence in Research Awards on Dec. 9. The platinum award is reserved for faculty who have brought in more than $5 million in funding for research projects. Now in its 14th year, the awards recognize those researchers whose projects attracted the top-dollar amounts, in categories based on their funding totals: Bronze, Silver, Gold and Platinum. This go-round, UMMC saluted 26 researchers.
Fourth-year-medical student Eric McDonald hams it up as Dr. Loretta Jackson-Williams, associate dean for academic affairs, pins him during the induction ceremony of the Jeanette Pullen Chapter of the Gold Humanism Honor Society, Sept. 8 at the Norman C. Nelson Student Union. Those honored included 27 fourth-year medical students and three residents.

Peter Mittwede, left, 2014-15 Associated Student Body president, accepts the ASB Student of the Year Award from Brad Deere, right, 2013-2014 ASB president and a 2014 School of Medicine graduate, during the 2014-15 ASB Officer Installation Banquet, May 5 at the Norman C. Nelson Student Union. Mittwede, a Ph.D. candidate, will resume his medical school education at UMMC in July as a fourth-year student. Carson Kisner, another 2014 med school graduate, also received the Student of the Year Award at the event. Other ASB officers installed included Kevin Randolph, vice president; Kelly Pippin, secretary; and Daniel Lyons, treasurer.
When Dr. Perrin Smith graduated from the School of Medicine in 1964, he helped found a family birthright.

Two of his great-nieces are enrolled in the UMMC School of Medicine: Mary Grace Sessums, a third-year student, and Ann Tucker, an M4 and daughter of Dr. James Tucker, Class of ’84.

Tucker welcomed her great-uncle back to the campus on Aug. 22, during the Office of Alumni Affairs’ Medical Class Reunion Weekend at UMMC, where she was honored as a recipient of a Medical Reunion Scholarship.

“She’s tearing up the class,” said Smith, a Columbus resident.

During a weekend highlighted by campus tours and a commemorative celebration of his graduating class, Smith was awash in the changes that have flooded the School of Medicine over the past 50 years.

For instance, in the official 1964 medical school portrait of 71 graduates, only two are women – the same number Smith’s family, alone, has contributed to the current school. And a third has applied.

“I don’t know where they get it,” Smith said of the women in his family, “because all us boys are slow.”

Smith and his classmates weren’t the only ones honored. Graduates of the classes of ’74, ’84, ’89, ’94 and ’04 were also recognized.

But as Dr. James Keeton, vice chancellor for health affairs, said, “This is really about the Class of ’64. The rest of you enjoy and hope you make it this far.”
To a luncheon gathering of about 70 people in the Student Union, Keeton, who is also the dean of the School of Medicine, summarized the Medical Center’s growth since Smith and his cohorts roamed its halls.

Among the changes he cited: The Medical Center has 875 faculty members today, compared to 40 when the institution opened in 1955, a few years before Smith arrived.

More growth is coming, Keeton said, describing the nascent, $73 million medical school and the planned $150 million expansion of Batson Children’s Hospital.

But the weekend was also a time to respect the past, especially during a reception at the Old Capitol Museum in Jackson, where 19 members of the class of ’64 were on hand to be photographed and receive medallions honoring their golden anniversary.

Among those remembering their heyday was Dr. Ed Hill of Tupelo, former president of the American Medical Association.

“Why is it at reunions that everyone looks older than you feel?” Hill said to classmates, their relatives and well-wishers gathered in the Old Capitol rotunda.

Hill’s class enjoyed “many advantages,” he said, thanks, in great part, to an esteemed faculty that included, among other Drs. Blair Batson, Robert Currier, Arthur Guyton, James Hardy, Michael Newton, Patrick Lehan, Robert Sloan and Robert Snavely.

Speaking of the class of ’64 and its contribution to medical care in the state, Hill said, “I think it brought us closer to better health.”

Also remembered that night were 15 class members who are now deceased. Shortly before reading their names aloud, Dr. Charles Hollingshead of Ellisville said, “It’s great to be a member of the greatest class to ever go through UMC.”

FROM TOP: Dr. Ed Hill of Tupelo, left, receives his Class of 1964 commemorative medal from Dr. James Keeton, vice chancellor for health affairs and dean of the School of Medicine, shortly before addressing his fellow alumni (at right).

Dr. Edward Gore of Tupelo, Class of 1964, and his wife Claudia Gore enjoy a moment with friends.

1964 classmates, from left, Dr. A. Jerald Jackson of Hattiesburg, Dr. Edward Hill of Tupelo and Dr. Charles Aaron Hollingshead of Ellisville prepare to sit for a group portrait in the Old Capitol Museum.

Dr. James Stanford, left, and Dr. Barbara Goodman, share their memories about the Class of 1969.

Dr. James Keeton, left, vice chancellor for health affairs and dean of the School of Medicine, congratulates Dr. Jack Aldridge Jr. of Brandon, a recipient of the Class of 1964 commemorative medal. Aldridge passed away in October.
Medical Alumni Hall of Fame

Dr. James Keeton, vice chancellor for health affairs, was celebrated in August as the latest recipient of UMMC’s Distinguished Medical Alumnus Award, on the night that five School of Medicine legends joined the Medical Hall of Fame.

“Maybe you can be a prophet in your own country,” Keeton said upon accepting the award during an Aug. 16 ceremony attended by an estimated 120 people at the Country Club of Jackson.

“It’s been a heck of a trip,” said Keeton, who also serves as the dean of the School of Medicine. “To be honored by your peers – it doesn’t get any better than that.”

HALL OF FAME Awardees were:
Dr. PonJola Coney, the first School of Medicine graduate to be appointed dean of a medical school
The late Dr. Robert Currier, the first chair of the Department of Neurology
Dr. Mac Andrew Greganti, the first-ever recipient of an endowed professorship in internal medicine at the University of North Carolina School of Medicine at Chapel Hill
The late Dr. Patrick Lehan, who made the Medical Center’s training program in cardiology among the Southeast’s best
Dr. William Lamar Weems, the first geographic full-time urologist in the Department of Surgery

This is the third year the Medical Alumni Chapter of UMMC has made the Hall of Fame presentations, held in conjunction with the 146th session of the Mississippi State Medical Association.

Keeton, who plans to retire in the summer, is a Class of ‘65 graduate and the fifth recipient of the Distinguished Medical Alumnus honor.

“I’m just a little old boy from Columbus, in the middle of his class,” he said. “I was going to be a YMCA director if I didn’t get into medical school. Thank God I got into medical school.”

Dr. Dan Jones, University of Mississippi chancellor, presented the award to Keeton.

Keeton served as interim vice chancellor for several months starting in 2009 before Jones appointed him to fill the position permanently on Feb. 18, 2010.

As UMMC’s chief executive officer, Keeton has led the institution through a host of challenges – among them a major economic recession.

“In my humble opinion these are our best days,” Jones said.

“When the history of the medical center is written, I believe it will show that the time Jimmy has been here was pivotal.”

Dr. Barbara Goodman, president of the Medical Alumni Chapter, said the Hall of Fame inductees made outstanding contributions to the medical school, the state, and beyond.

Coney, who was unable to attend the ceremony, sent her acceptance speech, which included these words: “Thank you, my family and friends, for your support and unconditional love and especially to my late mother, Dorothy, for being a role model of patience, sacrifice, trust, leadership and more.”

Accepting the award for Robert Currier were his wife Marilyn Currier and their two daughters Dr. Mary Currier, State Health Officer for the Mississippi State Department of Health, and Angela Currier.

“I may be prejudiced, but I think he deserves it,” Marilyn Currier said. “He loved to teach. His students loved him. He was good at it.”

For his part, Hall of Fame recipient Greganti said that three of his fellow honorees had been his teachers: Currier, Lehan and Weems. “These people were the stars,” he said.

Accepting the honor for Lehan was his son Dr. Neal Lehan, a Clinton dentist who teaches in the UMMC School of Medicine. As a boy, he said, he went with his father to work at UMMC on Sundays before church.
“Dad was a calm cookie,” he said. “A heart would stop on the table. He’d point to this, then point to that, and then everything would be fine. Then he’d go outside and suck down half a cigarette.”

Accompanying Weems to the presentation was his wife of 61 years, Nanette Weems.

Referring to his Hall of Fame night, Weems said, “It’s a high honor, but not the highest honor I’ve ever had. When Nanette agreed to marry me, that was the highest.”

Family Day
by Ruth Cummins

When Reese Logan was in Joan Montgomery’s kindergarten class at Clinton Park Elementary, he managed to break his arm while playing on a zip line.

“The next week, they all sat in a circle at school for sharing time,” his mom, Melody Logan of Clinton, remembers. “Joan asked what each of them wanted to be when they grew up. Reese said, ‘I want to be an orthopedic surgeon.’”

“He has never varied from that,” Melody Logan said of Reese, a first-year student in the University of Mississippi School of Medicine and May graduate of the University of Mississippi.

“When he was accepted into medical school, he sent me a text in the middle of the night. It scared me to death. He said that his dream was going to come true.”

Logan and Reese’s dad, Rob, were among hundreds of proud parents attending Family Day Aug. 8 on the UMMC campus. Led by student tour guides from the School of Medicine, family members of the 145 new first-year students visited laboratories, classrooms and other areas of campus where the M1s are now spending much of their time.

“When he was in his senior year of college, Reese looked at every medical school in the area but this one,” Rob Logan said.

Katie Parker Boyte of Brandon, right, wife of first-year School of Medicine student Matthew Boyte, listens to the heart of a patient simulator under the tutelage of Dr. Jeff Orledge as part of an Aug. 8 Family Day tour for parents and family. Matthew Boyte, a 2013 highest honors graduate of the University of Southern Mississippi, was among first-year students receiving white coats during Aug. 7 ceremonies at the Belhaven University auditorium.

“‘He visited UMMC, and said he had no idea how fantastic it is. He could have gone anywhere, but he said he was going to UMMC.’”

Here’s what those attending Family Day learned, in addition to how big the campus is: Don’t expect to see your relative. Don’t expect a call. And don’t bug them.

On one of the tour stops, parents sat in a large classroom and watched a medical student examine and question a woman posing as a patient plagued by migraine headaches. UMMC professor of family medicine Dr. Judy Gearhart watched as the student carried out the mock office visit.

“Did you see anything he could have done better?” Gearhart asked. It’s important, she told family members, that medical students learn to greet patients warmly by name, introduce themselves, and avoid using medical jargon in their conversations.

In another setting, Dr. Jeff Orledge, associate professor of emergency medicine and a physician in UMMC’s Emergency Department, explained how lifelike patient simulators are used to educate students. Brandon resident Katie Parker Boyte, wife of M1 Matthew Boyte, listened to one stimulator’s heartbeat with a stethoscope as another voiced his pain and symptoms. Matthew Boyte is the son of Dr. Rick Boyte, UMMC professor of pediatrics and director of pediatric pain and palliative medicine.

Family Day was “the culmination of everything,” said Katie Boyte, a nurse who, like her husband, graduated from the University of Southern Mississippi. “Matt’s a non-traditional student. He’s married, in the workforce, has two kids, and is a homeowner. We both have a great support system from our families.”

She knows the years ahead will be an interesting journey. “We’ve weathered a lot of storms together,” Katie Boyte said.

She and her husband have an agreement.

“He’s been working an 8 to 5 job. That’s his time away,” she said. “He won’t study at home. When he’s home, he’s ours.”

Ashley Sullivan, left, a fourth-year medical student, guides Clinton residents Melody and Rob Logan as they intubate a patient simulator during an Aug. 8 campus-wide tour that is part of Family Day, a gathering for parents and families of entering medical students. The Logans’ son Reese, a May graduate of the University of Mississippi, was among first-year students who received their white coats during a ceremony at Belhaven University.
1950s

Dr. Joe Johnston (1953) of Mount Olive, retired from family practice on July 1, 2013.

Johnston, who received his Medical Certificate from the medical school in Oxford before UMMC opened in Jackson two years later, is now traveling and dividing his time between homes in Mount Olive and Pass Christian.

“I miss my patients,” he writes, “but son Word is taking good care of them, so they tell me!”

Dr. Fred S. Evans (1957) of Pensacola, Fla., retired since 2001, has been doing volunteer work at St. Joseph Medical Clinic for patients without medical insurance.

Evans was a member of the first medical school class to graduate from UMMC. He attended the last two years on a U.S. Navy scholarship and served in the Navy until 1981.

An ophthalmologist, he practiced in Pensacola for 20 years before his retirement. He and his wife Pat, a Belzoni native, have two sons and several grandchildren.

1960s

Dr. Jerry Adkins (1960) practiced general surgery in the Biloxi area for 40 years before retiring after Hurricane Katrina struck the Mississippi Gulf Coast in 2005.

He is now the medical director of the Healing Center, an outpatient wound care and hyperbaric oxygen therapy clinic, at Biloxi Regional Medical Center.

He has three sons and three grandchildren. “Life is good,” he writes.


Jackson, who finished his residency at the Baylor College of Medicine in 1964, has five children and more than a dozen grandchildren.

Dr. Albert E. Breland (1963) of San Diego, Calif., retired from his neurology and psychiatry practice in 2009.

A winner of the Bronze Star and Purple Heart during the Vietnam War, the U.S. Army veteran also worked with intelligence officers overseas as a medical officer from 1983 to 1992.

His interests include travel, bridge, ham radio, sailing and piano.

“Over the past three years, I’ve finally indulged a lifetime desire to take piano lessons,” he writes. “Although I was in the Laurel band in high school – played the clarinet – I never learned to read the bass clef.

“I’ve now finally arrived at a level where I can play some of the Beethoven sonatas and other pieces, mostly from the 1950s, I’ve liked over the years.”

Dr. James Clegg (1963) of Fort Myers, Fla., retired in 2013 after practicing family medicine in Santa Rosa, Calif., for 45 years.

After earning his M.D., he interned at the U.S. Naval Hospital in Oakland, Calif., and then attended the U.S. Naval School of Submarine and Nuclear Medicine. Clegg then served as medical officer on the USS John C. Calhoun out of Charleston, S.C., and as medical officer of a submarine squadron in San Diego.

Afterward, he started practicing family medicine in Santa Rosa. Board certified, he also served as chief of staff at Warrack Hospital and was president of the Sonoma County Medical Association.

His wife, Donna Fulton Clegg, died in 2001. They had two daughters and four grandchildren. In 2007, he married Mary Jane Page Hoos, an RN from Tupelo.

Dr. Milton John “Jack” Arras (1964) has been the pathologist lab director for Colleton Medical Center in Walterboro, S.C., since 1999.
He had previously served in the same position at Glynn-Brunswick Memorial Hospital in Brunswick, Ga., for 18 years, following two years of active duty in the U.S. Navy.

Arras was also an instructor of clinical pathology, clinical chemistry, at the SUNY Upstate Medical Center, Syracuse University, New York, for a year after completing his pathology residency in 1968 at Stanford University in Palo Alto, Calif.

After finishing his M.D. at UMMC, he did a rotating internship at the University of Texas Medical Branch in Galveston.

Dr. James Lockhart Jr. (1964) of Tulsa, Okla., is retiring after 43 years in the practice of surgery.

He completed general surgery training in 1971 at Parkland Hospital, University of Texas Southwestern Medical School in Dallas.

Lockhart spent a year in Vietnam with the 1st Marine Division and a year at U.S. Naval Hospital in Pensacola, Fla., before joining Surgical Associates Inc. in Tulsa.

He has been active with the American Society of Breast Surgeons, representing the organization on the Commission on Cancer for the American College of Surgeons, primarily practicing breast surgery the past 20 years.

Dr. S.J. “Jobe” Wilder (1964) of Clinton retired several years ago, as did his wife Peggy.

His practice specialty was anesthesiology.

His interests include Ole Miss sports, singing in church choir and more.

Dr. Gary Nye (1965) of Orinda, Calif., closed his private psychiatric practice in 2009 to be able to travel more with Ann, his wife of 42-plus years.

After a two-year hiatus, he returned to work a couple of days a week at a community mental health center and continues to teach at the University of California at San Francisco. He remains active in professional organizational projects focused mostly on physician wellness/well-being.

A few years ago, the California Medical Association created the Gary S. Nye, M.D., Award, given annually to a California physician who has made notable contributions to physician wellness.

Some years ago, he and Ann became dual citizens with Ireland to facilitate their travels in Europe. Ann, who is active in civic affairs, started the local community newspaper, The Orinda News, nearly three decades ago.

Nye’s hobbies include movies and fly fishing. He and Ann enjoy visiting their two grandchildren in New York City.

Nye is able to keep in contact with a fellow UMMC graduate, Dr. Fred Parris, another prominent psychiatrist in the San Francisco area.

1970s

Dr. James S. “Judge” Hicks (1970) of Oregon City, Ore., is clinical professor of anesthesiology at Oregon Health & Science University (OHSU) in Portland, and is active in the American Society of Anesthesiologists.

Hicks is the former director of obstetric anesthesia at OHSU. He served in both the U.S. Navy and U.S. Army for 26 years, retiring in 1997 with the rank of colonel, having commanded the 396th Combat Support Hospital (Reserve) in Vancouver, Wash.

He has ratings as an Airline Transport Pilot and Flight Instructor. He and his wife Sally enjoy cooking, especially Southern barbecue, beer-making, gardening and travel.

“I’m fortunately better at flying airplanes (which I’ve done since before starting medical school) than I am at golf (also a 50+ year endeavor) but enjoy both, as well as being the department barbecue chef,” he writes.

Dr. Jerry Stephens Chase (1971) of Salem, Ala., is the medical director for three juvenile detention facilities operated by the Georgia Department of Juvenile Justice.
Chase closed his office practice in October 2010 to spend time with his wife. He was widowed in July 2013 after “35 years of a wonderful marriage,” he writes.

Dr. William C. “Bill” Hopper Jr. (1971) of Oxford has retired and is traveling by motor coach throughout North America, spending summers in the North Carolina mountains, visiting Santa Fe, N.M., and areas out West with his “bride of 46 years.”

After earning his M.D. at UMMC, he completed an orthopedic residency at the Medical Center and a pediatric fellowship in Atlanta. He then served two years as chief of pediatric orthopedics and spine at the National Naval Medical Center in Bethesda, Md.

Afterward, Hopper returned to the Mississippi Gulf Coast to join the Gulf Coast Orthopaedic Clinic. He also was involved in teaching rounds at Tulane University and Children’s Hospital in New Orleans. He has been active in the Pediatric Orthopaedic Society of North America.

Dr. Paul Gee (1973) of Tucson, Ariz., joined the faculty at the University of Arizona College of Medicine, Tucson, in the Division of General Medicine, Geriatrics and Palliative Care as an assistant professor in September.

Gee, who is certified by the American Board of Internal Medicine, did his internal medicine residency at Highland General Hospital in Oakland, Calif.

Dr. Billy Long (1973) of Madison retired from clinical medical practice in December 2013.

In April 2014, he completed the 80-hour course at the Health Care Delivery Institute, which provides training to improve the delivery of health care. He also attended the Health Catalyst Summit in Salt Lake City, Utah.

Long enjoys traveling and spending time with his family and his grandchildren. In January and February 2014, he took a three-week trip to Australia and New Zealand. He also enjoys attending Ole Miss sports events “as often as possible,” he writes.

Dr. Olin Mauldin Jr. (1973) of Jacksonville, Fla., is semi-retired from nearly 40 years of pediatric practice, spending the last 22 with the University of Florida in Jacksonville with ’73 classmate Dr. Skip Wilson.

He enjoys working in the yard and spending time with his toddler grandson Adrien. “I haven’t quite figured out the Grampa routine yet,” Mauldin writes.

“Still unsure what to do when I grow up,” he writes, Mauldin has been “proudly married” for about 28 years to Vicki Mauldin, “the only Lamaze-certified RN educator within about a 100-mile radius.”

An Ole Miss football fan, Mauldin reports that he “will holler for (Mississippi) State except in the Egg Bowl (drat LSU).”

Dr. Gilliam S. “Swink” Hicks (1975), UMMC professor of medicine, was selected Teacher of the Year for the 2013-2014 academic year by the internal medicine residents.

Hicks did his internal medicine residency at UMMC and at the VA Medical Center.

Board certified in internal medicine, he is a member of the American College of Physicians. At UMMC, he serves on the Intern Selection Committee for the Department of Medicine.

Dr. C. Ron Cannon (1976), an otolaryngologist in Flowood, is serving as treasurer for the American Board of Otolaryngology.

He is the former chair of the American Academy of Otolaryngology-Head and Neck Surgery.

After earning his M.D., Cannon completed an internal medicine internship at the City of Memphis Hospital and a surgical and otolaryngology residency at UMMC.

He served as chief resident of the department of otolaryngology, head and neck surgery, at the University of Virginia Medical Center in the early 1980s.
Dr. Glenn C. Cockerham (1979) of Palo Alto, Calif., is National Program Director of the VA Ophthalmology Service in the San Francisco Bay area and is associate professor of ophthalmology and pathology at the Stanford University School of Medicine.

He has also served as chief of ophthalmology at the VA Medical Center, Stanford University; and chief of corneal and refractive surgery, external diseases, Allegheny Ophthalmology and Orbital Consultants in Pittsburgh, Pa.

Cockerham, who did his ophthalmology residency at Walter Reed Army Medical Center in Washington, D.C., has held various positions with the United States Air Force, including chief consultant in surgery for the Air Force Surgeon General.

Dr. M. Sandra Scurria (1979) of Bellaire, Texas, was in private, family medicine practice for nearly 30 years with more than 3,000 patients when she became affiliated in 2011 with MDVIP, a company that supports concierge-style practices.

She now has fewer than 500 patients. “Now I have a small, comfortable office where I see every patient myself, offer same- or next-day appointments and give more personalized, one-on-one medical care,” she writes.

With MDVIP, she is focusing more on wellness and prevention.

Scurria has remained active in her local medical society and has served as president. Among the community organizations she’s involved in are the Chamber of Commerce, several professional women’s groups and some non-profit social organizations.

Although she has given up snow skiing, she still plays golf, travels and socializes with friends, and is building her own custom-made home.

Dr. Arthur E. Wood III (1980) of Waynesboro is a general practitioner.

He is married and has five children.

Dr. Brenda P. Hines (1982) of Flowood became board-certified in sleep medicine in 2013.

Limiting her practice to that area, she is the associate medical director of Somnus Sleep Clinic in Flowood, treating patients with obstructive sleep apnea, restless leg syndrome, narcolepsy and more.

Her special interest is sleep disorders of women and children.

Dr. Darden North (1982) of Flowood is serving as the director of the Woman’s Hospital Chapter of the American Institute of Minimally Invasive Surgery (AIMIS).

North completed his ob-gyn residency at UMMC in 1986, the year he became physician partner at Jackson Healthcare for Women, PA, in Flowood.

Also an established author, he is writing his fifth mystery/suspense novel. His author website is www.dardennorth.com.

Dr. John Mark Pierce (1984) of Knoxville, Tenn., is in private practice, general internal medicine, in the Summit Medical Group, Knoxville.

He is also assistant professor of medicine, Division of Internal Medicine, at the University of Tennessee in Knoxville.

Pierce earned his undergraduate degree from Mississippi State University, majoring in biomedical engineering.
After receiving his M.D., he completed an internal medicine residency at Baptist Memorial Hospital in Memphis in 1987. He worked as an emergency room physician and instructor of medicine at the Regional Medical Center in Memphis.

He has also practiced emergency medicine and internal medicine at Western Baptist Hospital in Paducah, Ky.

Dr. Ralph C. Atkinson III (1985) is president of Nephrology Associates, a 28-physician nephrology practice serving Nashville and middle Tennessee.

He is also medical director of the Centennial Medical Center Renal Transplant Program, FMC Acute Dialysis Program, FMC Lawrenceburg and FMC South Nashville Dialysis Clinics.

He serves on the board of directors for Centennial Medical Center in Nashville and the Nashville Academy of Medicine, and is chair of the Network 8 Medical Review Board, and an at-large member of the Network Forum board of directors.

Dr. Ben Douglas (1985) of Tillamook, Ore., practices Family Medicine with Adventist Health Tillamook Medical Group.

He is also Hospice Physician for Tillamook County.

In 2013, he was voted Physician of the Year in Tillamook.

Dr. Jim Phillips (1986) of Gates Mills, Ohio, was recently honored as the Cleveland Clinic’s Critical Care Medicine Surgical Intensive Care Unit Staff of the Year and Teacher of the Year for the second year in a row.

He left UMMC in 2011 to complete a critical care fellowship at Vanderbilt University. Since 2012 he has become board certified in anesthesiology critical care, pediatric anesthesiology and neurology critical care. He had previously earned board certifications in anesthesiology, pain management and emergency medicine.

Phillips also earned a Master of Strategic Studies from the U.S. Army War College in Carlisle, Pa., in 2012.

He enjoys competing in ultra-running races and Iron Man Triathlons, and is active in the community, particularly in his church.

He is married to Alison Phillips, who is also active in the community.

Dr. John Proctor (1986) of Franklin, Tenn., is a diplomate of the American Board of Emergency Medicine in emergency medicine and pediatric emergency medicine.

He is also president of TEAM-Health Central Group, one of the nation’s largest providers of hospital-based clinical outsourcing.

After graduating from medical school, he completed his residency in emergency medicine at UMMC in 1990. He finished pediatric emergency medicine training and sub-board certification at Vanderbilt University Medical Center, where he served as director of emergency department operations from 1993-96.

Proctor received his MBA from Vanderbilt in 1998.

Dr. Carol F. Akin (1988), after serving in the Jackson area for 21 years, has relocated to Collierville, Tenn., where she joined the Medical Anesthesia Group, which provides anesthesia in the Methodist Hospital systems.

Her husband, Dr. Mark Akin, who operates Akin Equine Veterinary Services, is an equine veterinarian specializing in lameness.


Tucker is the founder and president of Physicians Urgent Care,
with locations in Booneville and Corinth, where he lives with his wife Suzanne Cox.

1990s

Dr. Sara J. Weisenberger (1991) of Jackson works in the UMMC Department of Pediatrics’ Division of General Pediatrics. Besides seeing patients in the Children’s North Clinic, Weisenberger and her partners teach residents, medical students and nurse practitioner students.

Her interests include advocacy work with the Mississippi chapter of the American Academy of Pediatrics. She also focuses on obesity in children and immunizations advocacy, working with the Mississippi Division of Medicaid to assist in promoting managed care, outcomes and services for children’s health.

Weisenberger is also involved in neighborhood organization and advocacy, gardening, young adults’ ministry and her church.

She has been married for 27 years. Her son John is a sophomore at Ole Miss.

Dr. Lucius “Luke” Lampton (1993) of Magnolia recently purchased the second-oldest weekly newspaper in Mississippi, The Hinds County Gazette, established in Raymond by the great-grandfather of the late Mississippi author Willie Morris.

The Gazette joins another award-winning weekly newspaper he publishes: The Magnolia Gazette, established in 1872.

He and Dr. Scott Anderson of Meridian, a radiation oncologist, edit and produce the new Southern literary journal, China Grove. Two other UMMC alumni are involved in the journal: poetry editors Dr. Dwalia South of Ripley and Dr. John McEachin of Meridian.

Dr. Stacey Gatlin Frohn (1994) is practicing general pediatrics at the Bartlett, Tenn., office of the Memphis Children’s Clinic, which she joined in 1997.

At UMMC, she received the Blair Batson Award for Excellence in Pediatrics before beginning her pediatric residency at the Arnold Palmer Hospital for Children & Women in Orlando, Fla.

Frohn completed her pediatric training at Le Bonheur Children’s Hospital in Memphis and is board-certified in general pediatrics.

She has enjoyed medical mission trips to India and several trips to Honduras.

She is married to Billy Frohn; they have five children.

Dr. Harriet L. Jones (1998) joined UMMC in 2011 as an associate professor in the Department of Medicine, where she was tasked with developing a clinical wound management program.

The Wound Management Services Clinic officially opened May 12, 2014 in a newly-remodeled clinical area located in the University Medical Pavilion.

Jones focuses her practice on treating patients with skin and soft-tissue wounds and infections, including, but not limited to, diabetic foot wounds, post-operative infections, as well as other difficult-to-heal wounds.

Dr. Stacey Gatlin Murray (1994) practices general pediatrics with Memphis Children’s Clinic, which she joined in 1997.

She graduated from the University of Mississippi in 1990 with a B.A. in biology. At UMMC, she received the Blair Batson Award for Excellence in Pediatrics.

Murray began her pediatric residency at the Arnold Palmer Hospital for Children and Women in Orlando,
Fla., and completed her pediatric training at Le Bonheur Children’s Medical Center in Memphis. Murray is board certified in general pediatrics. She is married to Billy Murray; they have five children. Murray has enjoyed medical mission trips to India and several trips to Honduras.

Dr. Danny L. Sanders (1998) of Tupelo is a member of the American Society of Breast Surgeons. Sanders, who has a special interest in breast cancer treatment, has an office in the Surgery Clinic of Tupelo. He is affiliated with the North Mississippi Medical Center.

2000s

Dr. Jennifer Hussey Garrett (2001) of Corinth, a refractive surgeon certified by the American Board of Ophthalmology, has been in private practice for nine years. She earned her B.S. degree in biochemistry and molecular biology from Mississippi State University. After earning her M.D., she completed her residency training in ophthalmology at UMMC. In the summer of 2005, Garrett decided to return to her hometown of Corinth to practice ophthalmology. In addition to performing Z-LASIK, LASIK, and PRK in her practice, she performs cataract surgery. She has two boys, ages 7 and 3.

Dr. Emily Vigour (2003) of New Orleans gave birth to Andrew Prentice King on Aug. 20, 2014. She works as a general pediatrician at Westside Clinics in Marrero, La. She and her husband Brian King also have an older son, Martin, age 2. A native of Winona, she graduated from Mount Holyoke College in South Hadley, Mass., before earning her M.D. at UMMC. Board certified by the American Academy of Pediatrics, she completed her pediatric residency through the Louisiana State University Health Sciences Center, where she worked at the Children’s Hospital of New Orleans, Charity Hospital and University Hospital.

Dr. Christine Reitano Cook (2004) of Glenn Allen, Va., has worked at St. Mary’s Hospital in Richmond, Va., for the past six years.

2010s

Dr. Jeremy Taylor (2012) of Madison will begin his endocrinology fellowship at UMMC in July 2015 after completing his internal medicine residency here. The Gulfport native is married to Dr. Charlotte Taylor (2014), a UMMC resident pursuing radiology. His hobbies include tennis, the Atlanta Braves, fantasy baseball and swimming.

Dr. Chasity Lynne Torrence (2012) of Jackson is in her third year of psychiatry residency at UMMC. After completing her fourth and final year of residency, she plans to practice general adult psychiatry in the Jackson area.
**In Memoriam**

**DR. JAMES EDWARD “JACK” ALDRIDGE** (1964) of Brandon died on Oct. 14, 2014 at age 75.

His career was a mix of cutting-edge firsts and old-fashioned remedies.

Aldridge was a member of Dr. James Hardy’s pioneering surgical team, which transplanted a chimpanzee heart into a human in 1964, the year he earned his M.D. at UMMC. With Dr. “Hap” Gee, Aldridge administered anesthesia.

But he also made house calls and would accept fruit and vegetables as payment from his patients. Devoted to the practice of urology, he once said, “Everyone needs a good plumber at some point.”

Following his residency at UMMC, Aldridge remained to complete a residency in urology and a fellowship in pathology. He also had a preceptorship at Ranchos Los Amigos National Rehabilitation Hospital in Downey, Calif.

While serving as assistant professor of surgery at UMMC and visiting teaching physician at University Hospital, he went into private practice in urology and was board-certified.

He joined the medical staff of Methodist Rehabilitation Center when it opened in 1975, specializing in the treatment of neurogenic bladder and working to improve the quality of life for patients with spinal cord injuries.

A member of the American Fertility Society, he worked with paralyzed males and their spouses to help them conceive using a procedure developed at the National Rehabilitation Hospital in Washington, D.C.

Aldridge served on the staffs of several Jackson-area hospitals, and was chief of surgery at St. Dominic Hospital, 1984-1986, and chief of urology, 1994-1995.

He served as a major in the Mississippi Army National Guard Medical Corps, a seaman in the United States Coast Guard and as a member of the United States Power Squadron, a boating-safety organization. He enjoyed boating, fishing, art and the study of languages, particularly German.

He also loved to read, especially books on religion, history philosophy, solar energy and more.

A man of faith, he was a deacon in his church and was recognized by the Southern Baptist Convention for his service as a missionary to Honduras.

After his retirement in 2001, Aldridge volunteered at Methodist Rehab and received the 2005 Good Will Volunteer of the Year Award.

In August of 2014, he joined his medical school classmates at a reunion ceremony in Jackson and received a commemorative medal.

He is survived by his wife of 49 years, Nancy Thomas Aldridge, a son, a daughter, four grandchildren and two brothers.

**DR. MYRON WILLIS LOCKEY** (1961) of Madison died Sept. 11, 2014; he was 82.

A native of Morehead City, N.C., Lockey became one of the first physical therapists in Mississippi before pursuing his medical degree and training a generation of head and neck surgeons in the state.

After World War II, his family moved from North Carolina to Pearl, where he graduated from high school in 1949, serving as class president and submitting the name of the school mascot, the Pirates.

As a prep student, he was a state and Amateur Athletic Union championship swimmer. At Northwestern Louisiana State University in Natchitoches, he was undefeated in collegiate competition.

After graduating in 1953, he attended the School of Physical Therapy at Charity Hospital in New Orleans and earned certification from the American Physical Therapy Association.

Lockey worked in Carville, La., at the National Leprosarium and in Mississippi at the Mississippi Crippled Children’s Hospital as a physical therapist before finishing pre-med courses in 1956 at Millsaps College.

Following graduation from UMMC, he did his residency training in general surgery and otolaryngology at the VA Medical Center, Southwestern Medical School in Dallas, Texas.

He returned to Jackson and became a clinical instructor at UMMC’s School of Medicine, where he filled teaching positions for the next 14 years and served as chair of the Otolaryngology Department until June 1980.

For 36 years, he also worked in private practice, holding staff memberships at a variety of Jackson-area hospitals. Lockey served as a leader or member of various professional organizations, including the American Academy of Otolaryngology and the Board of the American Cancer Society Mississippi Division.

He was associate editor, editor and, finally editor emeritus of the Journal of the Mississippi State Medical Association.

Outside of work, he savored the outdoors on his farm in Jasper County, where he spent time on his tractor. A former Scoutmaster who was active in his church, he also pursued hunting, swimming and a hobby as a ham radio operator.

After retiring, he returned to competitive swimming, contending in his age group and earning top 10 world rankings in three events. Competing in five FINA Masters World Championships in 2006, he was ranked second in the world by FINA in the 50-meter breaststroke.

Lockey is survived by Mary Jo Lockey, his wife of 56 years, three sons and daughters-in-law, six grandchildren, a brother, sister and sister-in-law.
Dr. Aaron Shirley
1933-2014

Dr. Aaron Shirley, the first African-American resident at UMMC and a Gandhi-like figure for many in the state, died on Nov. 27, 2014. He was 81.

A graduate of Lanier High School and Tougaloo College in Jackson and Nashville’s Meharry Medical School, the Gluckstadt native started a general practice in 1960 in Vicksburg, where he was barred from practicing medicine in the white-run hospitals.

In Jackson, Shirley had grown up in that same climate of separate facilities and water fountains for blacks and whites. “I didn’t dare drink white water,” he said in a 2013 interview.

In Vicksburg, he and his wife, educator Dr. Ollye Shirley, urged blacks to register to vote, in spite of poll taxes, literacy tests and bombings.

“People were frightened to death,” he said in that same interview. “I told them, ‘You just got to do it for your children. And for yourself.’”

In such an environment, he believed he had no chance of being accepted by the Medical Center as a resident in pediatrics — his first love. But, unable to fill a slot offered to him by the University of Oklahoma for another year, he applied at UMMC in 1965.

Dr. Blair Batson accepted him after the second interview and Shirley was put on call that same night.

In such an environment, he believed he had no chance of being accepted by the Medical Center as a resident in pediatrics — his first love. But, unable to fill a slot offered to him by the University of Oklahoma for another year, he applied at UMMC in 1965.

Dr. Blair Batson accepted him after the second interview and Shirley was put on call that same night.

In 1993, he received the MacArthur Fellowship, or “Genius Grant,” for his ground-breaking labors in rural and urban health care.

A year before his death, Shirley was asked where he would be if he had left Mississippi, or if Batson had not given him a chance.

“It occurred to me that it would have been cowardly to leave,” Shirley said. “I would have kind of disappeared into the sunset.”

His survivors include his wife and four children.
Salma Dawoud, a first-year student in the School of Medicine, has rolled up her sleeve for Dr. Joyce Olutade, medical director of UMMC’s Student/Employee Health Center, during UMMC’s Flu Blitz. This year for the first time, UMMC made influenza vaccination mandatory for all personnel to protect patients and staff.