In July 2009, Charles Bluestone (MD ’58), a pediatric otolaryngologist in the University of Pittsburgh School of Medicine, was promoted to Distinguished Professor, considered the highest honor the University can bestow upon an active professor. The appointment is the apex of his prolific and ongoing career, during which he has become world renowned for his research that has influenced the diagnosis and treatment of otitis media (middle ear disease). With Sylvan Stool, he founded the pediatric otolaryngology fellowship at Children’s Hospital of Pittsburgh of UPMC—the first otolaryngology subspecialty program to receive accreditation.

James A. Garrettson (MD ’65) is so good at balancing the professional and extracurricular that he had an award named after him. The MD, recreational pilot, and tireless community volunteer is now retired from active staff at Indiana Regional Medical Center, where he worked for 37 years. In his honor, the hospital established the James A. Garrettson MD Physician Excellence Award in December 2006. Among the award’s criteria: high quality patient care, vigorous community service, and commitment to professional development of self and others. Garrettson will devote his newfound “leisure” time to his community, making rounds as a driver for Meals On Wheels as well as the Citizens’ Ambulance Service. He has been doing both since the ’70s.

John Pacella (MD ’98, Res ’00) takes his work to heart. He researches coronary collateral blood vessels—for which he received the American Heart Association’s Claude R. Joyner MD Research Award this year. And the assistant professor of medicine at Pitt and member of the UPMC Cardiovascular Institute squeezes in his own cardio whenever possible. Last September, Pacella completed the IKEA and UPMC Urgent Care Montour Trail Half Marathon in one hour and 45 minutes. He credits his wearing days as a cardiologist-in-training for his physical fortitude. “Between getting into med school, then training to become a doctor, you learn to do things you never thought you could,” he says. Pacella left with more than an MD and a work ethic: He also met his wife, Charissa Pacella (MD ’98), now chief of emergency services at UPMC Presbyterian and assistant professor of emergency medicine at Pitt.

Jaya Aysola (MD ’00) is in the Department of Health Care Policy at Harvard after completing a Commonwealth Fund/Harvard University fellowship in minority health policy. Her move to Boston comes on the heels of an eye-opening stint as medical health director for the New Orleans Children’s Health Project, where she provided pediatric and adult care.

Too much income to qualify for medical assistance but not enough to afford insurance. It’s an all-too-common story, says Zane Gates (MD ’95). Day in and day out, Gates sees what the newspapers keep reminding us of: For the working poor, the current health care system just isn’t working.

Since 1999, Gates has headed Partnering for Health Services, a free clinic in his hometown of Altoona, Pa. “We’re taking care of 3,500 people on a million bucks a year,” says Gates. “And we’re giving them everything the insured have.” As of this spring, the clinic’s patients can buy a hospital-only insurance plan offering some inpatient care plus a wellness program for less than $100 a month.

Gates’ compassionate approach to health care is rooted in his upbringing. His mother, Gloria, would routinely take in and counsel at-risk youth in the Altoona housing projects where they lived. He further honed his vision during his residency, when he took time out to volunteer with Operation Safety Net, a program that has provided on-the-street care for Pittsburgh’s homeless since 1992.
George Huang 

Huang explains. His hope is that patients can now make more informed decisions. “The study gives them a timeline—if they’re going to recover, when they’re going to recover—instead of [a doctor] just saying, ‘It’ll get better; it’ll get better.’”

The majority of medical schools don’t teach students about orthopaedics until the third year, despite the prevalence of orthopaedic diagnoses in our aging population. That’s why Charles Day (Res ’01) recently implemented orthopaedics courses for first- and second-year students at Harvard Medical School, where he is associate professor in orthopaedic surgery and the director of the orthopaedic curriculum. He says his MBA from Pitt’s Katz Graduate School of Business (’02) helped him take a business-savvy approach to launching new classes by asking questions like, “How do you bring something into a curriculum that’s a new product? How do you bring a new product into the marketplace when the shelf is already full?”

A native New Yorker who earned a BA in philosophy and worked at several law firms before even taking his first premed course, Jacob Larkin (MD ’04) has strayed a bit from his arts and letters roots. Now he’s a maternal-fetal medicine fellow at Pitt and the recipient of a three-year, $300,000 award from the American Association of Obstetricians and Gynecologists Foundation and the Society for Maternal-Fetal Medicine. The award will fund his research into a protein, NDRG1, which he suspects could be involved in regulating the placenta’s response to low oxygen, or hypoxia. His wife, Allyson Larkin (MD ’04), is an allergy-immunology fellow at UPMC and a Pittsburgh native. Larkin says he’s glad his family no longer has to seek out “Philosopher Wanted” ads, now that he seems to have found his niche.

Brian Swoffoletto (Res ’06, Fel ’08) is big on personal preference. The assistant professor of emergency medicine recently led an HIV screening program that lets patients decide how they received their results (via mail, voice message, or e-mail), yielding a 98 percent follow-up rate for its first 400 subjects. (Usually, such studies report 70 percent awareness of other highly effective—yet reversible—approaches.) His next project, funded by the Emergency Medicine Foundation, will offer college-age patients admitted to the emergency department the opportunity to be screened for risky drinking behavior. Those who screen positive can choose from three follow-up programs (one of which includes a weekly text message questionnaire, complete with personalized feedback and motivational support).

Swoffoletto’s father was an engineer. “He always imbued in my brother and me a sense of wonder and discovery, and I pursued medicine as a natural extension of that,” says Swoffoletto. His brother, Matthew Swoffoletto (MD ’01, Res ’04, Fel ’09), is now a cardiologist in the VA Pittsburgh Healthcare System. Matthew’s wife, Jo-Anne Swoffoletto (Res ’07), is also at the VA; she’s a women’s health primary care specialist.

When the National Survey of Family Growth reported in 2002 that tubal sterilization accounted for 40 percent of contraceptive use among Black women—compared to 24 percent among White women—Pitt’s Sonya Borrero (Res ’04) was intrigued. The assistant professor of general internal medicine investigated the social factors driving this trend, hypothesizing that insurance-coverage issues and provider recommendations might be steering African American women toward the procedure. Borrero and her colleagues were relieved to find this was not the case. Rather, the contributing factors were a generally higher rate of unintended pregnancies in non-sterilized Black women; positive attitudes about sterilization; and less awareness of other highly effective—yet reversible—methods of contraception.

—Keith Gillogly and Ben Korman
Retiring from a long career in medicine can leave some feeling restless for a new “all-consuming monomania,” as Joseph Sapira (MD ’61, Fel ’65, Res ’66) puts it. For Sapira, the answer was homebrewing. “Never made a bad batch of beer,” he says. When he became diabetic, he started making his own wine instead. The process requires meticulous reading and study, which Sapira says is no stranger to thanks to his medical background. His papers on internal medicine, its subspecialties, psychiatry, and psychosomatic medicine have been published in all the major journals. He served as president of the American Psychosomatic Society in 1991. He has worked as a visiting professor at more than 60 medical schools in the United States, as well as some in Canada and Japan. He spent much of the 1990s teaching at large hospitals in cities throughout Japan, as well as smaller hospitals in Okinawa and other islands. Sapira’s Art and Science of Bedside Diagnosis (1990) has been called a “masterpiece.”

As chief of pediatric nephrology at the University of Florida, George Richard (MD ’61) established the country’s first statewide pediatric kidney program in 1973. It began with centers in Gainesville and Miami; there are now four centers and 15 clinics throughout the state. As head of the program, Richard helped train about 22 pediatric nephrologists.

Faculty member Edward Saitz drove Richard and of surgery at that city’s St. Luke’s Hospital. Askin was quite involved in the 1961 Scope & Scalpel production, A Stitch in Time, and fondly remembering singing in it. He struggles for a moment to remember some of the lyrics. Then, a flash of recall: With his hand inside his coat, Napoleon looks like a rube, he sings. Clearly he was emptying his ileostomy tube. Askin retired at age 69. He sings in the Marin Men’s Chorus, farms fruits and vegetables on three acres, and golfs in his free time.

Ronald Amalong (MD ’61) recalls a favorite prank from his Pitt days: Paging “Dr. Roscope…. Dr. Mike Roscope” over the school’s PA.

Amlong specialized in ophthalmology and began working abroad when he answered a medical-newspaper ad for a job in Ecuador. He went on to cofound and direct Vision Health International in 1984. The organization of volunteer medical experts still takes two trips a year, providing cataract-removal procedures and eyeglasses to patients in Costa Rica, Nicaragua, and Poland, among other countries.

Recently, Martin Mihm (MD ’61) has also made contributions to global health. He established a free clinic for children with vascular anomalies in Ho Chi Minh City, Vietnam. By the clinic’s first anniversary this past January, more than 2,500 children had been treated. He also helped found clinics in Greece and Spain.

In 1966, while teaching at Harvard Medical School, Mihm cofounded the world’s first multidisciplinary melanoma clinic. He later became chief of dermatopathology at Harvard in 1976. This year, he assumed directorship of the melanoma program at Brigham and Women’s Hospital and also helps direct the program at the Dana-Farber Cancer Institute.

At 76, Mihm continues to study at Harvard the prognosis of malignant melanoma.

And what of retirement? “If God gives me the ability,” he says, “I will work until I die. I find medicine still very stimulating.” —Keith Gillogly

**THE WAY WE ARE**

**CLASS OF ’61**

**WILLIAM B. MILLER**

**NOV. 9, 1922 –APRIL 2, 2010**

After receiving his bachelor’s degree from Pitt, William Miller (MD ’48) applied to the University of Pittsburgh School of Medicine and was accepted, but with a one-year deferment. (Pitt only accepted one African American a year in those days.) He was then drafted. As the family story goes, while he was aboard a ship en route to Germany, Miller’s captain reviewed his file, saw his admission status, and arranged an honorable discharge. “You’re not going to war,” he said. “You’re going to medical school.”

Miller, who was the School of Medicine’s oldest living African American alumnus, died in April. He was 87.

Miller loved the city and his alma mater. (His three sons are Pitt medical and dental school alumi.) During his third year in medical school, William Miller was awarded the James D. Heard prize, which is awarded to the student with the highest performance in internal medicine. Following his internship in St. Louis, Mo., he returned to Pittsburgh, completed his residency at the VA, and served the Hill District as a general practitioner for 55 years.

From 1968 until he was well into his 80s, Miller was a physician and later medical director for Tadiso, a drug rehabilitation center on the North Side. He was known for his gentle, caring nature. Among his many honors was the 2006 Nyswander/Dole Award, presented by the American Association for the Treatment of Opioid Dependence.

—KG

**IN MEMORIAM**

**'40s**

**WILLIAM MACLACHLAN**

MD ’48

APRIL 30, 2010

**LOUIS “SKIP” CHERRY**

MD ’53

MAY 7, 2010

**MORTON GOLDSTEIN**

MD ’63

MAY 16, 2010

**WILLIAM PARSONS**

MD ’48

JUNE 16, 2010

**CHARLES WELLS**

MD ’59

APRIL 15, 2010

**DONALD KILPELA**

MD ’74, Res ’77

JUNE 23, 2010

**'50s**

**ARTHUR KELLEY**

MD ’50

JUNE 1, 2010

**BILL SHAW**

MD ’62

JUNE 2, 2010

**'60s**

**'70s**
Gerald Levey remembers the days of house calls fondly. Years before he served as chair of medicine at the University of Pittsburgh, Levey was a patient of a doctor named Rosenstein, who made regular visits to Levey’s family home in Jersey City, N.J. Rosenstein treated viruses and stitched up broken noses at the kitchen table.

“I never forgot the kind of doctor he was,” recalls Levey, “and, going forward, I tried to conduct myself as he would.”

When Levey left his post as Howard Hughes Medical Institute investigator at the University of Miami in 1979 for Pitt, he brought his longtime family doctor’s congenial approach, even as he spearheaded an organizational and financial overhaul.

He also brought a sense of obligation, he says, to rebuild the department to what the famed former Pitt chair Jack Myers would have demanded. “Jack was one of the great figures in American medicine in the 20th century. We quickly became friends since his office was a short walk down the hall from mine on the ninth floor of Scaife Hall, and I had much to learn.” Levey started by implementing a long-overdue physician practice plan. He then brought in a new cadre of distinguished faculty. Within the first three years, the department, which had been struggling financially, was back in the black. By 1991, when Levey left for a position as Merck & Co.’s senior vice president for medical and scientific affairs, he had reduced the department’s reliance on University funds and built a research powerhouse.

As chair, he would visit every division in the department—academic house calls, if you will—to answer questions and update faculty. He cut back on work-related travel so he could focus on internal issues; that was much appreciated by his wife, Barbara Levey, an MD and former associate dean and director of admissions at Pitt med who is now assistant vice chancellor of biomedical affairs at UCLA.

Levey says a memento from his time at Pitt still hangs on his wall: “Jack [Myers] walked into my office one day and gave me this picture on which he had written, ‘To Jerry in great respect, Jack Myers.’ That is one of the most special gifts he could have ever given to me. I felt that I had achieved one of the major goals I had set out to accomplish.”

Levey eventually became dean of the David Geffen School of Medicine and vice chancellor of medical sciences at UCLA, where he built on his Pitt legacy of leadership, overseeing the construction of the Ronald Reagan UCLA Medical Center and five research buildings, as well as a program that encouraged new physicians to become comfortable with laboratory research.

Earlier this year, Levey’s career entered new and unfamiliar territory: freedom. Stepping down as dean and vice chancellor of medical sciences at UCLA in January (remaining on the full-time faculty), Levey moved on from the practice of leadership to its theory, planning a book and developing a new course on the topic. He’s quick to cite Pitt’s former senior vice chancellor for health sciences, Thomas Detre, as a case study.

“Figuring how much I’ve learned since I left Pitt—most of it was inspired by Detre,” says Levey, “I learned from those around me.”

On the subject of his semiretirement, he quotes an old UCLA colleague: “I deserve just to be able to do what I want, when I want to do it.”