CLASS NOTES

'50s As a teenager inRunWithnaw, Paul Pifer (MD ’52) worked as a soda jerk in a drug store. The pharmacist encouraged Pifer to pursue a career in pharmacy. Pifer obtained an apprentice’s license and began working, but soon he left Pennsylvania to serve in the U.S. Army Air Corps as a radio engineer and gunner in World War II. He flew more than two dozen missions with his crew, and they were shot down several times flying over enemy territory. Luckily, they were rescued each time. When Pifer returned after the war, he entered Pitt as an undergraduate, eventually deciding that he preferred medicine to pharmacy. Pifer had a long career as a private practice OB/GYN in Ohio, Pennsylvania, and Louisiana. He retired in 1994, and moved to Pensacola, Fla., where he is a consultant for the Naval Hospital.

'70s As an intern at Children’s Hospital of Pittsburgh, Martha Turner (Pediatric Intern ’73–’74) and her colleagues watched helplessly as the wards filled with children suffering from brain swelling and delusions. The children had Reye’s syndrome, and no one knew how to treat it or what the cause was (a bad reaction to the flu virus and aspirin). Turner says she enjoyed her time at Pitt, but her experience with the Reye’s epidemic made her decide that she didn’t want to become a pediatrician after all. Instead, she pursued psychiatry. She tailored her practice to treat alcohol and drug addiction, and in the early 1980s, an alcohol-addicted patient shocked Turner by revealing she had another addiction—sex. Sex addictions take five to eight years to fully treat, she says, and it’s challenging to do so. With substance abuse, the treatment includes avoiding the substances completely. Lots of people live without alcohol or drugs. But many people don’t want to live without sex, so Turner and others in the field struggle to teach the principles of healthy sexual habits.

A. James Giannini (MD ’74) recalls the group of young people who would sneak over to the Highland Park neighborhood of Pittsburgh to pick psilocybin mushrooms. No, Giannini wasn’t part of that group. He’s referring to a band of runaway adolescents he met as a student at Pitt when he—with Robert Latelle, who was a clinical associate professor of psychiatry—helped start a home for troubled youth. Because of his experience with these runaway who used drugs, Giannini developed “a big love” for treating addiction. The psychiatrist is now senior physician and director of substance abuse services at a small drug abuse detoxification facility in Middle Georgia. He also does outpatient rehab at two other centers. For himself, Giannini finds science fiction has great therapeutic value.

G. Michael Deeb intended to be a pro baseball player. But the summer before his freshman year at Pitt, he had surgery on his arm, ending his career. So Deeb (MD ’75, Surgery Intern ’75–’76, General Surgery Resident ’76–’80, Cardiac Surgery Resident ’80–’82), who loved biochemistry, decided to pursue endocrinology. When he was an intern with Dave Steed (MD ’75, now a professor of surgery at Pitt), Steed recommended he do a surgery rotation with Hank Bahnsen. Again, Deeb’s career path changed, but that was the last time. He is the newly minted Herb Sloan Chair of Cardiac Surgery at the University of Michigan, Ann Arbor. For the past five years he has been researching Marfan syndrome, a genetic disease that weakens connective tissues in the cardiovascular system. Those with the disease are more susceptible to aneurysms. He found that beta-blockers decrease the chance that the aneurysm will burst.

Dartmouth Medical School changed its program from four years to three when Daniel Walsh (MD ’76) was a sophomore there. Knowing that he wanted the clinical experience accompanying a longer program, Walsh scrambled to find a great med school to resume his training. He found Pitt. He recalls the gratitude he felt when the school “took a total stranger under its wing.” He was impressed with the unexpected kindness and acceptance of his fellow classmates and the caliber of the faculty, especially in the surgery department. Walsh is now a consulting surgeon at Veterans Administration Hospital and Central Vermont Hospital, in White River. He’s also a professor and vice chair of surgery at Dartmouth Medical School. He says the reason he teaches and acts as an adviser is because of Charles Watson, Hank Bahnsen, and Charles Cobb; these men, he
SARAH SPRINGER | FLOPPY LITTLE PEOPLE

Exeptic parents await the birth of their child with a mixture of excitement, awe, and anxiety. Adoptive parents experience all of these feelings, too, but their anxiety is intensified by the question, Will I ever get this child I want? The wait can take years, even after the months of details are addressed: seemingly endless forms to be completed, home studies from social workers, even FBI fingerprinting. As pediatrician Sarah Springer (MD ’88) puts it, “The pregnancy is in the paperwork.”

Ten years ago, Springer decided to focus her Pittsburgh practice on adoption medicine, a specialty that doesn’t involve board certification but is a growing field nonetheless. Adoption medicine combines pediatrics, psychiatry, and social work to address issues facing adoptive parents and their children. (Springer adopted her own two children.)

Before an adoption, Springer helps families assess their own abilities to meet a child’s needs. It’s not a screening process, she asserts. Yet through this process, Springer can prepare parents-to-be for ailments that may afflict their new son or daughter.

In cases of international adoption, few of the children are perfectly healthy from the start. These patients include children suffering from diseases typical of their country of origin; children with congenital health problems (which may have led to the biological parents’ choice to place the child for adoption); and children with psychological struggles brought about by conditions experienced early in life.

“Most kids do remarkably well when they get to their new families,” Springer says. She believes that with a loving family, children can do well despite many obstacles.

Watching her patients thrive over the years has given Springer great pleasure. “These scrawny, skinny, floppy little people just blossom. It happens all the time,” she says with a smile. “It’s so fun to watch.” —Jen Dionisio
reflecting on his days as a med student, Terry Puot (MD ’80) opines that the Class of ’80 was closer than most. “We broke out of the competition mode that you need to get into med school,” he says. The cooperation and camaraderie karma he was blessed with at Pitt has followed him into his career as a physician and medical director of Hillside Rehabilitation Hospital in Warren, Ohio. He works hand in hand with other doctors and therapists as they attempt to improve or restore cognition in patients suffering from injuries and degenerative diseases. He remembers one irritation from his Pitt med days: having to draw in Nikolaj’s Cauna’s gross anatomy class. “I was a terrible artist,” he says. Now he laughs about how helpful the class was. “A week doesn’t go by that I don’t draw what’s happening for a patient’s family,” he says. “Nothing explains things quite like it.”

Jon Watchko (MD ’80) also remembers Cauna fondly, but for reasons not so academic. Watchko is still grateful that the professor let him and some fellow students take an afternoon off to go to a Pirates opener. He believes that the closeness the Class of ’80 enjoyed improved their studies. “If you enjoy the people you’re working with, you do better,” he says. Watchko is currently a senior scientist at Magee-Womens Research Institute and Pitt professor of neonatology; of pediatrics; and of obstetrics, gynecology, and reproduction sciences. He’s pursuing work on the mechanisms of unconjugated bilirubin transport in the central nervous system as a means of decreasing bilirubin-induced brain injury in newborns. Watchko chose the field of neonatology because his patients have a lifetime to look forward to after treatment. Carl Gartner, professor of pediatrics and “a real gem,” also had a major impact on the direction he took in his career.

For Raya Armaly (MD ’80), one of her biggest influences in med school was surgeon Norman Wolmark (Surgery Res ’76): “It was fascinating to see his thought processes.” Today, the surgical aspect of her work as an ophthalmologist is her favorite part of the job. She has a private practice at the Greater Baltimore Medical Center and is an instructor at Johns Hopkins and the University of Maryland schools of medicine. She specializes in glaucoma, which she calls “the internal medicine of ophthalmology.” Her husband is Charles Harrison (MD ’82).

Andrea Draisen (MD ’80) still laughs about her fellow classmates singing and dancing in their Scope and Scalpel production, Saturday Night In Vivo. She recounted the favorite lines from the “Dr. Rogers’ Neighborhood” skit—Children, say prophylactic! Speaking of children, Draisen decided to go into pediatrics after becoming disillusioned with her adult patients. She eventually tired of treating chronic illnesses caused by lifestyle choices. Pediatrics and her private practice in Anderson, S.C., are more immediately satisfying, she says. The pediatrician Lois Pounds Oliver (MD ’65) influenced her as a med student at Pitt. She remembers Pounds Oliver as both a compassionate doctor who was encouraging to students and as a role model who happily balanced a career and a marriage—exactly what Draisen is doing now. If you see Draisen at the reunion, remind her of the lyrics to the song for the Anus Equinus award. She’s forgotten, though she remembers the prof who won the award quite clearly. —JD
ABRAHAM TWERSKI: ON WEARING THE CLOAK
BY CHUCK STARESINIC

A
braham Twerski set out to be a rabbi like his father—a daunting challenge, given his father’s considerable charisma and reputation among congregants. “People flocked to him for counseling,” says Twerski, a man of small stature and large presence. His beard obscures the top half of his necktie, and a gray suit hangs loosely on his slight frame. He reclines easily in his chair, stretches his legs, and rests his elbows on the armrests as he speaks.

He was ordained at 21, then began to assist his father, but he felt like a functionary who performed bar mitzvahs, weddings, and funerals. In those postwar days, professional analysts were becoming the norm, and Twerski realized that he was never going to be sought out like his father. “That’s not where the cloak is anymore,” he says now. “The cloak of counseling is in psychiatry and psychology.”

So Twerski became a psychiatrist. He attended medical school at Marquette University in Milwaukee, graduated in 1959, and came to the Western Psychiatric Institute and Clinic for residency. After a few years in Pittsburgh, Twerski became the clinical director of the Department of Psychiatry in St. Francis Hospital—an impossible position,” he says. “Three hundred of the 750 beds were neuropyschiatric.” He stayed 20 years, during which time he also became an assistant professor in Pitt’s School of Medicine.

St. Francis had a large alcoholism treatment program, which consisted of a few days of detoxification and an in-hospital AA meeting. Twerski realized that, after detox, alcoholics needed guidance on staying sober. But where would they get it? No such facility existed in the entire tri-state area, and few could be found anywhere. He enlisted community support, and, in 1972, founded a 100-bed inpatient facility, Gateway Rehabilitation Center, in Aliquippa. Gateway has since introduced outpatient clinics and youth and prison services. On any given day, its staff is in contact with 1,800 people in need of help with chemical dependency. It’s not unusual for strangers to recognize Twerski on the street and thank him for the help they’ve received at Gateway.

As a columnist, speaker, and author of dozens of books, Twerski is an authority on chemical dependency and recovery. But he has achieved true cult hero status in Jewish communities for daring to address taboo subjects. “There was a myth that Jews didn’t drink,” Twerski says, offering an example. He has helped to dismantle that myth so that alcoholism can be addressed openly. “Then I undertook the problem of spousal abuse in the Jewish community—now that was a no-no! Jewish husbands are not violent. They are not butchers. They are not abusers” he declares with mock indignation. “Well there was another myth that had to go.

“I got a lot of opposition because of that book [The Shame Borne in Silence], to the point where some Jewish bookstores, although they display all of my other books, they will not display it. If you ask for it, you’ll get it from under the counter.”

He left his father’s congregation to pursue the work he’d always wanted to do as a rabbi. Twerski hesitates to say that psychiatry is the most spiritual of all medical specialties, but he believes it could be.

“People have confused spirituality with religion, and the doctrine is that the psychotherapist does not get involved in the patient’s religion in any way. So they scoot around all religious issues, and at the same point they avoid dealing with the spiritual issues that are not of a religious nature. Unfortunately, they are missing the point because many patients, even if they are not religious, are missing a spiritual goal in life.”

Twerski believes this lack of purpose is at the root of most unhappiness. Ask him about this, and he pounces.

“I think spirituality is fulfilled when one looks for an ultimate purpose.” He says that as long as it’s not “animalistic,” it matters not what your purpose might be—caring for children, fighting famine, saving redwoods—“even if you don’t find anything. So long as you’re looking for it!”