CLASS NOTES

’50s Edwin Azen (MD ’55) has been on the medical faculty at the University of Wisconsin, Madison, for quite some time, but he has been a lifelong student. At Pitt, Frank Dixon, the longtime chair of pathology, stimulated Azen’s desire to uncover secrets in the lab during summer research. Azen followed that interest to an internal medicine residency and a hematology fellowship at Wisconsin. He cared for patients with blood abnormalities for many years. But in the early 1980s, he took a sabbatical to work in the lab of renowned geneticist Oliver Smithies and learn as much as he could about molecular genetics. Azen turned that midcareer switch into a slew of important publications on the genetics of salivary proteins, not to mention a 10-year National Institutes of Health MERIT award, which he received in 1991. In 2001, he became a professor emeritus of medicine and medical genetics at Wisconsin.

’60s Medical school in the 1960s had a more formal atmosphere than it does today. So at the end of a lecture, Donald Nevins (MD ’67) didn’t expect his classmates to applaud suddenly and effusively. But the speaker was Arthur Mirsky, Pitt professor of psychiatry and renowned expert in psychosomatic illness, and that’s what they did. “This had never happened before or after,” Nevins says, and that spontaneous response to a teacher, along with the example his professors provided as compassionate clinicians, has stuck with him. Nevins is now a clinical professor of psychiatry at the University of California, San Francisco. He was recently elected a fellow of the American College of Psychoanalysts.

’70s Charles Whitaker III (MD ’70) was president of the Parkersburg Academy of Medicine in 2003, malpractice tort reform was a big issue in West Virginia. Premiums were so high that doctors were leaving the state. For Whitaker, who won his state’s American Academy of Pediatrics Pediatrician of the Year Award in 2004, it wasn’t a pocketbook issue; it was a patient care issue. So he lobbied. He took a busload of medical professionals to Charleston. With physicians from all over the state, he spoke out, wrote letters, met with representatives. The reforms passed, and premiums are inching back down.

Most med students interviewing for residencies don’t get much time with the chair of the department. But Barry Hirsch (Otolaryngology Resident ’79) remembers walking around campus with Eugene Myers, then head of the Department of Otolaryngology. Over coffee at a ’60s-style counter, Myers related his ideas and vision for the department he would lead for years to come. The experience sold Hirsch on Myers and Pitt, where, apart from a brief stint at Georgetown University and a fellowship in Zurich, he has remained ever since. As an associate professor of otolaryngology, he specializes in neurotology, the neurological study of the ear. Despite the seemingly relaxed interview, Hirsch fondly remembers it as a formal cup of coffee: “We held our pinkies up,” he says.

John Sassano was between patients and pressed for time when an unexpected call came from Pittsburgh—a Pitt Med writer asking him to reminisce about working with Tom Starzl. Sassano (Anesthesiology Resident ’80) grew quiet and contemplative. “I just get speechless when I think about the days that I worked with him. I miss them. They were

A FAMILY AFFAIR

TAKE TWO BERGS AND CALL US IN THE MORNING

Debra Berg’s (MD ’85) Thanksgiving dinner is not for the faint of heart. Hers is a family of 17 doctors, 13 of whom graduated from the University of Pittsburgh School of Medicine. Not surprisingly, medicine is a popular topic of conversation. Napkin on the lap, fork perched over the turkey, a guest is likely to be a captive audience for Berg’s father, George Berg (MD ’55). The urologist has been known to offer riveting (and digestively challenging) descriptions of the kidneys he sees in surgery, from the simply diseased to those that have declined into a “decayed mess.” Berg’s School of Medicine pedigree starts with her maternal grandfather, Albert Berkowitz (MD ’24), and his brother-in-law Isadore Lichter (MD ’28).

She recalls that her grandfather, who played piano for silent film screenings to pay his way through med school, was “an idol” to his sons (who truncated the family name), Myles Berk (MD ’53) and Robert Berk (MD ’55, winner of Pitt’s 1986 Hench Award). Berkowitz, who practiced on the Northside, sometimes operated on a barter system with his patients, accepting chickens or vegetables as payment.

Debra Berg’s father, George Berg (MD ’55), married into the Berk family after meeting the Berk brothers while in med school. Robert Berk introduced George Berg to his sister, Betty, Berg’s future wife. Two of their children would go on to graduate from
Pitt’s School of Medicine: Berg and her brother James (MD ’86). Other familial Pitt grads include cousins David Benjamin (MD ’74), David Berk (MD ’78), Larry Berk (MD ’88), William Lichter (MD ’42), David Solomon (MD ’58), and Ronald Wasserman (MD ’69).

A warning to potential Thanksgiving guests: A thorough discussion of bird flu is sure to come up at this year’s dinner.

Debra Berg serves as medical director of the Bioterrorism Hospital Preparedness Program for the New York City Department of Health and Mental Hygiene. She plans and coordinates the city’s emergency response to major public health threats. With her colleagues, she’s preparing for a potential pandemic influenza. Last fall her program sponsored a citywide tabletop exercise with nearly 300 participants to build a strategy for identifying, quarantining, and treating infected patients in the event of an outbreak. —Jaclyn Madden

James Bradley is head physician for the Steelers.

Most people would choose Hawaii over Detroit. James Bradley (Orthopaedic Resident ’87) preferred the latter. Bradley is head physician for the Pittsburgh Steelers—in case you didn’t hear, that team earned a trip to Detroit for Super Bowl XL by winning the AFC Championship Game. (The physician for the losing team got the consolation prize of working the Pro Bowl in Honolulu.) Outside his Steelers duties, Bradley is a Pitt clinical associate professor of orthopaedics, conducting research on the success rate of arthroscopic surgery for instability in athletes’ shoulders. Quarterbacks and baseball pitchers alike sustain repetitive small traumas to their shoulders, which can stretch ligaments. Bradley is working to find less invasive surgical options, helping injured athletes return to their sports quickly.

‘80s Twenty years ago, there was only a four-hour window from the time a cornea became available to perform a corneal transplant. Jean Harwick (Ophthalmology Fellow ’84–’85) would scrub in at midnight or later. Now an ophthalmologist at West Penn Hospital in Pittsburgh, Harwick dabbles in another of her passions, art history. She felt some professional pride seeing Monet’s water lily series at a Paris exhibition. Monet went from bright greens to muddier browns as he developed cataracts; the work became clear and colorful again after his removal surgery.

‘90s A mother rushes through the doors of an urgent care clinic in California, carrying her child. The girl is wheezing—she can’t speak, and the mother speaks only Spanish. Lisa Roberts (MD ’98) and a team of nurses deliver oxygen, albuterol, and epinephrine to open the girl’s airway and calm the angry red hives on her skin. The mother reveals her daughter is allergic to penicillin and had been prescribed amoxicillin. Roberts, who majored in Spanish at the University of Virginia, explains how to inform her doctor of the allergies. After the mother and child leave, Roberts won’t ever see them again. She worked in urgent care clinics for a year after her Stanford residency but left the West Coast seeking greater continuity of care with her patients. She has found it in northeastern Atlanta, as a general pediatrician.

‘00s A newborn’s trachea is only 7 millimeters in diameter; even the smallest obstruction can compromise her ability to breathe. If, in her airway, she develops a hemangioma—a nonmalignant tumor that often grows for the first year of life, then shrinks on its own—doctors have traditionally installed a tube in a hole in the windpipe and neck and waited it out. But having the tube in place can come with its own complications, including infection. So David Mandell (Pediatric Otolaryngology Fellow ’03) began performing open excisions of these hemangiomas—a first at Children’s Hospital of Pittsburgh. While all have been successful, he doubts that this treatment will become standard; babies are kept asleep in the ICU for a week afterwards. Mandell, a Pitt assistant professor of otolaryngology, credits excellent anesthesiologists and postoperative care for making the treatment feasible at Children’s.

The 6.6-magnitude earthquake may have struck in December 2003, but its devastating effects are still felt in Kerman, a region in southeastern Iran. Ali Sajjadian (Plastic and Reconstructive Surgery Fellow ’03) returns regularly to his native country to perform reconstructive surgery on those injured in the quake, as well as on people with congenital malformations. He also helps doctors there through lectures, donated books, and videotapes. In addition to these projects, Sajjadian, an assistant professor of plastic surgery at Pitt, codirects UPMC’s aesthetic plastic surgery center, where he specializes in rhinoplasty.

—Sydney Bergman and Chuck Staresinic
or a couple of days in February, it was as though the University of Pittsburgh had established a satellite campus in a place where folks never have to scrape ice from their windshields or shovel the walk. Jack Tomley, who was on the host committee for Pitt's first Winter Academy in Naples, Fla., says Pitt grads came from as far away as northern Florida and points farther up the East Coast to attend the program. (Tomley has a seasonal residence nearby.)

The weekend-long event was open to all Pitt graduates and friends (175 of whom attended). It featured presentations by some of Pitt's most accomplished scientists from the schools of the health sciences.

Loren Rosenbach (M D '54), whose own class is famously cohesive, got a lot out of mingling with other health sciences grads. The location of the Academy wasn't bad either. (It may be home, but Pittsburgh in February can't compete with the outstanding climate and atmosphere of the Gulf Coast, he points out.) Tomley calls himself “90 percent retired.” The thing he misses most about running his own pediatric practice is the one-on-one time with patients. With the infants and toddlers, he learned to take his time and put them at ease, using the stethoscope on himself and the parent before touching the child. He gladly does an entire exam with the child never leaving her mother's arms. For the older kids, he performed magic tricks, often pulling coins out of their ears (no otoscope required).

Walter Telesz (M D '65) says that he would love to see his future class reunions achieve the attendance he saw at the Winter Academy. The general surgeon, who started his own practice from scratch in 1970 near Canton, Ohio, recently retired. He probably would have stuck around his practice longer but for a near-fatal episode to which he attributes his 90 percent retirement. The thing he misses most about running his own pediatric practice is the one-on-one time with patients. With the infants and toddlers, he learned to take his time and put them at ease, using the stethoscope on himself and the parent before touching the child. He gladly does an entire exam with the child never leaving her mother's arms. For the older kids, he performed magic tricks, often pulling coins out of their ears (no otoscope required).

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When Nicholas Barbaro (MD '79) was a student at Penn Hills High School, he decided that he needed to begin preparing himself for some sort of career in medicine. So he wrote a letter. “I’m not even sure where I mailed it,” says Barbaro, now a professor of neurological surgery at the University of California, San Francisco (UCSF). “It was one of those things like ‘Santa Claus, North Pole.’ I sent it to the medical center.”

He must have written something about surgery, because he got a note back from a Pitt surgical resident named Marshall Webster (Res ‘70), who invited him down for lunch and a little tour of Presbyterian University Hospital. There was a dollar or two in the envelope for bus fare. (Barbaro says he got a ride to the hospital and pocketed the cash.) Webster, who is now the Mark M. Ravitch Professor of Surgery at Pitt, took him up to the dome, where they looked down on cardiac surgery in process. This was the first of many small acts of encouragement that Barbaro encountered at Pitt, where he returned as a med student in 1975.

He did research with Dave Tomko, who retired as a research associate professor of physiology. Peter Jannetta, then chair of neurological surgery, gave enthralling lectures on brain surgery complete with films, which were more of a novelty in the classroom then. The cumulative result: Barbaro graduated with a significant boost to his new career in academic neurological surgery. He’s now the principal investigator on a National Institutes of Health grant exploring the use of noninvasive techniques to perform brain surgery on epilepsy patients.

Nearly a million Americans suffer from epilepsy that originates with abnormalities in the temporal lobe. Many control their seizures with medication, but some patients don’t respond to the drugs. For several decades, the standard treatment for them has been craniotomy and lobectomy—open up the skull and remove the abnormal tissue from the brain. As brain surgery goes, it’s a relatively safe and effective treatment.

Barbaro was inspired by a visit to France, where a colleague was having success treating temporal lobe epilepsy with the Gamma Knife, which uses low-dosage gamma radiation from some 200 different sources to target one spot in the brain.

He put together a clinical trial of 30 patients—the first in the United States—to establish the most effective dosage. Three other centers, including Pitt, participated in the trial. Douglas Kondziolka (Res ’91, Fel ’92), Pitt’s Peter J. Jannetta Professor of Neurological Surgery and Radiation Oncology, is one of Barbaro’s coinvestigators. In the next phase, they’ll randomly assign 200 patients to craniotomy or radiosurgery, as the Gamma Knife procedure is called. The goal is to see whether radiosurgery is equally effective.

Clearing the way for a noninvasive approach to treating otherwise intractable temporal lobe epilepsy would be a major advance, especially for patients who can’t undergo the open procedure because of bleeding disorders or heart conditions. It would create an option that forgoes a long hospital stay or risk of infection.

There are tradeoffs. For example, the open procedure eliminates seizures on the day of the surgery while radiosurgery takes an additional 12 to 15 months before the radiation has had its full effect. Yet, given the choice, most patients would opt for the noninvasive approach, Barbaro believes.

Barbaro now has his own hand in the next generation of neurosurgeons. He directs UCSF’s neurosurgical residency program, and interested students seek him out early and often. The program has just accepted Pitt’s Brian Jian (MD/PhD Class of ’06) as a neurological surgery resident.