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Atoll, nine degrees south of the equator. There he was initially assigned to a hospital where he treated many South Pacific during WWII, Bob Eisler (MD ’55) if he would fill in as the psychiatrist prison that had a wooden box filled with capsules and inmates used to get care. A colleague told him about a last 23 years. Eisler has heard horror stories of how vacation ended after two weeks, but Eisler’s tenure has at Mercer County Prison while he was gone. His friend’s (MD ’50) recently retired. He is splitting his time between Pennsylvania and Florida golf courses.

As a medical corps officer in the South Pacific during WWII, Jack Brandt (MD ’43) was initially assigned to a hospital where he treated many soldiers who were obviously suffering—men confined to body casts or with missing limbs. The army sent Brandt to the island of New Caledonia then to Penrhyn Atoll, nine degrees south of the equator. There he was responsible for taking care of 11 men, all of whom remained healthy. It was great for the men, but it prevented Brandt from getting the intense training he thought he would get as an army doctor. When he returned to Pittsburgh, he applied for a residency at Children’s Hospital of Pittsburgh, but all the positions were full. The Eye and Ear Institute had an opening, so he took an ophthalmology residency. A fluke became the best decision of his life. After having a private ophthalmology practice for the past 53 years, Brandt, who lived in Lock Haven, Pa., for the duration of his career, recently retired. He is splitting his time between Pennsylvania and Florida golf courses.

A friend leaving for vacation asked Bob Eisler (MD ’55) if he would fill in as the psychiatrist at Mercer County Prison while he was gone. His friend’s vacation ended after two weeks, but Eisler’s tenure has lasted 23 years. Eisler has heard horror stories of how inmates used to get care. A colleague told him about a prison that had a wooden box filled with capsules and pills. When his colleague asked the guard what the box was, the guard replied it was medicine; if a prisoner was ill, the guards dispensed medication—almost at random. Fortunately, conditions like these have changed, yet there are still challenges in giving care. Eisler sits on a statewide committee to determine whether there is adequate communication between county jails and state prisons to ensure proper continuity of care.

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of a translator. Zelicoff concluded that the woman, a scientist working on a fishing vessel, contracted smallpox through the air when her ship sailed 40 miles downwind of Vozrozhdeniye Island. Located in the Aral Sea between present-day Kazakhstan and Uzbekistan, Vozrozhdeniye was a Soviet biological warfare testing site during the Cold War.

Zelicoff presented his findings to the National Academy of Sciences in June 2002, sparking a heated debate among scientists and health officials: Should Americans be vaccinated against smallpox? Zelicoff warns that if—as evidence from the 1971 outbreak suggests—smallpox can be contracted through the air over long distances, a terrorist attack using the disease as a weapon could be devastating. However, there is also a one or two in one million chance that a person who receives the vaccine will die from it, according to the Centers for Disease Control and Prevention. Some scientists believe that Zelicoff’s position is alarmist. His retort:

“If you believe that in the next 30 years there is at least a 1 percent chance that a terrorist will use smallpox to attack us, then the only rational strategy is to vaccinate everyone now.”

p.s. Can you recognize the people in the yearbook photo above? Let us in on it at medmag@pitt.edu.
When Peter Safar was diagnosed with advanced cancer at age 78 last year, he neither reduced his workload nor took a vacation. “Even as recently as January,” says his wife, Eva Safar, “he was often in pain, but he was determined to put in one more grant application.”

Safar’s accomplishments already seemed like the work of three men. He established the first ICU as we know it. At Pitt, he founded the anesthesiology department in the school and the world’s first critical care medicine program training physicians in intensive care. Safar was called “the father of CPR” for documenting and advocating the lifesaving techniques now familiar to millions. Resusci Anne, the first CPR training mannequin, was developed at Safar’s behest. In the 1960s, he designed one of the first modern ambulance services, providing Pittsburgh’s Hill District with an unprecedented quality of emergency care. Safar was nominated for the Nobel Prize three times.

His recent work focused on using rapid deep chilling to create a sort of suspended animation in trauma victims. Experiments suggest that brain damage can be reduced or eliminated, even when victims are resuscitated after one or two hours. Safar hoped that CPR would thus evolve into CPCR—Cardiopulmonary Cerebral Resuscitation.

Despite the energy he devoted to work, Safar cultivated a love of music. He played classical music on a baby grand piano that had belonged to his family in Vienna. He and his wife stopped entering the Pittsburgh Symphony Orchestra’s waltzing contest after winning it three consecutive years. What kind of dancer was he? “Outstanding,” says Eva Safar. “I met my husband when I was 17, and nobody else ever quite measured up.” —CS


The image contains text in various sections, including a remembrance of Peter Safar, a historical context, and a list of alumni news items. The text is a blend of personal remembrance, professional achievements, and academic information. The layout includes different blocks of text, images, and a table. The document seems to be a memorial or tribute piece, possibly from an alumni newsletter.
As Tara Cronin walked to practical exam, held at the beginning of her third year, someone handed her a piece of paper. The paper explained that she was to give the “patient” (an actor) a full heart examination without inquiring about his history. Walking into the room, she saw a man in his 20s sitting on a long table. She felt confident, until she saw Elmer Holzinger (MD ’54) sitting in the corner.

Holzinger is tall and lanky. He often wears a bow tie and his demeanor recalls the late Fred Rogers. He has a soft, soothing voice and is patient. He wouldn’t inspire fear in many, but Cronin knew better. Holzinger’s reputation as a master in the art of the physical examination preceded him.

Cronin approached the patient and put on her stethoscope. She listened to his heart while he sat upright. She listened to his heart as he lay down. Front, back, up, down. She thought she’d covered it all. Holzinger watched quietly throughout. When Cronin was finished, he explained that she forgot to roll the patient onto his side to listen to his heart. In this position, the heart is closer to the surface, making possible “gallops” louder.

Holzinger has been teaching Pitt medical students for 30 years, and is one of the School of Medicine’s most beloved and respected clinical professors. The hundreds, possibly thousands, of students who’ve trained on a rotation with him aren’t the only ones to recognize his prowess as a teacher. In 1997, the American College of Physicians named Holzinger a Master—an honor that is just as prominently displayed on his wall as the Humanitarian Award that med students bestowed upon him in 2000. He was the inaugural winner of that award, which recognizes the teacher or physician who shows the most compassion toward patients.

On a recent afternoon, Cronin, now in her fourth year of medical school, again reviews a physical examination with Holzinger. This time, however, it’s a real patient—one of Holzinger’s. This is Cronin’s second rotation with him since that day last year when he observed and critiqued her performance on the heart exam. Having quickly gotten over her initial intimidation, she asked to be placed with him specifically because she wanted to learn from a master how to perform a thorough exam.

What has she learned from Holzinger so far? He never orders tests unless he cannot make a diagnosis based on the empirical evidence he collects. And he is not just thorough, he is fervent in his questioning. He doesn’t stop with how many drinks a patient consumes in a week. He wants to know what else is going on. How is the family? How is work?

Cronin shares with Holzinger the results of the history and exam she just completed. She rattles off a list of symptoms—the man has pain in his back, underneath his shoulder; it gets worse when he lies down. What does she think it is, Holzinger wants to know. She is quick with an answer—a perforated ulcer?—maybe too quick. As he starts to question why she has come to this conclusion, she hesitantly suggests it could be pancreatitis instead. He concurs. (It was.)

Holzinger left private practice in the ’60s to teach at St. Francis Hospital. He chaired the Department of Medicine and headed the residency program at St. Francis from 1970 to 1999. He has no plans to retire, which is good news for students like Cronin. He builds time into his schedule for teaching. Offentimes he’ll stay in the office until midnight to accommodate students. As he sits in his office talking about his love for teaching, another student interrupts. He politely excuses himself, bounding down the hall to listen to her patient evaluation.