



## CLASS NOTES

### '60s

Three months into his freshman year at Cornell University, **Maurice Mahoney** (MD '62) realized his intended major, chemical engineering, was a mismatch. "I wanted to be able to shift directions, shift emphasis," he says. So, he pursued a career in academic medicine. Now in his 40th year on the faculty at the Yale School of Medicine, Mahoney is professor of genetics, pediatrics, and obstetrics and gynecology, director of clinical affairs, and executive chair of the school's human research protection program (which allowed him to dust off his JD—yes, in the '90s, he studied law, too). Although his responsibilities are now "more diverse than ever," Mahoney still finds time to run with another crowd: triathletes. He says he prefers triathlons to his old hobby of half marathons. "I suppose because on the bike, you get to just sit for a while," he says.

### '70s

At the bedside of a critically ill patient, every syllable and pause has gravity. As a specialist in hematology and oncology, **Eric Kraut** (MD '76) has become a firm believer in the "tremendous power" of language. Ten years ago, he published in *The Oncologist* "At the Edge of Suffering," a poem about his struggle to find the right words for a patient, a 33-year-old woman with leukemia. In March 2010, Kraut was honored with the Earl N. Metz Distinguished Physician Award by Ohio State University Medical Center's Department of Internal Medicine, where he is a professor and director of benign hematology. Kraut relished writing his speech for the ceremony. "It was a great opportunity to reflect not only on the impact I've

had on other people, but on the impact others have had on me." In his talk, he tipped his hat to his mentors, including Arthur Sagone (MD '63), a former Ohio State professor of medicine.

### '80s

At age 17, **Patric McPoland** (MD '80) hostelized across Europe. After his first year at Pitt med, he hitchhiked to California. And in the '90s, he served in the Navy as a commander in Operation Desert Storm. This July, McPoland—who's now a civilian dermatologist based in West Palm Beach—set out on another sea excursion. He provided general medical care in Indonesia on the USNS *Mercy* as part of Pacific Partnership 2010, an annual humanitarian-assistance deployment to Southeast Asia and the Western Pacific. On the *Mercy*—which served as a disaster-relief training center for physicians and a floating hospital for patients in Indonesia, Vietnam, Cambodia, and Timor-Leste—McPoland and fellow Pitt med alums **Alan Lim** (MD '91), **Scott Flinn** (MD '88), and **Arturo Torres** (MD '06) were part of a diverse, international contingent of specialists delivering treatment to regions lacking basic medical care. "It was as intensely colorful as any adventure I've ever had," McPoland says.

As a pediatrics resident at Children's Hospital more than 30 years ago, **Clydetta Powell** (Pediatrics Resident '79, Child Neurology Fellow '82) first used a helicopter to reach sick newborns in the more remote areas surrounding Pittsburgh. This January, Powell—now a medical officer for infectious disease in the U.S. Agency for International Development (USAID)—braved the skies once again, this time transporting trauma victims over Haiti's earthquake-ravaged terrain. As the sole pediatric neurologist on the USNS *Comfort's* relief mission from January to mid-February, Powell worked 19-hour days, treating earthquake-related neurological injuries (such as spinal cord trauma) as well as unrelated conditions



**Powell (middle) with colleagues during the USNS *Comfort's* relief mission to Haiti early in 2010.**

(including tuberculosis). In May, she and fellow *Comfort* neurologists published a paper in *The Lancet Neurology* outlining the importance of neurology and its subspecialties in disaster response.

As a doctor in pediatrics, **Scott Serbin** (MD '82) became dissatisfied with the pace of his job, "running, running all the time." But instead of quitting his practice, he transformed it. Five years ago, Serbin opened a pediatric concierge practice. Appointments can be scheduled nearly any time parents request, and Serbin only makes house calls. Serbin says he "didn't suddenly become a better doctor by switching to this style of medicine." But he did finally have the time to wait for a sick child to stop crying—an advantage that's helped him better connect with his patients.

**John McConaghy** (MD '89), now a professor of family medicine at Ohio State University, has won his department's teacher of the year award six years in a row. The secret to good teaching, he says, is simple: Love what you do. "It's very rewarding watching the young students of medicine grow and mature. We often think of them as our children."

In addition to his performing teaching and clinical duties, he chairs quality and patient safety for University Hospitals East—and keeps up with his actual children. His two teenagers play three sports each, and between all those games, "Dr. Mac" squeezes in scoutmaster duties for his son's Boy Scouts troop. "You've got to enjoy it while it lasts," he says. "You're only young once."

### '90s

In July, **Richard Pan** (MD '91), associate professor of pediatrics at UC Davis Children's Hospital, received the 2010 Physician Humanitarian Award from the Medical Board of California for his dedication to caring for underserved patients in the Sacramento area. Pan is founder of Communities and Health Professionals Together, which connects resident physicians with disadvantaged communities, and cofounder of Healthy Kids Healthy Future, which has provided health, dental, and vision coverage to more than 65,000 California kids.

Pan's experience has taught him that there's a lot more to health than health care, he says. For example, he can tell patients and their families to eat healthfully, but what



if there are no nearby grocery stores with fresh fruits and vegetables? “If my goal is to improve health, I need to understand what drives health,” he says. In November, Pan, a Democrat, won a seat in the 5th Assembly District of California.

## '00s

In May, **Michelle Clayton** (MD '00), a child abuse pediatrician at Children's Hospital of the King's Daughters in Norfolk, Va., was honored as the 2010 Influential Woman of the Year by Virginia Lawyers Media. The award recognizes the outstanding efforts of women in all fields who are making notable contributions to their chosen professions, their communities, and society at large.

Having performed hundreds of consultations with police, social service officials, and prosecutors, Clayton instructs physicians and investigators on injury patterns and other aspects of abuse assessments. Child abuse is more common than many believe, she says. At her hospital alone, the staff sees more than 1,000 child abuse cases a year—and, of course, not every abuse case gets reported. Yet most abused children Clayton sees don't seem to need any more emotional comforting than other patients. “Children always amaze me with their strength and resilience,” she says. “They're a joy to work with.”

Throughout his otolaryngology residency with the University of Cincinnati, **Gordon Sun** (MD '06) has noticed that the head-and-neck-cancer patients he sees in the VA hospital seem to be diagnosed later than his other patients with the same disease, making treatment a much tougher road. Many of his colleagues have noticed the pattern, too, but at this point, “It's purely observational,” notes Sun, who is now chief resident. “No one has ever studied this systematically.”

Starting next July, Sun will try to find out what's happening with these patients as a University of Michigan Clinical Scholar. For his two-year fellowship, which is sponsored by the Robert Wood Johnson Foundation, Sun will compare incidence, staging, and outcomes of U.S. veterans to those of nonveterans; if there's a disparity, he'll also investigate possible contributing factors. Sun hopes his project will inform policy. “Perhaps outreach and treatment programs can be developed to better accommodate the veteran population,” he says.

—Keith Gillogly, Ben Korman, and Elaine Vitone



ABOVE: Clayton. BELOW: Sun



## THE WAY WE ARE CLASS OF '56

In the days of the draft, some Class of '56ers figured they'd fare better by enlisting. **Gerald Johnston** was commissioned in the Army his last year at Pitt and later served as chief of medicine in Uijeongbu, South Korea, setting for the 1970s sitcom *M\*A\*S\*H*. When he returned to the States, Johnston went on to head Army nuclear-medicine programs in Honolulu and San Francisco and later at the National Institutes of Health. He then spent the last 18 years of his career at the University of Maryland before retiring in 2009.

Recently, Johnston served with Global Medicine in Tasmania. Service seems to come naturally to docs of his ilk. “People who work in medicine in the military for a dollar a day are the ones who have a calling rather than an eye on the bank account,” he says.

**Bob Dille** went the Air Force route. His research on some of the earliest prolonged B-52 missions won him a Guggenheim Fellowship to Harvard School of Public Health. While in Boston, he was tapped to direct the new Civil Aeromedical Research Institute in Oklahoma City. He accepted and stayed for 22 years. Dille has lectured on six continents on the evolution of aviation medicine and physiology. He wrote chapters for three editions of *Fundamentals of Aerospace Medicine*, the field's flagship textbook, as well as 240-some-odd articles.

Dille finished his military career in the National Guard, and then when he was 60, his provost marshal sent him to jail ... as medical director of Oklahoma's Department of Corrections. Dille later became a surveyor for the national commissioner on correctional health care. He retired five years ago.

Like Dille, **Philip Migliore** served as a flight surgeon. He was stationed in San Antonio for part of his residency, then finished in Pittsburgh before returning to Texas for a pathology fellowship at MD Anderson Hospital in Houston. He then moved to Baylor College of Medicine and Methodist Hospital, where he stayed for 30 years. During that time, he was chief of clinical chemistry for the Methodist Hospital Labs and served as research director of Baylor's Moran Foundation for Research in Pathology. Migliore retired in 2000.

Nineteen out of 89 members of the Class of '56 went into pathology—an unusually high rate for this unsung specialty. Migliore chalks that up to Frank Dixon, who chaired Pitt's pathology department from 1951–1961 and served up plenty of “real-world pathology,” Migliore recalls. “During our Pathology course, autopsy call was required, and we spent many hours studying buckets of hearts, livers, and other organs, diseased or otherwise. This approach to the teaching of pathology was rather unique and is no longer practiced, as far as I know.”

Fellow pathologist **Robert E. Lee** taught at Pitt's School of Medicine and practiced at Presby for more than 55 years before retiring from clinical work. His research is ongoing. Since 1961 he has studied Gaucher's disease and has published hundreds of articles on the subject.

Lee is the historian for the Medical Alumni Association and the person for whom of the School of Medicine's student award for excellence in anatomic pathology is named.

**Cyril Wecht**, as many are aware, also went into pathology. After completing his MD, he received his JD from Pitt's School of Law in 1962. He later became coroner of Allegheny County and consulted on such high-profile forensic cases as John F. Kennedy, Elvis Presley, and JonBenét Ramsey, among many others.

Wecht has written dozens of books and performed thousands of autopsies. But what he's most proud of is the work he has done as an expert witness in civil lawsuits on behalf of miners' families facing loss wreaked by black lung disease, he says. —EV



Johnston



Dille



Migliore



Lee



Wecht



Detre

## THOMAS P. DETRE

MAY 17, 1924–OCT. 9, 2010

In the early 1970s, when Thomas Detre announced that he was leaving a tenured position at Yale to work for Pitt, a colleague scoffed, saying that planes didn't bother to land in Pittsburgh. Detre replied, "They will land when *we* land." True to his word, Detre led the University of Pittsburgh to international prominence as a research university and became a key architect of UPMC.

Detre arrived in Pittsburgh in 1973 to chair Pitt's Department of Psychiatry and to direct the Western Psychiatric Institute and Clinic (WPIC). He initiated an innovative new funding cycle, investing profits from the clinic in patient care, faculty recruitment, and interdisciplinary research, then applying research results to clinical advances. In recruiting, he was so successful that he was known as the coach of the "Pittsburgh Stealers," taking the department from 36 members in 1974 to nearly 150 in 1982. His approach made Pitt's psychiatry department one of the top three recipients of National Institutes of Health (NIH) funding within a decade.

University administrators called on him to serve as the first associate senior vice chancellor for the health sciences—and then, as senior vice chancellor, a position he held until 1998. Under his direction, Pitt ranked 10th in NIH funding in 1997; the University has steadily climbed the rankings within this elite group since then.

"His philosophy of integrating research with the practice of medicine brought brilliant clinician-researchers to the University and altered its scientific landscape," says dean of Pitt's School of Medicine, Arthur S. Levine, who succeeded Detre as senior vice chancellor for the health sciences.

Detre also led what was known as the School of Medicine's Medical and Health Care Division as it evolved into UPMC, which he presided over from 1990 to 1992, and later served as an executive vice president and medical director of international programs for UPMC.

Detre's wife of more than 50 years, Distinguished Professor of Epidemiology in Pitt's Graduate School of Public Health Katherine Detre, who died in 2006, was also a leader in her field. Thomas Detre later married Ellen Ormond, a psychologist at the University of Pittsburgh Cancer Institute.

—Kelsey Ballance

## MERRILL J. EGORIN

MAY 25, 1948–AUG. 7, 2010

Merrill J. Egorin, an internationally known researcher and codirector of the Clinical Pharmacology Analytical Facility at the University of Pittsburgh Cancer Institute, was "never too big for small data," says Jan Beumer, his successor at UPCI. "He was all over the data, always asking really basic questions."

Egorin, 62, died five years after he was diagnosed with multiple myeloma. A dedicated professor of medicine and pharmacology, he even used his own cancer treatment as a teaching model for his students. An expert in cancer pharmacology, he accrued a slew of honors, including the 2003 Elliott Osserman Award for Distinguished Service in support of Cancer Research, the 2006 Joseph H. Burchenal Clinical Research Award, and the 2009 American Society of Clinical Oncology Translational Research Professorship. He held memberships or fellowships in five American medical societies, as well as editorship of *Cancer Chemotherapy and Pharmacology*.

Egorin relished his relationships. During lunch, he Skyped with his two children and their families. In his work, he strove to help junior colleagues network with scientific superstars, arrange training opportunities for other doctors, and ensure recognition for everyone, including his technicians.

"If you look at the impact he had on other people, that was what he always focused on. You realize how much he helped us," Beumer says. —KB



Egorin

## KENNETH SCOTT MCCARTY JR.

FEB. 11, 1948–OCT. 15, 2010

As a young pathologist at Duke University, Kenneth McCarty collaborated with his father, Kenneth Sr., a biochemist, to research the hormonal aspects and treatment of breast disease. (The intense young man had graduated from college at 18.)

At the University of Pittsburgh School of Medicine, where McCarty alighted in 1993 as a professor of pathology and of medicine, he designed a tool to help physicians make decisions about prostate cancer treatment according to a patient's preferences. While he was the school's assistant dean of graduate medical education, he pursued a passion of his, troubleshooting such issues as resident work hours.

McCarty, an MD/PhD, became the chief editorial advisor of this magazine in 2002, offering careful reads and candid, heartfelt commentary and counsel to keep *Pitt Med* relevant to readers. His love of language and frequent witticisms helped make quarterly advisory board meetings as enjoyable as they were productive.

McCarty's wife of 26 years, Berrylin Ferguson, is also an MD. She recalls that her husband's penchant for finding solutions to problems surfaced very early in their relationship.

"When we first started dating, I had a sailboat that I didn't know how to sail," Ferguson says. This fact was made evident when she capsized the vessel with her future husband on board. "So, he ended up taking sailing classes and became an expert sailor. I think he could have become an expert in anything."

—Joe Miksch



McCarty

## IN MEMORIAM

### '40s

JOHN P. BRANDT  
MAY 10, 2009  
MD '43B

JOHN F. FULTON  
SEPT. 8, 2010  
MD '45

JOHN L. HAPPEL SR.  
APRIL 22, 2010  
MD '48

JOHN A. ZELNIK JR.  
AUG. 18, 2010  
MD '48

### '50s

LEONARD SCHWARTZ  
MAY 11, 2010  
MD '52

HERBERT D. MILLER  
JULY 15, 2010  
MD '54

### '70s

DALE A. KUREMSKY  
JUNE 27, 2010  
MD '70

### '80s

GARY PURDUE  
OCT. 3, 2010  
RES '81

ANDREW EGOL  
AUG. 19, 2010  
FEL '82



## COACH IN SCRUBS ROBERT HIGGINS

BY REID R. FRAZIER

**T**he organ-sharing system in the United States decides which of the 100,000 patients in need of a transplant will get one when an organ becomes available. There aren't enough organs for everyone—each year, 10,000 patients die while on the waiting list—and deciding how best to allocate organs is a difficult task. Should the organ go to the sickest, those on the list the longest, or those who stand to live the longest?

Transplant surgeons disagree on the answer, often vehemently. Getting a group of them to approve a set of guidelines is a little like trying to dodge a herd of linebackers.

Maybe that's why Robert Higgins volunteered for the job. Higgins (Res '90), who served as president of the Organ Procurement and Transplant Network (OPTN) and United Network for Organ Sharing (UNOS) for 2008–09, has presided over some of the more heated debates over organ allocation. A former high school all-American football player who played running back for Dartmouth during the '80s, he's no stranger to a scrum.

Higgins, a Master of Science in Health Administration as well as an MD, fell under the spell of transplant medicine while a medical student at Yale University. He chose to specialize in cardiothoracic transplant—"High risk, high reward," he says. He came to Pitt for residency to learn from its legendary faculty in the '80s and '90s, including Thomas E. Starzl, Henry Bahnson, Bartley Griffith (Fel '78, Res '81), and

Robert Hardesty. In the past decade and a half, Higgins has built up several heart and lung transplant programs around the country. He recently was tapped by Ohio State to direct its Comprehensive Transplant Center, where he is also chief of the medical school's Division of Cardiac Surgery and holds the John H. and Mildred C. Lumley Medical Research Chair.

Throughout his career, Higgins has prided himself on getting everyone in a transplant unit—surgeons, anesthesiologists, social workers, and so on—to work in sync. "I enjoy the challenge of making complex, often complicated environments, work more effectively. I love the idea of building teams." This trait earned Higgins the nickname "Coach" from the nurses at Rush University Medical Center in Chicago. Higgins' organizational prowess recommended

him for leadership on the boards of OPTN and UNOS, says Walter Graham, the executive director of the latter group. One of Higgins' first tasks as UNOS president was to preside over a conference for kidney allocation, one of the field's most contentious issues. Kidneys are by far the most sought-after organ—there is a waiting list of 80,000 for fewer than 10,000 kidneys. Priority has traditionally operated on a "first-come, first-served" basis, but the sickest patients might not show up on the list until they are in the late stages of their disease.

Blacks are much less likely than Whites to get a kidney transplant. "They may not have the resources, they may not have access to sophisticated treatments. In general they're not as well-positioned as others [on the list]," says Higgins. He worked to bring the needs of underserved patients to the attention of the transplant professionals at the kidney-allocation conference. In the end, the committee drafted new rules that gave priority to those who'd been on dialysis the longest, a marker for how long they had been sick. Graham says Higgins shepherded the group through "complex issues that have a lot of emotion behind them."

Jumping into the organ-allocation debate seemed only natural to Higgins.

"You can either be someone on the sidelines—offer an opinion, but never get in the game—" Higgins says, "or you can get in the game and have an impact. I prefer to not be on the sidelines. I'd rather be in the game." ■

THE OHIO STATE UNIVERSITY MEDICAL CENTER



Higgins presided over OPTN and UNOS, the organizations that manage patient waiting lists and donor organ allocations in the United States.

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