

PublicHealth

FALL 2007

Quarterly



Two
Aging Initiatives
at GSPH



Seven
Shedding Light
on Alzheimer's



Twelve
Student Jennifer
Middleton's
Health Education
Sitcom



The *Graying of* America:



aging initiatives across GSPH aim to help elders
live healthier, more productive lives.



Fall 2007



Aging Initiatives
at GSPH

2

Shedding Light on
Alzheimer's



7

12



White
Coats

Student Jennifer
Middleton's
Health Education
Sitcom

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A Message from the Dean Donald S. Burke, MD

“Sixty is the new forty.” As a graying, 60-ish Baby Boomer myself, I have developed a keen interest in new ways to think about aging. Conventional wisdom used to tell us that frailty and illness were a fact of growing older. But a growing body of scientific evidence shows that healthy aging is an attainable goal. The Centers for Disease Control and Prevention has targeted improvements in the duration and quality of life for America’s seniors as one of its top priorities. And considering that by 2030, the U.S. population will include 71 million seniors—20 percent of the population—this issue certainly deserves priority status.

Maintaining the vitality of our older population is not just a desirable goal, it is an economic imperative. The fiscal impact of ill health in the elderly is staggering. Nationwide 80 percent of seniors suffer from at least one chronic condition. The average 75-year-old has three chronic conditions and uses five prescription drugs. Health care spending is projected to increase by 25 percent by 2030. Clearly we in the public health arena can have a significant impact not only on the health of the senior population but on the health of the national economy.

GSPH has a well-earned national reputation as a top-tier center of excellence on aging research. In this issue of *PublicHealth Quarterly* we focus on initiatives throughout the school—cancer prevention, better self-management of chronic conditions, cardiovascular health, environmental and genetic influences on aging and health, and the effect of health care policy on the elderly—in which GSPH is breaking new ground.

This issue also spotlights the research of Patricia Opresko, PhD, assistant professor in the Department of Environmental and Occupational Health. Her examination of the mechanisms of genomic instability associated with aging and diseases related to aging was recognized by the National Institute of Environmental Health Sciences with a five-year Outstanding New Environmental Scientist grant. The Ellison Medical Foundation also supports her work with a four-year New Scholar Award in Aging. You can find more about her research on page 6.

No longer are Baby Boomers forced to think of the latter part of their lives as the “declining years.” Thanks to the leadership of researchers and community outreach programs like those at GSPH, the seniors of today are far more likely to live longer and have healthier lives than did their parents. As Bob Dylan, the 1960s troubadour, so aptly put it, “I was so much older then, I’m younger than that now.”

A handwritten signature in black ink that reads "Donald S. Burke". The signature is written in a cursive, slightly slanted style.

Donald S. Burke, MD
Dean, Graduate School of Public Health
University of Pittsburgh



The Graying of America Aging initiatives across GSPH aim to help elders live healthier, more productive lives

Allegheny County is home to the second-highest proportion of elders in the U.S. Only one county in Florida has a higher proportion of elders. Specifically, in the U.S. as a whole, 12.4 percent of the population is over age 65. In Pennsylvania the figure is 15.6 percent and in Allegheny County, 17.8 percent of the population is over age 65. Aging services reflect these figures, with, for example, the Allegheny County Area Association on Aging being nationally known for innovative programs. GSPH is also at the forefront of research on aging.

Researchers at GSPH are actively engaged in initiatives covering various aspects of aging, starting with basic research to understand the aging process, all the way through to policy changes that specifically impact elders. Six of the school's seven departments are involved in aging research. Also, several research and practice centers focus on aspects of aging.

Department of Biostatistics

BIOST provides collaborative research efforts in the areas of breast cancer and colon cancer. For example, as the Biostatistical Center for the National Surgical Adjuvant Breast and Bowel Project (NSABP), the department has helped conduct more than 40 large-scale clinical trials involving hundreds of thousands of subjects. More than one third of patients in these trials are over age 65. Also, BIOST has conducted research with the Veteran's Administration Healthcare System, including research with elderly veterans.

Department of Environmental and Occupational Health

EOH examines the interaction of environmental agents and susceptibility to these agents accounting for acute and chronic human disease. Elders are often characterized by their susceptibility to chronic disease; thus, several research initiatives located in EOH have relevance to elders. One project is examining host defense mechanisms and pulmonary disease, for example. A further project is examining lung cell death that occurs with diseases such as Alzheimer's disease. The mechanisms of genetic damage in the development of cancer and other diseases of aging are also the subject of human mutation and genotoxicity projects. Factors that accelerate aging, including oxidative stress and human premature aging diseases, on telomeric DNA metabolism is a further focus of EOH research (see article on page 6).

Department of Epidemiology

EPID has several notable initiatives with elders. The Cardiovascular Health Study is examining trends in cardiovascular medication. The Ginkgo Biloba Prevention Trial is examining whether

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ginkgo biloba decreases the risk of dementia. The Memory Study is examining whether women with hormone replacement therapy are at decreased risk for dementia. The BARI Data Coordinating Center is evaluating outcomes for patients with severe coronary artery disease. The Osteoporotic Fractures in Men study is examining risk factors for osteoporotic fracture. The Women's Health Initiative is examining the progression and risk factors of multiple chronic diseases as women age. Research is also being conducted on healthy aging and whether physical exercise prevents disability.

Department of Behavioral and Community Health Sciences

BCHS offers graduate students a Certificate in Public Health and Aging. Several faculty also have expertise in issues that affect the elderly. This includes assessing the health and welfare needs of the elderly. Current efforts also include investigations of mental health and clinical decisions made at the end of life. This includes challenges for elders with cognitive impairment. Further work relates to management of chronic diseases, using self-care and alternative therapies, including how these vary between older African Americans and Whites. Other initiatives housed within BCBS include many elders, such as the Pennsylvania Cancer Control Consortium, which is working to achieve cancer control priorities in the state, and an assessment of the capacity of Pennsylvania chapters of the Arthritis Foundation to conduct their mission.

Department of Human Genetics

HUGEN, as part of its research mission, explores the impact of genetics on public health, education and disease prevention. Some of this work relates to the elderly, such as examining genetic susceptibility

to diseases such as cancer. Other work is mapping the genetics of common diseases such as cardiovascular disease.

Department of Health Policy & Management

HPM has several initiatives to examine and report on policies that influence elders. The PA Medicaid Center (as part of HPM) addresses how Medicaid policies influence elders. This is significant, as Medicaid currently pays for the majority of nursing home care. Another significant expense for elders is drug costs. Researchers are examining the influence of Medicare Part D (the newly enacted program to help pay for elders' drugs). In nursing homes, faculty in HPM are examining the influence of caregivers on quality of care, how to measure residents' quality of life, and resident satisfaction. More

Researchers are examining the influence of Medicare Part D (the newly enacted program to help pay for elders' drugs).

generally, researchers are examining how elders and their families choose long-term care and what information can be provided to help facilitate this process. Evaluations have also been conducted by faculty to gauge the impact on the health of elders in elderly relocations from closed high-rise buildings and the impact of local service-enriched housing programs. Following the management function of HPM, research is also ongoing to examine the impact top managers of long-term care facilities have on quality of care and to provide top managers an online tool to optimize staffing in their facilities.

In addition to the departmental efforts discussed above, GSPH has several centers that are directly involved in elderly issues.

Center for Healthy Aging

CHA promotes healthy lifestyles and disease prevention in older adults through research, education, and community outreach initiatives. A current research collaboration with the University of Berkeley in California, North Carolina University, and the University of Illinois at Chicago is a multi-centered project studying environment and exercise barriers. This effort is funded by the Robert Wood Johnson Foundation. Collaboration with the University of Pittsburgh School of Health and Rehabilitative Sciences includes a CDC Special Interest Project on "Improving Self-Management in Persons with Epilepsy." Education and outreach in the community focuses on partnerships with already established senior organizations, such as Meals on Wheels, AARP, the Community College of Allegheny County, and area senior centers. The Healthy Ambassador program trains seniors to disseminate information about healthy living among their social circles. Throughout the year, CHA participates in numerous health fairs and presents lectures around the region to reach an increasing number of seniors. The center's healthy aging principles focus on the "10 Keys to Healthy Aging," which include participation in cancer screening, maintaining social contact, getting regular immunizations, and regulating diabetes (blood glucose less than 100).

Center for Aging and Population Health

CAPH strives to generate new solutions to the challenges of an aging society through the conduct of population-based research that promotes healthy aging, longevity, and prevention of disability. Building on the resources of the Department of Epidemiology, CAPH orchestrates epidemiologic and public health research on aging, trains professionals in population research methodology, and conducts community outreach. These efforts

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GSPH was chosen by *Governing* magazine and *Congressional Quarterly* magazine as the co-host of the first installment in its series of policy summits on livable communities for people aged 50 and over. The summit's organizers stated that GSPH was chosen because its track record and reputation "would enhance and enrich the discussion." Governor Rendell participated in the summit, which took place in mid-October on the University of Pittsburgh campus.

are collaborative within the University and the community and engage older adults as valued resources in society. Thus, the focus of the CAPH is to optimize health in older adults by emphasizing health promotion and disease prevention. The center is directed by Anne B. Newman, MD, MPH, professor of epidemiology, internationally renowned for her work in the epidemiology of aging, longevity, and disability. This research has established the clear potential for old age to be a productive and active period of life. Previously, aging research has focused on prevention of advanced disability. While this is an important goal, Dr. Newman has demonstrated that the biologic potential for healthy aging far exceeds previous expectations. Her research has shifted the paradigm of prevention research to target optimal rather than usual aging.

Pennsylvania Medicaid Policy Center

PMPC was recently established within GSPH's Department of Health Policy & Management. The center is working to increase the understanding of Pennsylvania's medical assistance program and its role in the Commonwealth's healthcare system, as well as promoting the development of policy solutions and long-term strategies that serve the program's constituents. www.PAMedicaid.pitt.edu, the PMPC website, serves as a clearinghouse for Pennsylvania Medicaid information, including publications and research, statewide and county data, and relevant links. In order to achieve their goals, the PMPC develops policy reports and fact sheets; hosts public forums; collates and makes data related to Pennsylvania Medicaid easily accessible; and provides resource materials, such as contact details, web links, and an overview of the program's legislative history, to key organizations involved in the provision of Medicaid.

Epidemiology Data Center

The EDC, established in 1980, has collaborated in over 100 research studies sponsored by the National Institutes of Health and other agencies. The EDC currently coordinates data management and analysis activities for 26 research projects sponsored by federal agencies as well as industry. Aging-specific projects include statistical support for the University of Pittsburgh Alzheimer Disease Research Center, the Department of Psychology, and the Department of Cardiology. The Heart Failure Home Care Demonstration Project is a randomized trial designed to assess the impact of a home-based disease management program compared to standard of care for heart failure patients. Resources for Enhancing Alzheimer's Caregiver Health (REACH II) focuses on enhancing the well-being of caregivers in order to better the quality of care for the care recipients. The Study of Women's Health Across the Nation (SWAN) is designed to examine the health of women during their middle years with the goal of helping scientists, health care providers, and women learn how mid-life experiences affect health and quality of life during aging.

For the past two years alone, more than 20 faculty at GSPH have worked on issues that pertain to the elderly, and elderly people are engaged in clinical trials (more than 40,000 enrolled with BIOST), healthy aging (more than 2,000 involved with BCHS), and surveys (more than 20,000 with HPM). This has resulted in more than 200 peer-reviewed publications by GSPH faculty and numerous community outreach efforts. ■

PA Will Lead the Way

Pennsylvania health care executives and GSPH have the know-how to set the agenda as the population ages

by Paul M. Winkler (MPH '81)

According to the 2000 census, Pennsylvania has the second highest percentage of residents over the age of 65, trailing only Florida. We are all aware of the looming impact of the Baby Boomers who have begun joining the ranks of the 60-plus age group, but the more urgent concern in Pennsylvania must be for our fastest growing age group: those individuals 85 years and older. This group, projected to increase by 18 percent by 2010, has the highest incidence of Alzheimer's disease and multiple chronic degenerative diseases, and will draw heavily upon the entire health system. As Pennsylvania goes, so will go the nation over the next 15 to 20 years.

Across the country, states are grappling with uncontrollably escalating Medicaid costs because of the lack of a long-term care financing mechanism and dependency upon Medicaid, a welfare program, to pay for about two-thirds of all long-term care. As a result, many states have moved to "rebalance long-term care" in an effort to reduce nursing home usage and expand home and community-based services. The reality is that because of our nation's demographics, the demand for all services—from in-home services to skilled nursing care—will continue to grow.

We cannot "save" our way out of this reality. One of the greatest weaknesses of our political system is its resistance to addressing a problem until it hits a crisis point. We need to insist that lawmakers at both the state and federal levels see beyond the current budget year or next election cycle and initiate a serious planning process and public dialogue to objectively project the demands on our system. Then they need to craft a strategy to adequately fund the entire range of aging and long-term care services.

There are many positive things happening in the field of aging. Signs of innovation are everywhere:

- the national PACE (Program of All-Inclusive Care for the Elderly) program (known in Pennsylvania as LIFE, Living Independently for the Elderly)
- nursing home culture change, shifting from the old medical model of institutional care to a residential, social model of person-centered care
- the proliferation of assisted-living facilities

New models of service-enriched housing for people of all income levels are surfacing as a way to delay or prevent the need for institutional care, allowing frail seniors to "age with choice" in a comfortable and familiar environment. Funded primarily as pilot programs through foundation and federal grants, service-enriched housing is using a wellness model focused on health promotion through on-site nurses and nutrition and exercise programs, which has produced positive outcomes. Increased personal responsibility related to lifestyle choices will be paramount as the age-wave unfolds and huge numbers of Baby Boomers place an unsustainable demand on Social Security and Medicare. Practicing healthy lifestyles to prevent and reduce the effects of chronic diseases will be critical.

While substantial anecdotal evidence exists, there is a need for rigorous evaluation of these and other new programs being developed. Likewise, there is a need for objective evaluation of the long-term care policy changes (Medicaid waivers, etc.) being implemented at the state level across the country. At the local level, a holistic approach to integrating care and services across the entire continuum of



^ Paul M. Winkler (MPH '81)

acute, long-term care and community-based settings also must be a focus to promote better outcomes and reduce costs. We are blessed to have faculty/researchers within GSPH with impressive aging/long-term care expertise and a departmental competency in this arena.

The future holds both danger (e.g. demographics, labor and financing challenges) and opportunity (e.g. technology, medical breakthroughs, and lifestyle/consumer choice advances). It will take creative minds, political fortitude and courage to respond. Our GSPH faculty, students and alumni are in a position to provide leadership to the rest of our country. We are up to the challenge.

Paul M. Winkler (MPH '81) is president and CEO of Presbyterian SeniorCare (PSC), a continuum of senior housing and care communities and services at 40 locations across nine counties of southwestern Pennsylvania serving approximately 6,000 older and disabled persons annually. Winkler has been with PSC since 1987, and has served as senior vice president and chief operating officer for the PSC system, overseeing its range of services and facilities, including Woodside Place, the internationally recognized specialty care facility for persons with Alzheimer's disease. Winkler was elected president and CEO in March 1999.

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Aging Research

EOH assistant professor has won two grants aimed specifically at launching the careers of young investigators

You have probably noticed that heavy smokers often appear older than their chronological ages. There might be a lot of explanations: decreased cardiovascular and pulmonary function, long-term exposure to toxins, etc. But Patricia Opresko, PhD, assistant professor of environmental and occupational health, has another theory: smoking might damage chromosomes in a way that promotes premature aging.

Opresko's research focuses on telomeres, protein-DNA structures at the ends of chromosomes that have been shown to influence life span, disease and genome integrity. "As somatic cells replicate, the telomeres naturally get shorter," she explains. But the rate at which telomeres shorten can have profound effects on human disease and longevity. Telomere loss is associated with smoking, inflammatory disease, and obesity, as well as environmental factors, such as metals like arsenic, that can cause oxidative stress. Hence the possible link between cigarettes and looking older.

On the flip side of the coin is the role that telomeres play in cancer. Stem cells and germ cells have an enzyme—telomerase—that keeps the telomeres in those cells from shrinking and therefore gives these types of cells a greater potential to replicate. Cancer cells have also been shown to contain telomerase, which contributes to their ability to replicate unchecked.

Last year, Opresko received two grants—both specifically for young investigators—to further her research. The National Institute of Environmental Health Sciences presented

her with its Outstanding New Environmental Scientist (ONES) Award, a grant available only to outstanding investigators who have not yet received their first RO1 grant. Opresko was one of eight grantees in the inaugural year of the ONES program, out of 70 applicants.

"It's an amazing initiative," Opresko says of the ONES program. "It's allowing me to develop my research program instead of spending all my time writing grant applications." The first two years of the grant include additional money for equipment purchases, personnel, and specialized training. The program also encourages the investigators to identify an advisory committee of senior experts in their fields and to meet with them yearly as they transition from fully mentored to independent research.

Opresko is also in her second year of a four-year grant from the Ellison Medical Foundation, which supports basic biomedical research on aging relevant to understanding lifespan development processes and age-related diseases and disabilities. The foundation's New Scholar Award in Aging provides support for newly independent investigators. "The foundation brings all the awardees to Woods Hole, Massachusetts, once a year which helps with setting up collaborations," Opresko says.

"The goal of my lab is to understand both the mechanisms of telomere loss and the cellular processes that preserve telomeric DNA," Opresko says. "Given the critical role of telomeres in aging and cancer, we believe this knowledge should aid in the design of intervention therapies that prevent or delay the onset of aging-related diseases and cancer." ■

Shedding Light on Alzheimer's

Foster family's generosity provides 10 years of community and scientific education

In April 2002, the family of the late Jay L. Foster sponsored the first in a five-year series of semiannual lectures on Alzheimer's disease. After seeing the positive response to the lectures from both the scientific and lay communities, the Fosters have generously agreed to fund the series for an additional five years.

The family hopes to continue to present information regarding the disease from two critical perspectives, that of the caregiver and that of the researcher.

The first component of the lecture series, held in the spring of each year, is a community lecture and discussion forum designed to educate family members, caregivers, senior care workers, and others who are faced with the daily struggle of caring for those with Alzheimer's disease. The Foster family recognized that knowledge about the illness is one of the most important factors in coping with the disease's effect on family and friends.

Lecture topics covered in recent community lectures include:

- Issues in Late-Stage Alzheimer's Disease
- The History of Alzheimer's Disease
- Factors that Promote Long Life
- Progress in Diagnosis and Drug Discovery

Attendance at the community lectures has increased throughout the series, indicating the value attendees attach to the series. Comments gathered at the community lectures convey deep gratitude to the Foster family for the public service that their generosity has provided. Attendees also appreciate that the lectures bring local Alzheimer's and aging organizations to one location where representatives can share information and answer questions at discussion forums that follow the lectures.

The second component of the series is a scientific lecture bringing to light current research for prevention and treatment of the disease. This lecture, held in the fall of each year, has been given by local experts affiliated with Pitt's Alzheimer Disease Research Center and PET Research Facility, such as Steven DeKosky, MD, William Klunk, MD, PhD, and Chet Mathis, PhD. Speakers from across the country have come to present as well. Dale Schenk, MD, is the chief scientific officer at Elan Corporation in San Francisco. Claudia Kawas, MD, is Al and Trish Nichols Chair in clinical neurology, and professor of neurology and neurobiology and behavior at the University of California at Irvine.

Lectures given over the past few years are available to view online at www.publichealth.pitt.edu/lecturearchive.

The next installment of the Foster Lecture series will be a scientific presentation by Lon Schneider, MD, professor of psychiatry, neurology, and gerontology at the University of Southern California Keck School of Medicine. The lecture will be held on November 12, 2007 at 4 p.m. at the University of Pittsburgh. Details can be found at www.publichealth.pitt.edu/foster2007.

v Attendees enjoy topical group discussions after the Foster lecture.



Left to right: Jill Ruempler, Gina McDonell, Linda Fletcher



The Alumni Affairs Advantage

Services and opportunities abound for GSPH grads courtesy of the alumni affairs office

GSPH's alumni affairs staff offers a host of programs to keep you informed about the school, help you further your career, let you stay in touch with classmates and encourage you to mentor the next generation of public health professionals. If you have questions about opportunities available to you or how you can contribute your time or talent to your alma mater, feel free to contact the alumni affairs team.

What Can We Do For You?

Networking opportunities – Events are planned throughout the year for GSPH alumni in the Pittsburgh region and across the country. Depending on the event, public health alumni are invited to network with each other, with GSPH students, or with other Pitt health sciences alumni. We can also assist in the planning of an event in your area if you let us know of your interest.

Educational opportunities – Alumni are always welcome at University of Pittsburgh lectures, symposia, and workshops. If you'd like to be notified of specific opportunities, contact Jill Ruempler (see right) and we'll regularly send a listing of appropriate events.

Find a place for your time or talent – Whether you are interested in mentoring a student, hiring a student for an internship or permanent position, or contributing your ideas to the alumni magazine or Web site, we can find an outlet for your time and talent. Contact Gina McDonell (see right) to discuss.

Develop your leadership skills – Joining the Alumni Society Executive Committee is an excellent way to add management experience to your resume. The committee meets a minimum of twice a year and takes the lead in planning events and administering the alumni awards program. If you have ideas for the current committee to consider, contact Gina McDonell or, better yet, run for a position in the next election, which will occur at the annual meeting.

Reconnect – If you'd like to get in touch with a particular individual from your student days, we can help that happen. To continue receiving communication from GSPH and from Pitt, make sure to send address updates to us. If you'd like to share personal or professional news with other alumni via *PublicHealth Quarterly*, send us those updates as well.

Alumni awards – The Distinguished Alumni Award is the highest award given to an alumnus by the Graduate School of Public Health. Recipients of the Distinguished Alumni Award are GSPH alumni who have made a significant contribution to the field of public health, to GSPH, or to both. The Margaret F. Gloninger Award was established in honor of the late Margaret Fitzgerald Gloninger (MSHyg '66), GSPH graduate and former faculty member in maternal and child health. This award is presented annually to a GSPH alumnus who has made a significant contribution to GSPH or to the community through volunteer service. The call for nominations for both awards is sent out in January each year. The GSPH Alumni Society Nominating Committee chooses the award recipients from the group of nominees, and the award is presented at the Alumni Dinner held in conjunction with GSPH Convocation at the end of April.

University services – We can point you in the right direction for inquiries regarding career services, transcripts and diplomas, Pitt chapters around the globe, the Pitt online community, and more.

Meet the Staff

Linda Fletcher recently joined the alumni affairs team as the director of external affairs. Linda develops the alumni affairs, public relations and marketing strategies for GSPH, drawing upon her experience elsewhere at the University of Pittsburgh. (lfletch@pitt.edu, 412-624-6325)

Gina McDonell serves as the staff liaison to the GSPH Alumni Society and drives communications efforts for the alumni body. Her marketing background strengthens her ability to connect each communication channel with the specific needs of the audience. (mcdonell@pitt.edu; 412-648-1294)

Jill Ruempler is the team's administrative assistant. Her development and event planning experience is an asset to the alumni affairs team. (ruempler@pitt.edu, 412-383-8849). ■

Alumni Society Executive Committee



^ Alumni Society President
Anne McGeary (MHA '85)

President:

Anne McGeary, MHA '85

After receiving her MHA from GSPH in 1985, Anne worked as an assistant vice-president at Allegheny General Hospital. Other administration experience includes executive director of the Ob/Gyn and Reproductive Sciences Department in Pitt's School of Medicine and executive director of a joint medical corporation between Highmark and UPMC-Shadyside. In 2006, for the GSPH Alumni Society, she planned and executed a successful student/alumni service day with the Allegheny County Health Department during Public Health Week. Currently, Anne is a full-time doctoral student. She is also a diplomat for the American College of Healthcare Executives.

Immediate Past President:

Chad Rittle, MPH '03

Chad Rittle spent more than 20 years in the computer industry before making a career switch and entering the UPMC Shadyside School of Nursing. After nursing school, he completed his bachelor's

degree in nursing at Pitt and then enrolled at GSPH. After receiving his MPH in 2003, Chad began serving as a community health nurse in Butler County with the PA Department of Health. He has also taught part-time at the Community College of Allegheny County for more than 15 years, teaching courses in medical terminology, nutrition, and clinical nursing.

Vice President:

Kristi Riccio, MPH '02

After earning her MPH in behavioral and community health sciences in 2002, Kristi Riccio worked as a research assistant at the CDC and then at GSPH. At the CDC, Kristi contributed to the diabetes chapter of the Guide to Community Preventive Services. At GSPH, she evaluated health promotion and disease prevention activities in Allegheny County. Kristi is currently employed by UPMC Health Plan as a health promotion specialist, developing worksite wellness programs. Participating in governance since her student days, she was in the Student Government Association at GSPH, has been involved with the GSPH Alumni Society since graduation, and serves as the president of the University of Pittsburgh Alumnae Council.

Secretary/Treasurer:

Thomas Brindock, MPH '04

Tom received his dental degree from the University of Pittsburgh in 1976. Following that, he worked in private practice and as a consultant and practitioner with the Allegheny County Health Department for 10 years. For the next 15 years, he was an assistant professor of dental medicine in the Department of Restorative Dentistry at Pitt. Following completion of his MPH degree in 2004, Tom re-entered private practice and is also involved in a regional community health center.

Member-at-Large:

Diego Chaves-Gnecco, MD, MPH '00

In 2002, Diego Chaves-Gnecco created the first pediatric bilingual clinic in southwestern Pennsylvania, which has since expanded to become the program Salud Para Niños (Health for the Children) at Children's Hospital of Pittsburgh (CHP). At Salud, culturally and linguistically competent primary care for children and families is complemented with activities oriented toward prevention and empowering the community about its own health. In addition to his activities with Salud, Diego is a fellow in child development and behavioral pediatrics at CHP. He has been a guest lecturer for several GSPH courses and the activities of Salud serve as an example in various courses at GSPH.

Member-at-Large:

Lucas Musewe, DrPH '02

Lucas Musewe is the director of partnership for the family support management information system at Pitt's Office of Child Development. In addition to his doctoral degree from GSPH, he holds a Master of Public Administration and Health Services Administration degree. In 2003, Lucas received the Best Doctoral Dissertation of the Year Award in GSPH's Department of Behavioral and Community Health Sciences. He is an active member of Delta Omega, the National Honor Society of public health and in 2005, Lucas received a Pitt Innovator Award for his information technology innovation that led to a commercialized licensing agreement. ■

alumni

Lauding Our Laureate

GSPH alumnus receives University's highest award

Thomas M. Priselac (MPH '75), CEO of Cedars-Sinai Health System in Los Angeles, was recently named one of the University of Pittsburgh 2007 Legacy Laureates. He joins an elite group of alumni who have received the University's highest honor, which recognizes outstanding personal and professional leadership. He will be presented with the award on October 18 by Chancellor Mark Nordenberg.

In an era of increasing expectations for medical centers, but shrinking resources and reimbursements, Priselac's leadership at Cedars-Sinai has created an environment of quality and innovation. Rated as Los Angeles' most preferred hospital for all health needs for 19 consecutive years, Cedars-Sinai is fortunate to have him as their leader.

"To lead effectively, you must help build a shared vision for the future," says Priselac. "And the most important aspect in doing this is honesty: with yourself, with your colleagues, and with your institution."

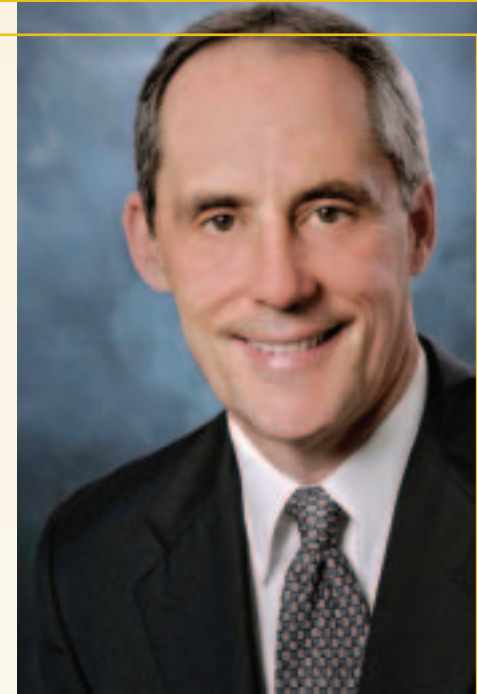
This approach has enabled Priselac to work effectively with the Cedars-Sinai board, employees, physicians, and community leaders to develop a model for combining compassionate, high quality patient care with outstanding research, education, and community service programs.

During Priselac's tenure as president and CEO, Cedars-Sinai has risen to the top ranks of non-university academic medical centers. Its faculty receives approximately \$50 million annually in research grants and contracts, including \$25 million in highly competitive research grants from the National Institutes of Health.

Priselac's leadership and commitment is also reflected in the depth and breadth of Cedars-Sinai's community benefit programs, evidenced by community programs such as the Community Outreach Assistance for Children's Health (C.O.A.C.H. for Kids and Their Families™) program. This program provides primary care and mental health services to children in underserved communities using two mobile medical units. It has received numerous honors, including the American Hospital Association's NOVA Award in 2003.

Over the years, Priselac's leadership has benefited not only Cedars-Sinai, but also the many community, professional, and academic organizations in which he has participated. Recognition within the past few months includes election to the chair-elect position for the American Hospital Association (AHA) and reception of the 2007 National Healthcare Leadership Award from the National Center for Healthcare Leadership. He is currently the immediate past chair of the Association of American Medical Colleges (AAMC) and has served as the chair of the California Hospital Association, the Hospital Association of Southern California, and the AAMC Council of Teaching Hospitals. Board service has included the AHA, VHA, the National Committee for Quality Healthcare, and the California Healthcare Foundation. Priselac also currently chairs the Healthcare Committee of the Los Angeles Area Chamber of Commerce.

He also lectures extensively at professional meetings and universities on various aspects of health care delivery and leadership and is an adjunct professor at the UCLA School of Public Health. He is the executive in residence for the GSPH Department



^ Thomas M. Priselac (MPH '75)

of Health Policy & Management for the 2007-08 academic year.

A native of Pennsylvania, Priselac earned a bachelor's degree in biology from Washington and Jefferson College and an MPH from GSPH. Following four years as an administrator at Pittsburgh's Montefiore Hospital, he joined Cedars-Sinai as an assistant administrator in 1979. He held a series of increasingly responsible positions at Cedars-Sinai before being named executive vice president in 1988 and president and chief executive officer in 1994.

Priselac far exceeds the standards set by Pitt's Legacy Laureates. As a transformational leader in all areas of his reach, GSPH is proud to call him an alumnus.

Congratulations, Tom! ■

alumni

2000s

Megahn Beck (MA '07) accepted a genetic counselor position at Kaiser Permanente Genetics Department in San Jose, Calif.

Jennifer (Lazorchak) Dee (MHA '07) accepted a position as operations coordinator for Children's Hospital of Pittsburgh Community Pediatrics.

Lauren Filbert (MS '07) is working as a genetic counselor at Eastern Virginia Medical School.

Adam Melton (MHA '07) is an administrative fellow at Wake Forest University Baptist Medical Center in Winston-Salem, N.C.

Julie (Giombetti) Moss (MPH '07) is working as a research specialist for UPMC's Program in Epidemiology.

Gretchen Piatt (MPH '03, PhD '06) is working in Atlanta at the Centers for Disease Control. She is a health scientist in the Division of Diabetes Translation.

Brian Shirts (PhD '06) recently received the Dr. S. Sutton Hamilton MSTP Scholarship Award from the Pitt School of Medicine, where is completing his medical degree.

Natalie Solomon (MPH '06) accepted a position as a contract development manager with ValueOptions, Inc., the nation's largest independent behavioral healthcare company.

Julie (Blasiole) Straub (MPH '04) is a research coordinator at VA Pittsburgh Healthcare System.

Jacqueline Weaver-Agostoni (MPH '07) is family medicine residency faculty at UPMC-Shadyside.

1990s

Abirami Chidambaram (PhD '91) has assumed the position of technical manager and supervisor, DNA section, in the Scientific Crime Detection Laboratory with the Alaska State Department of Public Safety.

George Kickel (MSHyg '90) recently became the director of environment, safety, health, and regulatory compliance at LORD Corporation, a leading maker of adhesives and coatings as well as vibration, noise, and motion control products

1980s

Mohomed Youssouf (DrPH '89) recently relocated to Tunisia, Africa, to become manager of the African Development Bank.

1970s

Robert Kambic (MSHyg '73) is the senior advisor for healthcare policy and health informatics for the Centers for Medicare and Medicaid Services of the U.S. Department of Health & Human Services.

Robert Turner (MPH '74) recently moved from Wisconsin to Wyoming to become the president and CEO of Wyoming Medical Center.

Katherine (Levine) Bezinovich (MPH '77) is a hospice nurse for Horizon Hospice in Chicago.

Keep in touch!

Have you changed jobs? Earned another degree or special award? Did you get married or have a baby? Did you relocate? Keep your alma mater and fellow graduates informed of the changes in your life. Simply return the enclosed reply card, visit the alumni section of the GSPH website (www.publichealth.pitt.edu), or send us an e-mail at contact@gsphdean.gsph.pitt.edu. We'll publish your updates in the next issue of PublicHealth.



Laugh Track

Can an innovative sitcom influence health beliefs?

Jennifer Middleton, MD, is a student in GSPH's Multidisciplinary Master of Public Health (MMPH) program. She is the most recent recipient of the William T. Green Jr. Award in Public Health Studies. The award monies will be used to offset the costs of an upcoming research study designed to test the effect of Dr. Middleton's innovative television program *White Coats* on the health beliefs of viewers.

Q: *What is White Coats?*

A: *White Coats* is a patient education sitcom featuring a fictional married couple of family medicine physicians who work in the same practice. It shows these two doctors in both their professional and private lives and uses moments both humorous and serious to teach patients about a wide variety of health topics. Some of the topics in the first three episodes include prenatal care, smoking and lung cancer, living wills and end-of-life care,

and childhood vaccinations. The fourth episode, currently in progress, deals primarily with hypertension.

The goal with *White Coats* is for it to be educational, but also engaging and entertaining. The theory is that if people enjoyed what was going on, really connected with the characters, laughed from time to time, they would learn more, because they'd be more invested in what was going on in the screen

Q: *How was White Coats started?*

A: During my residency at UPMC St. Margaret Hospital, I became increasingly aware of the many influences affecting my patients' health beliefs. Messages that ran counter to my directives to quit smoking, exercise, and practice safe sex seemed to have more power in my patients' decision-making.

White Coats is actually the brainchild of my research partner Dr. Tim Wallace, who was a resident with me at St. Margaret's. We learned from well-conducted studies that patients readily accept education in video format and often prefer it to written or in-person information. To our knowledge, however, no one has yet designed video patient education in an intentionally narrative style. So we worked together to use our interests and our backgrounds to create this sitcom that uses likeable, recurring characters and an evolving plot to deliver important health messages.

Q: *Have you measured the effect of White Coats on viewers' health beliefs?*

A: For the first three episodes, we were just learning about the process and basing our decisions on a lot of assumptions, but now we're ready to test whether this medium really does have the potential to positively influence health beliefs. The fourth episode is in pre-production right now and is going to be the basis for a research study.

For the study, we'll recruit 200 participants from patients in the waiting room at UPMC St. Margaret Lawrenceville Family Health Center. Our specific hypothesis is that subjects exposed to *White Coats* and a patient education hand-out (versus those exposed to the patient education hand-out alone) will have the following belief changes regarding hypertension, which is the episode's main health message:

- increased perceived seriousness;
- increased perceived susceptibility;
- decreased barriers to control;
- increased self efficacy; and
- increased outcome efficacy.

Evaluation of these belief changes will consist of pre- and post-testing with a self-administered written survey.

Above Left: Drs. Jennifer Middleton and Tim Wallace write, produce, and star in White Coats

student profile

Q: *How is the study funded?*

A: The research study and production of the fourth episode are made possible by the William T. Green Jr. Award in Public Health Studies, which helps GSPH students pursue special projects in public health. Because we have invested a great deal of our own funds to date (including computers, video cameras, software, etc.) funds from the Green Award will be crucial to the research study.

Q: *What goals do you have for White Coats?*

A: As far as testing its effect on health beliefs, we hope to extend our research into other chronic health problems. Also, we hope to eventually conduct studies regarding how *White Coats* influences the public's perceptions of family medicine, a specialty that is poorly understood by the American public. For real-world applications of the program, we'd like *White Coats* or a similar program to be integrated into electronic health records. For instance, a relevant episode could be shown to a patient in a waiting room, based on his or her responses to the intake survey.

All episodes are available for viewing by visiting the GSPH website: www.publichealth.pitt.edu/whitecoats

Q: *Can you lead the readers through production of an episode from start to finish?*

A: It's pretty much a two-person show, as far as coming up with a concept and deciding on the main teaching points for the episode. One of us composes a first draft of the script. At some point, I evaluate the behavior theory concepts that are included in the script. A casting call follows; all the actors are volunteers. Then we schedule a weekend to borrow the PCTV equipment. Whenever we can find a weekend when all of those magical things come together, we film pretty much non-stop through an entire weekend. It takes hours and hours and hours of footage to create a 30-minute television show. I've learned a lot about the filming process!

Q: *Now a little about you. What drew you to the MMPH program at GSPH?*

A: The third year of medical school is very clinically oriented. During all the time that I was in clinical settings, I kept seeing things that just shouldn't have happened in the first place. I knew at that point that I wanted to specialize in family practice, because I was interested in the whole individual in the context of the community. And a key element to family medicine is preventive care, so it was natural to add public health education to my medical training.

Q: *Any last comments about the project?*

A: Yes. First, I want to thank all of the people and organizations that make production of *White Coats* such a rewarding project. PCTV lets us use their recording equipment. We use the offices at St. Margaret's for the setting of the at-work scenes in the series. And we're working with Lawrence Family Health Center to recruit subjects from their waiting room for the hypertension study. ■



Cultural Confidence

CMH outreach program is also a classroom for public health professionals

Take a Health Professional to the People Day, the annual outreach program developed by the Center for Minority Health (CMH), has received national acclaim for its innovative approach to making connections between health providers and African American communities. The program sends teams of physicians, nurses, health educators, and other public health professionals to selected barber shops and beauty salons in Pittsburgh to provide life-saving information and health screenings and build trust with the community.

Far too many African Americans have no “medical home” to access health care services. Therefore, CMH created Take a Health Professional to the People Day. “By focusing our efforts on a single day, we believe we can help generate a greater understanding of the importance of regular health screenings while at the same time reaching people who tend to have the least access to health care,” explains Stephen B. Thomas, PhD, director of CMH and Philip Hallen Professor of Community Health & Social Justice.

Now in its sixth year, Take a Health Professional to the People Day has also



^ Take a Health Professional to the People Day

become a classroom of sorts for public health professionals. For this year’s event on September 20, CMH welcomed colleagues from the Mayo Clinic, including clinicians, faculty members, and scholars, to take part in the outreach effort.

“The first step to addressing the significant health disparities that plague minority and underserved populations in the U.S. is building trust by reaching out to them in their own environments,” says Dr. Sherine Gabriel, director of education resources for the Mayo Clinic Center for Translational Science Activities (CTSA). CMH, an NIH-NCMHD designated Center of Excellence in Minority Health

Disparities, provides support for all CTSA sites as they strive to implement and improve minority health programs.

The Mayo Clinic has participated in several of CMH’s community outreach activities over the past few years, a collaboration that has led to the development of the Mayo Clinic’s Urban Immersion Program. The program offers extended field experience in

community outreach activities as part of the Clinical and Translational Sciences track curriculum for master’s and PhD students.

“Through our collaboration with Dr. Stephen Thomas and the CMH, we learned about effectively engaging minority populations in clinical research; we now plan to apply those lessons into our own clinical, research, and education programs here at Mayo Clinic,” said Mayo’s Gabriel. ■

CPHP Expansion

The Center for Public Health Practice (CPHP) at GSPH is pleased to be reunited within the main body of the Graduate School of Public Health. The new location on the 7th floor of Crabtree Hall affords space for the center’s expanded staff and increases the opportunities for interactions with students, faculties, and staff among other schools on campus. In celebration of its new location, CPHP held an open house on September 14. GSPH students, faculty, and friends of the school were encouraged to tour the new location,

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interact with CPHP faculty and staff, learn about student opportunities, hear how CPHP connects the academic and

the practice public health communities, and have a good time. During the event, CPHP unveiled its new 2007 Vision and Mission.

Vision: A sustainable and resilient public health system.

Mission: The Center for Public Health Practice is a catalyst for engaged scholarship in public health through applied research, practice-based teaching, and professional service. ■



Partnerships in Prevention

CMH helps African faith communities fight the AIDS pandemic

This summer, Stephen B. Thomas, PhD, director of the Center for Minority Health, and Sandra Quinn, PHD, professor of behavioral and community health sciences, traveled to Africa as part of a collaborative effort to educate and empower faith communities to take a leadership role in AIDS prevention efforts. CMH collaborated on the project with the Metro-Urban Institute of the Pittsburgh Theological Seminary (PTS) and the Network of African Congregational Theology (NetACT).

On July 28, the delegation from Pittsburgh traveled to Cape Town, South Africa, where they were hosted by the Faculty of Theology at Stellenbosch University. They attended presentations on AIDS activities of churches and met with officials from Africa Institute for HIV/AIDS Management at Stellenbosch University. They also visited the J.L. Zwane Memorial Presbyterian Church and community center in Guguletu, which has extensive AIDS ministries. Guguletu is one of the largest black townships near Cape Town, South Africa.

The group then traveled to Lusaka, Zambia, where they participated in a conference titled The Effects of the AIDS Pandemic and Poverty on Church Life in Sub-Saharan Africa: Stewardship Implications. The conference was sponsored by NetACT, hosted by Justo Mwale Theological College and attended by theological educators from colleges across eight countries in Sub-Saharan Africa.

<
Sandra Quinn shows children in Guguletu Township, South Africa, some photos she took of them.

Thomas and Quinn gave a presentation titled “Building Trusted Partnerships for HIV Prevention: Danger and Opportunity for Public Health & the Church.” The presentation emphasized that churches can help change social norms and eliminate the stigma of HIV/AIDS so that open and honest discussions about HIV prevention can take place. They showed how public health can help the faith community in these efforts, including:

- understanding the language of epidemiology and the science of population health
- understanding the science of prevention
- conducting community needs assessments
- planning and evaluating programs
- providing access to a wide network of other organizations committed to HIV prevention

Quinn reflected on the challenges of HIV and churches in Africa, “To a great extent, many churches have responded to the HIV epidemic by providing care to those who are ill,” she said. “Although that is vitally important to the individuals and families affected, it is essential that churches begin to look at how they hamper HIV prevention efforts. Our efforts focused on helping churches and theology colleges to develop a greater understanding of the complex challenges of prevention and the role they can play.” Discussions about future efforts that could grow from the partnerships formed at this meeting are ongoing. ■



Who's Monitoring Drug Ads?

GSPH research suggests the FDA lacks resources for timely review of direct-to-consumer ads

Spending on direct-to-consumer advertising by the pharmaceutical industry has increased dramatically over the past decade, but Food and Drug Administration (FDA) regulatory oversight has not kept pace. That was the conclusion of a study led by Julie M. Donohue, PhD, assistant professor of health policy and management, that was published in the August 16 issue of the *New England Journal of Medicine*.

The study found that real spending on direct-to-consumer advertising increased by 330 percent from 1996 to 2005 and made up 14 percent of total promotional expenditures in 2005 compared to less

than 9 percent in 1996. However, the FDA's monitoring of these advertisements, as measured by the number of warning letters issued by the agency in response to ads that don't pass regulatory muster, decreased from 22 in 1997 to only 7 in 2006. The number of letters issued for false and misleading claims in all promotional materials (including those directed at physicians and consumers) declined from 142 in 1997 to only 21 in 2006. Pharmaceutical ads are not required to be approved by the FDA before they air, so it is possible that by the time an ad is reviewed and a letter issued, the ad campaign has already run its course. The study also notes that in 2004, only four

FDA staff members were reviewing direct-to-consumer pharmaceutical advertisements. The marketing of prescription drugs directly to patients has come under scrutiny in light of recent revelations about problems with adverse drug reactions that became apparent only after the drugs had been on the market and aggressively advertised for several years.

“Our analysis found that the trend toward increasing spending on direct-to-consumer advertising is likely to continue and efforts to enforce more stringent guidelines on such practices would require not only significant changes by the pharmaceutical industry but by the FDA as well,” explained Donohue. She notes that the FDA is responsible for regulating the safety of products that make up nearly one-quarter of the U.S. economy.

Two influential agencies calling for increased FDA oversight of direct-to-consumer advertising are the Institute of Medicine and the U.S. Government Accountability Office. Both have found that the FDA's enforcement of regulations governing direct-to-consumer advertising is inadequate. Legislation has been proposed in both the U.S. Senate and the House of Representatives that would give the FDA the power to screen all drug advertisements before they air and to place a moratorium on ads for a particular drug for several years after it has been approved.

Donohue and colleagues found that the pharmaceutical industry's total real spending on drug promotions almost tripled—from just over \$11.4 billion to almost \$30 billion—between 1996 and 2005. They also found that the overwhelming majority of drug advertising was targeted to physicians. However, over the past nine years, spending on direct-to-consumer advertising and free samples has risen as a share of the total promotion budget, whereas investment in advertising in professional journals fell. Spending on direct-to-consumer advertising was concentrated among a relatively

research

small number of brands. The 20 drugs with the highest spending made up more than half (54.4 percent) of total industry spending on advertising in 2005. These

drugs were predominantly new drugs used to treat chronic conditions; 10 of the top 20 drugs, as ranked by advertising spending, were introduced in 2000 or

later. Notably, nearly all (17 of 20) advertising campaigns for the most heavily advertised drugs began within a year of receiving FDA approval. ■

Do Pro-Tobacco Ads Target African-Americans?



According to a University of Pittsburgh study published in this month's *Public Health Reports*, African-Americans are more likely targets than Caucasians for pro-tobacco advertising.

Brian A. Primack, MD, EdM, senior author of the study, is an assistant professor of medicine and pediatrics at School of Medicine. Co-authors of the study include James E. Bost, PhD, and Michael J. Fine, MD, MSc, both from the School of Medicine, and **Stephanie R. Land, PhD**, from GSPH's Department of Biostatistics. Both Dr. Primack and

Dr. Land are also members of the Reduce Smoking and Exposure to Tobacco (RESET) Center, a new program founded by Dean Burke.

Smoking remains the leading cause of preventable death and disease in the United States, causing more than 440,000 deaths annually and costing more than \$150 billion in direct and indirect costs each year; African-Americans currently bear the greatest burden of this morbidity and mortality.

For the study, the team evaluated data from both predominantly African-American and Caucasian markets using studies from peer-reviewed journals. By extracting the number of total media messages, the number of tobacco-related messages, and the number of residents living in each market area, they were able to calculate the concentration and density of tobacco advertising in each market. "According to our data, the concentration of pro-smoking signage is approximately 70 percent higher for African-Americans," said Primack. "Our results also showed that there are about 2.6 times as many advertisements per person in African-American areas as compared to Caucasian areas."

The findings, Dr. Primack notes, suggest that African-Americans may be special targets of the tobacco industry. "This population may require specific public health interventions to counter the effect of unbalanced pro-tobacco promotion. Just knowing that they may be special targets could motivate African-Americans to refuse to fall prey to industry tactics and help them avoid smoking," he said. ■

\$1.4 Million to Study Long-Term Meth Use Effects

GSPH Professor and Chair **Ron Stall, PhD, MPH**, recently received a federal grant to study the long-term health effects of methamphetamine (meth) usage among men who have sex with men (MSM). The \$1.4 million study will take place over five years and is funded by the National Institute on Drug Abuse.

The health consequences of meth use are well documented and include not only addiction and drug overdoses, but also increased risk for infection with HIV and other STIs, blood-borne transmission of hepatitis C and HIV, and serious mental health disorders. However, the question of *how* these health problems are related to meth use is as yet incompletely understood. A direct effect of meth use alone on producing these health problems seems unlikely; such a diverse set of problems must involve interactions with other intrapersonal, social, and psychological conditions.

To the extent that the study team can identify intervening variables on the pathway between meth use among MSM and poor health outcomes, they will be in a position to design interventions to minimize the harm that meth poses to health. Specific aims of the study include the following:

- to identify the precursors of meth use among MSM
- to identify the development of co-morbidities among MSM meth users

- to test whether substance use drives HIV risk among minority men
- to test whether meth use hastens progression of HIV
- to test whether cessation of meth use raises health levels

The research team hopes that their analyses will yield real-world interventions to prevent adverse health consequences. For example, if experiences of homophobic attacks during adolescence predict greater substance abuse and HIV infection in adulthood, possible methods to prevent substance abuse are stronger community-based prevention programs (e.g. more effective enforcement of anti-bullying laws in public schools) or targeting of

victims of homophobic attacks for individual interventions.

Stall's team will utilize data from the Multicenter AIDS Cohort Study (MACS), an ongoing prospective study of the natural and treated histories of HIV infection in homosexual and bisexual men conducted by sites located in Baltimore, Chicago, Pittsburgh and Los Angeles. A total of 6,973 men have been enrolled. The men are followed every six months with interviews, physical examinations, and collection of blood. ■





Low Vitamin D

Linked to Higher Risk of Hip Fracture

Women with low levels of vitamin D have an increased risk of hip fracture, according to a study led by GSPH Professor Epidemiology Jane A. Cauley, DrPH.

Cauley and colleagues evaluated patient data on 400 women enrolled in the Women's Health Initiative Observational Study Cohort who had experienced hip fracture, confirmed by their medical record, over a median of 7.1 years. Levels of 25 hydroxyvitamin D, an indicator of vitamin D status, in the bloodstream were measured for these patients and compared with those of a control group matched for age, race, ethnicity and the date of relevant blood work. As vitamin D concentrations decreased, the risk of hip fractures climbed.

“The risk of hip fractures was 77 percent higher among women whose 25 hydroxyvitamin D levels were at the lowest concentrations,” said Dr. Cauley, who has spent much of the past 15 years investigating the physical changes that take place in postmenopausal women. “This effect persisted even when we adjusted for other risk factors such as body mass index, family history of hip fracture, smoking, alcohol use, and calcium and vitamin D intake.”

Vitamin D deficiency early in life is associated with rickets—a disorder characterized by soft bones and thought to have been eradicated in the United States more than 50 years ago.

Though the exact daily requirement of vitamin D has not been determined, most experts think that people need at least 800 to 1,000 international units (IUs) per day. Many experts believe the current recommended levels of 400 IUs daily should be increased.

The vitamin is manufactured in the skin after sun exposure and is not available naturally in many foods other than fish liver oils. Some foods are fortified with the vitamin.

Dr. Cauley's work also focuses on use of estrogen, risks of hip fractures, bone density, and cholesterol levels of women going through menopause. As a co-principal investigator for the University of Pittsburgh's site of the Women's Health Initiative, a National Institutes of Health-sponsored study, Dr. Cauley and her colleagues continue to examine the effects calcium and vitamin D have on osteoporosis. ■

research

Dean Burke Named Global Health Research Ambassador

GSPH Dean Donald S. Burke, MD, has been named an ambassador by Research!America's Paul G. Rogers Society for Global Health Research. He is one of 50 of the nation's foremost global health experts who have now joined forces to increase awareness about the critical need for greater U.S. public and private investment in research to improve global health.

"Our nation's leaders must understand that increased U.S. investment in global health research will help improve health conditions in impoverished countries and also help to prevent the emergence and spread of diseases that can endanger Americans here and abroad," said Burke. "Put simply, it's a matter of national security."



In his new leadership position as an ambassador, Burke will work to raise the visibility of global health research through the news media and in meetings with policy makers, opinion leaders, and the public. One of his central messages will be to emphasize the importance of effective collaboration among the nation's government, industry, academic, patient advocacy, and philanthropic research sectors. ■

Joseph Schwerha Co-Authors Critical IOM Report

Joseph J. Schwerha, MD, MPH, professor in the Department of Environmental and Occupational Health, is the co-author of a recent report issued by the Institute of Medicine (IOM). *Training Physicians for Public Health Careers* was created by a committee of pre-eminent public health professionals and physicians. Schwerha was the only member of the committee to have



^ Dr. Felicia Wu

an appointment in a school of public health, lending credibility to the training provided to physicians by the University of Pittsburgh Graduate School of Public Health.

The report is a result of a U.S. Congressional mandate to the IOM. Concerned about a lack of well-trained physicians, IOM launched a study to determine (1) what knowledge and skills are needed by public health physicians, (2) the number of programs needed to maintain an adequate supply of physicians trained for public health careers, and (3) how these programs can be funded. ■

Risk Analyst Award to Felicia Wu

The Society for Risk Analysis (SRA) has awarded Felicia Wu, PhD, the highly prestigious 2007 Chauncey Starr Award, which each year honors the individual age 40 or under who has made the most exceptional contributions to the field of risk analysis. Dr. Wu, an assistant professor of environmental and occupational health at GSPH, specializes in the use of risk and economic analysis in environmental health and policy.

Her research applies mathematical modeling and social science tools to environmental health problems. Her ongoing research areas include indoor environmental quality, mycotoxins, and genetically modified crops.

Dr. Wu is the recipient of an NIH Early Career Award. She chaired an international conference on indoor environmental quality

in 2005. She has served on review panels of the National Science Foundation and the USDA and is a consulting editor of the *Archives of Environmental & Occupational Health* and an area editor (economics and regulation) of the new *World Mycotoxin Journal*. She has also served as an ad-hoc reviewer for multiple journals including *Science, Environmental Science & Technology, Journal of Toxicology, American Journal of Respiratory and Critical Care Medicine, and Risk Analysis.* ■

Former Dean Goldstein to Chair IOM Interest Group

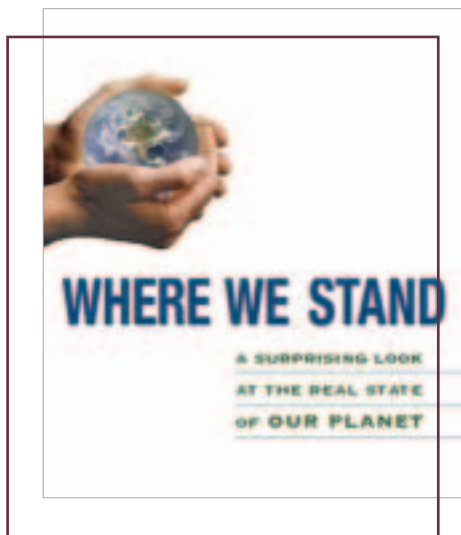


^ Dr. Bernard Goldstein

Bernard Goldstein, MD, has been chosen as the first chair of the new Interest Group on Environmental and Occupational Health and Toxicology formed by the IOM. Interest groups are a recently developed IOM organizational structure that have the goal of providing an opportunity for members to interact across disciplines, enrich their understanding of pertinent scientific and policy topics, and contribute to the work of the Institute.

Goldstein has participated in more than 20 National Academies of Science committees and has been chair of 10 of them. He currently is chair of the Standing Committee on Risk Analysis Issues and Reviews and a member of the IOM Roundtable on the Environment and Health. He is also past chair of the IOM Section on Public Health, Epidemiology, and Biostatistics. ■

Where We Stand: A Surprising Look at the Real State of our Planet



GSPH Visiting Professor of Environmental and Occupational Health Seymour Garte, PhD, has just published a new book. *Where We Stand: A Surprising Look at the Real State of Our Planet* was written for the general public and contains historical, philosophical, political, and scientific treatments of the global progress that has been made in the environment, public health, and quality of life for humanity. The book has a uniquely positive and hopeful viewpoint, in a sea of depressing and frightening literature in the field.

About the book, Dr. Garte writes the following: “When it comes to environmental pollution, longevity, infant mortality, diet and nutrition, conservation of species, and many other human health and welfare issues, the human population is doing great. ‘How can this be true?’ you ask. ‘Is this guy an apologist for the right wing, industrial, polluting, corporate pillagers of the Earth?’ Actually I’m not. I’m a professor at GSPH and have been an active participant in environmental and public health related research and practice for 30 years.

“In my book, I don’t stop at *showing* how things have been steadily improving over the past decades; I discuss why this has been true. It’s because scientific

research, social activism, and strong regulatory action forced changes in the way businesses and people operate, and these changes have been successful.

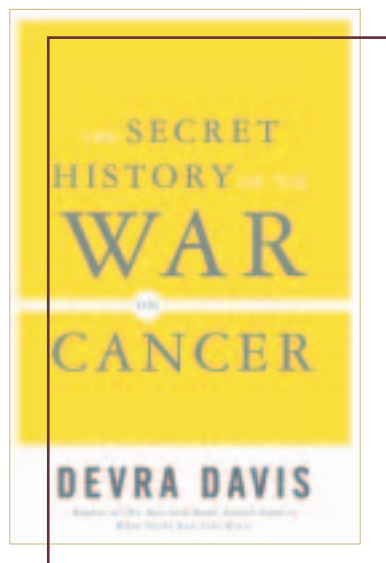
“Do we really need to know this or should we just keep on imagining that we are on a long ride down the tubes to annihilation? I know it is not fashionable to be an optimist, but I also think continuous and unbridled pessimism has its dangers. Why don’t we take a good look at the real state of our planet? We might be surprised.” ■

The book is available in bookstores and through major online retailers.

The Secret History of the War on Cancer

In early October, GSPH epidemiology Professor Devra Davis, PhD, MPH, released a new book positing that the war on cancer was first run by leaders of industries that made cancer-causing products and sometimes also profited from drugs and technologies for finding and treating the disease. Filled with compelling personalities and never-before-revealed information, *The Secret History of the War on Cancer* shows how we began fighting the wrong war with the wrong weapons against the wrong enemies—a legacy that persists to this day.

The book discusses the major public health effort diverted and distorted for



private gain that is about to be reclaimed. The recent launch of green efforts in health care and other businesses provides a vital new public health front that gets rid of known and suspected cancer-causing materials and promotes safer choices. ■

Roberta Ness Named President-Elect of American College of Epidemiology

At the annual meeting of the American College of Epidemiology in September, Roberta Ness, MD, MPH, was announced as the group’s president-elect for 2007-08. Ness is professor of epidemiology, medicine, and obstetrics/gynecology at Pitt; chair of the Department of Epidemiology at GSPH; director of GSPH’s Women’s Health Program; and director of cancer epidemiology at the University of Pittsburgh Cancer Institute.



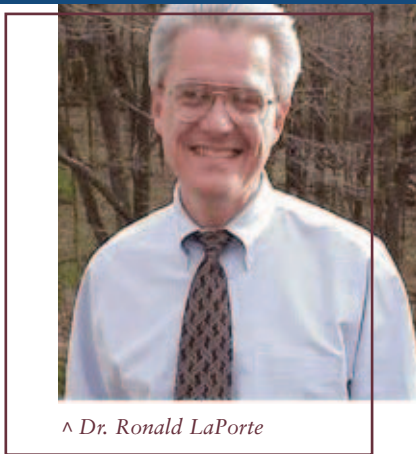
▲ Dr. Roberta Ness

Ness has been at the forefront of women’s health research, being one of the first to propose the research paradigm now termed “gender-based biology.” Specific areas of her interest include studies in the epidemiology of reproductive cancers, preeclampsia, and pelvic inflammatory disease. Currently, she is examining the novel hypothesis that pelvic inflammation is involved in the genesis of ovarian cancer. She also has NIH and DOD grants to conduct a large case-control study to explore whether cytokine polymorphisms, aspirin use, and NSAID use may alter ovarian cancer risk. A second major interest is exploration of reproductive history as a barometer for later risk of cardiovascular disease. An ongoing project in preeclampsia

is exploring pathways between maternal cardiovascular risk, abnormal placentation, inflammation, and oxidative stress. Finally, Ness is conducting two cohort studies assessing vaginal microflora, sexually transmitted infections, and pelvic inflammatory disease (PID). These projects focus on the intersection between host inflammation, endogenous microflora, and bacterial pathogens in the etiology of PID. ■

Ronald LaPorte Named Director of MMPH Program

Ronald LaPorte (PhD '76), GSPH alumnus and professor of epidemiology, was recently appointed by Dean Burke to lead the



school's multidisciplinary master of public health (MMPH) program.

LaPorte was trained as a cognitive psychologist before taking postdoctoral training in epidemiology. He has been on the faculty in GSPH's Department of Epidemiology since 1981, during which time he has published

513 articles and has completed research in diabetes, injuries, and many other areas. He is the director for disease monitoring and telecommunications at the World Health Organization (WHO) Collaborating Centre at Pitt and was the principal investigator for the WHO multinational project for childhood diabetes. He was the first recipient of the Distinguished Teacher Award at the University of Pittsburgh and winner of the Lilienfeld award from the American Public Health Association for lifetime achievements in education. He is most proud of his former students, which include a dean, a chancellor, four center directors, and chairpersons around the world. He believes that "the best mentor is one whose students surpass him." His primary efforts now are in the area global education in prevention with the establishment of the Supercourse (www.pitt.edu/~super1). ■

In Memoriam



Carol L. McAllister

Carol L. McAllister, PhD, associate professor of behavioral and community health sciences, passed away on Saturday, September 15, after a courageous battle with breast cancer. Her son, Jonah McAllister-Erickson, was at her side. Dr. McAllister had just marked her 60th birthday on September 7. Her many

contributions to GSPH, Pitt and her community will be sorely missed by her family, friends and colleagues.

Dr. McAllister earned her bachelor's degree from Cornell University and a master's degree and a doctorate in anthropology from the University of Pittsburgh. Her research interests included social and cultural aspects of public health; economic, community, and cultural contexts of children's and women's health; and international developments and global health. She was the principal investigator of the Pennsylvania component of the multi-site national evaluation of Early Head Start, a federal initiative in early childhood health and development. She also served as research partner with a local Early Head Start program, investigating issues such as school readiness, family risk and infant mental health. She was a tireless advocate and worked in collaboration with many community groups to improve public health conditions for disadvantaged women and children.

Within GSPH, she was a member of the educational policies and curriculum committee and the Community Research Advisory Board in the Center for Minority Health. She served on the BCHS doctoral committee and coordinated the master of public health/doctorate in anthropology program. She joined the GSPH faculty in 1991.

Dr. McAllister is remembered by her friends and colleagues as someone who cared deeply about other people. "People felt listened to and respected and cared about in Carol's presence," said Tammy Thomas, coordinator of community programs in BCHS. "She always made time for people."

"I will always remember her love for people and her concern for social justice," said Natalie Arnold Blais, BCHS recruitment and academic affairs administrator. "If there was a choice to be made, she always chose the right thing, not the easy thing, and she would fight for that."

Dr. McAllister's interests were wide ranging: bicycling, canoeing, gardening, singing and photography were just some of her favorite activities. "Carol was chronically curious," said Thomas, "she loved to learn and often challenged herself mentally and physically."

A memorial scholarship is being established in Dr. McAllister's memory by the Department of Behavioral and Community Health Sciences, Graduate School of Public Health. Anyone wishing to make a contribution may do so by making out a check to the University of Pittsburgh and mailing it to the Department of BCHS, 214 Parran Hall, 130 DeSoto Street, Pittsburgh, PA 15261. Please write "Dr. McAllister" in the memo line of your check. ■

Shirley E. Johnson (MPH '63)

Shirley Elaine (Dresser) Johnson, MD, died on April 17, 2007, in Ontario at the age of 83. She was married for 48 years to Allen Campbell Johnson, MD, who predeceased her in 1992. A resident of Ontario nearly her entire life, she received her MD from the University of Western Ontario in 1944 and her master of public health degree from GSPH in 1963.

After earning her MPH from Pitt, Dr. Johnson served as a Public Health

▼ Shirley E. Johnson, MD



Physician III in charge of Disease Control with the Allegheny County Health Department, from 1963 to 1970. She organized a county-wide, single-Sunday mass measles campaign in the late 1960s and a similar rubella campaign in 1970. The latter became the largest singly-day immunization-by-injection campaign in the U.S. Jet injector guns were requested from military bases and public health agencies across the country to supplement the syringes used during the campaign. GSPH Professor Emeritus Russell Rycheck was on the steering committee. ■

Thank you to Mr. Stanton Jonas (MPH '72) for sending news of Dr. Johnson's passing.

Emil A. Pfitzer (MS '56, ScDHyg '61)

Dr. Emil Pfitzer passed away on July 20, 2007. After receiving his doctoral degree from GSPH, Dr. Pfitzer remained on the faculty conducting research and teaching in occupational health. In 1965, he moved to the University of Cincinnati School of Medicine to conduct toxicology research. In 1972, he joined Hoffmann-La Roche pharmaceutical company where, for 23 years, he was international manager for toxicology and pathology and was responsible for the safety evaluation for many of the company's most significant pharmaceutical and chemical products.

Dr. Pfitzer has had adjunct faculty appointments at several universities and has served on numerous committees for the National Academy of Sciences, the National Institute of Environmental Health Sciences, the National Institute for Occupational Safety and Health, the National Center for Toxicology Research, and the World Health Organization. He is a past president of the Society of Toxicology, the American Board of Toxicology, the Toxicology

Laboratory Accreditation Board, and the board of the Academy of Toxicological Sciences. Dr. Pfitzer served on the expert panel for the Research Institute for Fragrance Materials (RIFM) for five years and, after retiring from Roche in 1995, served as president of RIFM. At his passing, he was on the science advisory board for both the U.S. Environmental Protection Agency and the U.S. Food and Drug Administration.

During his illustrious career, Dr. Pfitzer received the Stokinger award for industrial toxicology from the American Governmental Conference for Industrial Hygienists, the Distinguished Graduate Award from GSPH in 1987, the 1995 Arnold J. Lehman Award from the Society of Toxicology, and the 1996 Toxicology Ambassador Award from the Mid-Atlantic Chapter of the Society of Toxicology.

The foundation provided by Dr. Pfitzer's graduate studies at GSPH clearly provided him with a lifelong passion for and commitment to the field of toxicology that resounded in all he did. ■

Recent Deaths

Adele Larson Diefenbach '54
Viron L. Diefenbach '54
Robert S. Borczon '57
Robert C. Krutz '55, '57
Mostafa El Batawi '57, '59
Arlene Summerhill Shultz '59
Edward P. Robinson '60
Della Slater '60
Joan Gordon DePaolis '62
Emil A. Pfitzer '56, '61
Shirley E. Johnson '63
Arnoldus Jakobus Devilliers '65
Arjuna O. Abayomi-Cole Sr. '69
Helen Clark Wright '70
Patricia Gregory Camp '82
Leslie Adrian Hurt '83
Lois Jean Thomas '83
Renee Lynn Ross '88
■



Relativity Theory

HPM grad finds positive influences throughout his career

Bill Holman's grandfather was a prescient man. "He asked me what I wanted to do with my life," recalls Holman (MPH '76). "Like most teenagers, I didn't have any idea. But I still remember my grandfather's response: 'You should think about working in a hospital as an administrator.'"

That is amazingly specific advice for a grandparent to give a young man, but it turned out to be right on target. Holman's career in hospital administration spans more than three decades. He presently serves as president and CEO of Baton Rouge General Medical Center/General Health System in Louisiana.

Holman, and his wife of 37 years, Marti, recently established the William R. Holman and Family Endowed Fund in the Department of Health Policy and

Management. "As you get older and reflect on what you've accomplished in your personal life and career, you truly appreciate the individuals and organizations that made a difference in your life. For me, it was very important to find a way to give back to the University of Pittsburgh GSPH because of the strong foundation the program and faculty provided me," he said of the motivation for establishing the fund. "This was a decision my whole family supported."

In addition to his grandfather, another "relative" had a hand in the direction Holman's career would take. "When I finished high school, Uncle Sam gave me my first job in healthcare as a medic," said Holman of his service in the United States Air Force. As an 18-year-old enlistee, the Boston native worked in

military hospitals stateside and did a tour in Vietnam before returning to earn his undergraduate degree in healthcare management at Northeastern University in Boston.

Throughout his career, Holman has learned from the example of others "I worked my way through college as surgery technician," he said. "The CEO at the hospital was my first mentor."

Holman then came to Pittsburgh to attend GSPH. The program and faculty made a lasting impression on him, providing him the fundamental skills and knowledge for a career that would take him from University Hospitals of Cleveland to Jefferson Hospital/South Hills Health System in Pittsburgh, and ViaHealth/Genesee in Rochester, New York, before settling in Baton Rouge. Along the way he had the opportunity to hone his management and leadership skills, serving in a variety of administrative positions with leading hospitals and health systems.

"I encourage new graduates to spend time in each area of healthcare operations, learning the fundamentals and identifying good mentors," he advised. "As a CEO, you need broad, fundamental operational skills and knowledge to serve your organization and provide the most effective leadership possible."

Holman advises, "I credit GSPH with helping me understand how important it was to have great mentors throughout my career. I think of the fundamentals as the essential building blocks—and mentors as the architects who help build on that foundation."

Holman still isn't sure now if his grandfather's comments were advice, guidance or a prediction but he hopes to provide the same insight to his first grandchild, due in April. "Both our daughters have careers in healthcare, so Marti and I won't be at all surprised to see our grandchildren playing with toy stethoscopes," he notes with a smile. ■

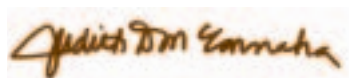
Thank You and Farewell

By the time this magazine is printed and mailed, I will have left my position as director of development at GSPH. My two-plus years at GSPH have been immensely rewarding and I have met many truly inspiring people with truly generous natures—alumni, friends, faculty, and staff.

Though I am moving on, I can't resist getting in one last appeal to alumni and friends of GSPH: *Your giving does make a difference at the school.* The check you write to our annual scholarship appeal helps reward the hard work of a student. The pledge you make to endow a fund allows department chairs the flexibility they need to seize opportunities as they arise. And the planned gift you make through a bequest in your will or a charitable gift annuity ensures that GSPH has a bright future.

One size never fits all. Not with shoes, not with parallel parking spaces, and certainly not with charitable giving. There are as many ways to make and designate a gift as there are people who give. Until a new director of development is brought on board, Michael LaFrankie, director of health sciences development for the University, will be able to help you find the right fit for you. Feel free to contact him at 412-647-9071 or lmichael@pmhsf.org.

Finally, thank you to everyone who has so generously supported GSPH. Your contributions have played a vital role in the school's accomplishments and I hope you will continue to be part of its success.



Judith D. McConnaha



^ Judith D. McConnaha

Mark Your Calendar

October 29, 2007

Fall Open House for Prospective Students

Talk with prospective students; share experiences and answer questions about GSPH.

GSPH, 9 a.m. – 1:30 p.m.

November 5, 2007

Reception for Alumni and Friends at APHA

Conference attendance not required to participate.

Washington, D.C. Renaissance Hotel, Meeting Room 8/9, 6:30 – 8 p.m.

November 12, 2007

Jay L. Foster Scientific Lecture in Alzheimer's Disease**

Speaker: Lon S. Schneider, MD,

Professor of Psychiatry, Neurology, and Gerontology at University of Southern California Keck School of Medicine
GSPH A115 Crabtree Hall, 4 p.m.

November 27, 2007

John C. Cutler Global Health Lecture**

Speaker: Willard Cates, Jr., MD, MPH, President, Family Health International
GSPH G23 Parran Hall, 3:30 p.m.

December 7, 2007

GSPH Student Scholarship Luncheon
A chance for scholarship recipients and their benefactors to meet and get to know each other.

Concordia Club, Pittsburgh, 12 p.m.

Holiday Art & Jewelry Sale

Proceeds benefit GSPH's Evelyn Wei Scholarship Fund.

GSPH 118 Parran Hall, 10 a.m. – 3 p.m.

December 18, 2007

UPMC-Jonas Salk Chair in Global Health Lecture**

Speaker: GSPH Dean Donald S. Burke, MD
Frick Fine Arts Auditorium, 4 p.m.

**available for online viewing after event (www.publichealth.pitt.edu/lecturearchive)

For more information about any of these events, please contact the GSPH Dean's Office at 412-383-8849 or ruempler@pitt.edu.

University of Pittsburgh Schools of the Health Sciences
cordially invites you to Winter Academies 2008

Winter Academy – East

February 22, 2008

Ritz-Carlton Resort & Spa

Naples, Fla.

Winter Academy – West

March 15, 2008

Arizona Biltmore Resort & Spa

Phoenix, Ariz.

***GSPH Dean Donald Burke to give
keynote presentation*

**For information or to request an invitation:
Pat Carver, cpat@pitt.edu, 412-647-5307
www.winteracademy.pitt.edu**



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