

**NEWS  
RELEASES  
2001**

**Article listing**

**December,  
2001**

Winter  
MedTips

**December 18,  
2001**

Study Finds  
Most  
Commonly  
Prescribed  
Antidepressants  
Similar in  
Effectiveness

**December 13,  
2001**

IU Pediatrics  
Professor's  
Work Gains  
National  
Recognition

**December 11,  
2001**

IU School of  
Medicine  
Physician  
Honored  
Abroad

**December 7,  
2001**

Christmas  
Comes Early  
At IU With  
Delivery Of  
Super MRI  
Scanner

**December 5,  
2001**

IU and GE  
Launch  
Institute for

December, 2001

**WINTER MEDTIPS**

Indiana University School of Medicine



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**Oh my aching back!** Without being aware of it, many women use their backs as joints, causing pain. "When lifting your holiday turkey or ham out of the oven bend at the knees and lift with your thighs," says Deborah Allen, M.D., professor of family medicine at the Indiana University School of Medicine. And she suggests using care in removing the hot and heavy roasting pan. "Many women," she says, "either use the wrong method to remove the hot pan from the oven or just can't lift something so heavy and end up burning their hands or arms." If you make brief and painful contact with a hot oven door, wall or shelf, she recommends putting ice on the burn for 3 to 5 minutes. If the burn blisters she suggests treating it with aloe, either from a plant or in a commercial lotion.

**What is the number one cause of sledding injuries?** According to Deborah Allen, M.D., professor of family medicine at the Indiana University School of Medicine, sled rides down hills into the street cause numerous serious injuries every winter. Buried tree stumps and other obstacles can cause the sled to stop and the rider to continue to an unhappy end. Also, dangerous are sled rides that end in the street. When there is a confrontation between vehicles and sleds, the sled rider always finishes second.

**Even Hanukkah latkes,** those delicious fried potato pancakes that Grandma used to make, can be part of a healthful diet, says Beth Wathen, M.S., R.D, a dietitian at the Indiana University School of Medicine's Center for Weight Management. Use a combination of non-stick spray and canola oils to fry the pancakes, and be sure the rest of the meal is low fat. Most important of all, watch your portions. Enjoy your latkes with family and friends and put the focus on the tradition of the oil that miraculously lasted eight days during the time of the Macabees.

**Spread out your holiday alcohol consumption** by sipping your drink and eating before or while drinking to avoid impairment, says James Klaunig, Ph.D., professor of pharmacology and toxicology at the Indiana University School of Medicine. The more food in your stomach, the slower the alcohol is absorbed into your blood and the less likely you are to become intoxicated. The best advice, of course, is not to drink and drive, but if you are going to drink, do so conservatively, limiting yourself to one or two drinks interspersed with nonalcoholic beverages and food over a period of time, he advises.

**For many, the holiday season is a time of celebration** with family and friends. But Beth Wathen, M.S., R.D., a registered dietitian at the Indiana University School of Medicine's Center for Weight Management, advises that if we are not careful, it can turn into a calorie-laden stress-filled time spanning from Thanksgiving to the Super Bowl. She says to avoid the many traps that are built into the holidays by making exercise a priority during this busy season. Exercise, which can be as simple as walking after eating, can help burn off extra calories, tone muscles and has the added advantage of helping work off some of that holiday stress.

Digital  
Radiology  
Imaging  
Education and  
Research

December 4,  
2001

Indiana  
Receives  
Funding To  
Expand Health  
Care  
Education,  
Access

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**Holidays can be especially stressful for the elderly.** Older adults often relinquish family leadership roles non-voluntarily producing a loss of identity which causes depression in many, says Anantha Shekhar, M.D., Ph.D., associate professor of psychiatry at the Indiana University School of Medicine. This loss of control is especially evident to the elderly during the holiday season, which stretches from Thanksgiving to New Year's Day, when they become guests at functions they formerly hosted. In addition, the break-up of the nuclear family, as well as death or impairment of spouse and siblings results in an increasing number of older Americans finding themselves alone at holiday time. Dr. Shekhar recommends that younger family members try to involve their elders in holiday preparations and make them feel an important part of the family during the holiday season.

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December 4,  
2001

IU School of  
Medicine  
Receives  
Funding To  
Study Means  
To Delay  
Diabetes'  
Onset

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**Looking for healthy holiday entertaining ideas?** Instead of a traditional holiday cookie exchange, Beth Wathen, M.S., R.D., registered dietitian at the Indiana University School of Medicine's Center for Weight Management, suggests inviting friends over for a light meal that includes vegetable soups, fresh breads, fruits and lettuce salads. She says the gathering does not need to revolve around eating to be fun. Structure the event so food is not the main focus and clear the food as soon as guests have eaten. Make sure there are plenty of other activities at the party such as board games, a white elephant gift exchange or build some exercise into the event and go caroling through the neighborhood.

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November 27,  
2001

Children's  
Health Book  
Free to Hoosier  
Families

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**It's the American fantasy** that the holidays are warm and wonderful, but holiday excitement may not meet the expectations of many folks, according to Deborah Allen, M.D., professor of family medicine at the Indiana University School of Medicine. Planning the holidays, especially when the family budget has tightened, may be stressful. And, many families do not resemble the ideal "TV family." "Holiday get-togethers may escalate and exacerbate bad relationships and even increase depression," says Dr. Allen.

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November 27,  
2001

Flu Shots Don't  
Trigger Asthma  
Attacks,  
National Study  
Reveals

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**Serving large portions of fruits and vegetables** as a main dish and a small portion of meat as a side dish is a healthy way to lose those extra holiday pounds, according to Beth Wathen, M.S., R.D., registered dietitian at the Indiana University School of Medicine's Center for Weight Management. She counsels against unrealistic New Year's resolutions, such as resolving to go on a drastic diet. Creativity in the kitchen with different food preparation techniques, such as steaming and roasting, and an emphasis on fruits and vegetables may be all it takes to get rid of the five to seven pounds the average American gains over the holidays.

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November 20,  
2001

Improving  
Patient Safety  
Through  
Information  
Technology

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**Ski helmets are as important as bike helmets** warns Deborah Allen, M.D., professor of family medicine at the Indiana University School of Medicine. Skiers come down the mountains at fast speeds and collisions can cause serious head injuries. Dr. Allen, an accomplished skier, says doctors can repair broken arms and legs but not broken heads, and thus head protection is extremely important. Ski helmets cover a broader portion of the head than bike helmets and a person should not use the same helmet for both sports. While ski gear such as poles, boots and the coolest ski jacket on the slopes are expensive, ski helmets are not. Dr. Allen

November 14,  
2001

Mini Medical

School  
Back to the  
Future:  
Experimental  
Spinal  
Procedures  
Promising

**November 12,  
2001**

Cognitive  
Impairment  
High Among  
Older People,  
IU Study  
Suggests

encourages all skiers from beginners to the most advanced to wear them, right over that cute woolen ski cap!

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**That scrumptious looking holiday buffet** you work so hard to prepare may be hazardous to your guests' health, says Sara A. Blackburn, D.Sc., R.D., clinical associate professor of nutrition and dietetics at the Indiana University School of Medicine. Food that sits out at room temperature too long, poultry that has not been properly handled, and salad dressing, egg nog or ice cream prepared with raw eggs may cause nausea and illness. Dr. Blackburn recommends keeping food out for as short a time as possible. Hand washing and washing of utensils and food preparation areas are important. To be extra safe, she recommends against using raw eggs in uncooked dishes at all. If you have the sniffles, she cautions, be sure to wash your hands frequently while preparing food. If not, you risk giving guests a gift they don't want -- your cold.

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**November 7,  
2001**

Mini Medical  
School  
Surgery Lends  
Cutting-Edge  
Treatment for  
Spinal Ailments

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317-274-7722  
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**October 31,  
2001**

Mini Medical  
School  
MRI: Journey  
to the Center  
of Your Brain

**October 24,  
2001**

Mini Medical  
School  
New Imaging  
Tools Focus  
On Cancer  
Detection,  
Treatment

**October 22,  
2001**

Boning Up On  
The Genetic  
Factors Of  
Osteoporosis

**October 17,  
2001**

IU Mini Medical  
School  
The Perils of  
Placebos: Are  
They Ethical?

**October 16,  
2001**

Participants  
Sought For  
Glaucoma  
Study At  
Indiana  
University

Swiss  
Hypertension  
Researcher To  
Receive 2001  
Beering Award  
At IU School of  
Medicine

**October 15,  
2001**

Therapies For  
Age-Related  
Macular  
Degeneration  
Under Review  
At IU

Physician/  
Patient  
Relationship a  
Necessary  
Covenant

**October 11,  
2001**

IU Mini Medical  
School  
Bioethics:  
Science With  
Conscience In  
Human  
Research

**October 10,  
2001**

New Faculty  
Joins IU Center  
for Bioethics

**October 4,  
2001**

Child Safety  
Takes Front  
Seat With New  
Statewide  
Program

**October 2,  
2001**

Fife Assumes  
Editor's Role  
With Clinical  
Journal

**October 1,  
2001**

Antibiotic  
Linked To  
Newborns'  
Intestinal  
Disorder

Pascuzzi  
Named Best  
Neurology  
Teacher

Rothenberg To  
Guide Title X  
Funding  
Allocation In  
Indiana

Bioethical  
Issues Probed  
At Indiana  
University  
Events

**September 26,  
2001**

IU School of  
Medicine  
Targets  
Ovarian  
Cancer with  
Department of  
Defense Grant

Computer  
Reminders

Can Increase  
Delivery of  
Preventive  
Care To  
Hospitalized  
Patients

**September 24,  
2001**

IU Study Looks  
To Increase  
Mammography  
Screening

**September 20,  
2001**

IU Physicians  
Return to  
Heroes'  
Homecoming

**September 18,  
2001**

Health Fair  
Benefits  
Community  
and Future  
Physicians

Special  
Program  
Focuses On  
Alternative  
Health Care,  
Treatment

**September 14,  
2001**

IU School of  
Medicine  
Pauses to  
Reflect, Mourn  
and Unify

At 'Ground  
Zero' in  
Manhattan  
IU-Wishard  
Emergency  
Doc on  
Tragedy's  
Frontlines

**September 11, 2001**

President Brand expresses university's sorrow in the wake of Tuesday's tragedies  
Bloomington, IN

**August 14, 2001**

IU School of Medicine Offers Vascular Disease Screenings

**August 14, 2001**

Free Immunizations Offered Sept. 8 to Hispanic Children

Landmark NIH Study: Diet And Exercise Dramatically Delay Type 2 Diabetes

**August 8, 2001**

Medical Training Journey Begins For IU Students

**July 26, 2001**

IU Prostate Cancer Prevention Trial Looking For Several Good Men

Riley Hospital Physician Edits Textbook To

Be Used  
Worldwide

**June, 2001**  
A Day at the  
OSCE

**June 29, 2001**  
Women's  
Health Topics  
Spin Off New  
Web Site

**June 28, 2001**  
Partnership  
Provides Free  
Mammograms  
to Indy-area  
Women

Svirsky Named  
Editor of  
Journal

**June 27, 2001**  
Child Road  
Deaths In  
Indiana On  
Decline

**May 17, 2001**  
Genetic Find  
Links  
Alcoholism,  
Depression

**May 10, 2001**  
Spring Medical  
Alumni  
Weekend To  
Recognize  
Former Deans,  
Faculty, Alumni  
And Students

261 New  
Physicians To  
Take  
Hippocratic  
Oath On  
Mother's Day



Coalition  
Forms To  
Combat  
Hoosier  
Suicides

Social Anxiety  
Disorder Study

**May 9, 2001**

Patient  
Advocates,  
Consumers In  
The Spotlight  
At Annual  
Symposium

**May 7, 2001**

National SAFE  
KIDS Week,  
May 5-12, 2001

**May 1, 2001**

Einhorn  
Elected To  
National  
Academy of  
Sciences

**April 16, 2001**

IU Med  
Students Make  
Spring House  
Calls

**April 5, 2001**

Krannert  
Institute To  
Move To  
Methodist  
Campus In  
Adult  
Cardiovascular  
Consolidation

Attention  
Deficit-  
Hyperactivity  
Disorder Focus  
Of Child  
Psychiatry  
Conference

Alzheimer  
Disease  
Patients  
Sought For  
Study

**April 4, 2001**

Face Guard  
Protects 'Boys  
And Girls of  
Summer'

**March 29, 2001**

Zipes Now  
Leads  
American  
College of  
Cardiology

**March 28, 2001**

'Sound  
Medicine'  
Radio Program  
Premieres in  
April

IU Joins Fight  
Against  
Lymphoma  
With Vaccine  
Study

**March 27, 2001**

Computer  
Program Helps  
Women Kick  
Nicotine Habit

**March 23, 2001**

National  
Resident  
Matching  
Program 2001  
- IU Med  
Students  
Prepare For  
Residencies

**March 16, 2001**

Bridging the  
Gap Of  
Alternative and

## Conventional Medicine

**March 15, 2001**

Complementary  
and Alternative  
Medicine: A  
Second  
Opinion

**March 13, 2001**

IU School of  
Medicine  
Seeks Patients  
For  
Osteoarthritis  
Study

**March 9, 2001**

Mini Medical  
School  
Breathing In  
Zero Gravity

**March 8, 2001**

Fife Named  
Kampen  
Professor of  
Women's  
Health

Madura Named  
Battersby  
Professor of  
Surgery

**March 5, 2001**

Medical  
Honorary  
Society  
Welcomes  
New Members

Medical  
Students  
Showcase  
Talents, Help  
Homeless

**March 1, 2001**

Sports  
Medicine: Thrill

of Victory,  
Agony Of The  
Feet

**February 26,  
2001**

Mini Medical  
School  
The Heart Of  
Kidney  
Transplants

**February 22,  
2001**

Packer  
Receives  
Award for  
Gender-  
Specific  
Medical  
Research

Study Links  
Salt Sensitivity  
and Risk of  
Death

**February 19,  
2001**

Ford Drives  
Home Child  
Safety  
Message With  
Grant

**February 14,  
2001**

Mini Medical  
School  
Spirituality A  
Potent Rx For  
Many Patients

**February 13,  
2001**

African-  
Americans  
Develop  
Alzheimer  
Disease and  
Other  
Dementias at  
Twice the Rate

of Africans

Williams  
Receives  
Dameshak  
Prize For Gene  
Transfer/  
Therapy  
Research

**February 9,  
2001**

Videos Win  
Awards in  
National  
Contest

Forum  
Focuses On  
Women's Heart  
Health

**February 8,  
2001**

Hood To Direct  
American  
Board of  
Dermatology

**February 7,  
2001**

Child Safety  
Advocates  
Sought For  
Awards  
Program

**February 5,  
2001**

Crabb to lead  
IU Department  
of Medicine

Means Named  
To Newly  
Created  
Position at IU  
School of  
Medicine

**February 2,  
2001**

Students To

Explore DNA  
Universe At IU  
School of  
Medicine

**February 1,  
2001**

Wilson Named  
To State's Top  
Doc Post

**January 22,  
2001**

Noted  
Bioethicist Will  
Help Lead  
Indiana  
Genomics  
Initiative

Statewide Gun  
Survey  
Triggers  
Interesting  
Response

**January 11,  
2001**

Lithotripsy  
Research  
Brings  
Researchers  
Back To The  
Basics

Mind, Body  
and Soul In  
Medicine IU  
Mini Medical  
School  
Prepped For  
Spring Session

December, 2001

**WINTER MEDTIPS**  
Indiana University School of Medicine



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December 18, 2001

## Study Finds Most Commonly Prescribed Antidepressants Similar in Effectiveness

INDIANAPOLIS -- An Indiana University School of Medicine and Regenstrief Institute for Healthcare study published in the Dec. 19 issue of the Journal of the American Medical Association has found that three of the most commonly prescribed antidepressants are similar in effectiveness for depressive symptoms.

The antidepressants, paroxetine (sold under the brand name Paxil), fluoxetine (sold under the brand name Prozac and also available in generic form) and sertraline (sold under the brand name Zoloft), also were shown to be similar in their effect on health-related quality of life measures. Those measures included social interactions, ability to work, sexual functioning and sleep.

This study is the first to compare the effectiveness of paroxetine, fluoxetine and sertraline. The three antidepressants are all members of a class of drugs with a similar chemical structure known as selective serotonin reuptake inhibitors (SSRIs) and work on neurotransmitter pathways in the brain to decrease symptoms of depression.

These three drugs are the most commonly prescribed class of antidepressants in the country, accounting for over 3 billion dollars of annual prescription costs in the United States and growing by approximately 25 percent each year, according to published statistics. Compared to older classes of antidepressants, SSRIs have a more favorable side effect profile, simpler dosing and less toxicity in the event of an overdose.

This study followed 573 primary care patients diagnosed with depression for nine months, well beyond the acute phase of depression. The patients were randomized to one of the three drugs.

"While clinicians often expect that drugs within a class would have similar effects, very few head-to-head studies such as the one we concluded on SSRIs have been done to confirm this", says Kurt Kroenke, M.D., professor of medicine at the IU School of Medicine and research scientist at the Regenstrief Institute for Healthcare, the study's principal investigator.

The study was funded by Eli Lilly & Co., the manufacturer of Prozac.

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Dec. 13, 2001

## IU Pediatrics Professor's Work Gains National Recognition

INDIANAPOLIS - Patricia A. Keener, M.D., has built a solid reputation at the Indiana University School of Medicine developing programs for underserved youngsters, guiding students to meaningful careers and working side-by-side with colleagues and community representatives to establish health initiatives in her community and across the country.



That tireless dedication has earned her the prestigious 2002 Ernest A. Lynton Award for Faculty Professional Service & Academic Outreach. The award will be presented to Dr. Keener at the American Association for Higher Education's annual forum in Phoenix in late January 2002.

Dr. Keener, associate chair of the IU Department of Pediatrics and professor of clinical pediatrics, is director of the school's Social and Community Contexts of Health Care and assistant dean for the Office of Medical Service-Learning. She has been responsible for originating or spearheading numerous programs including the Indianapolis Campaign for Healthy Babies, the Wishard Memorial Hospital Community Health Centers, the Hispanic/Latino Health Access Initiative and the Hispanic Pediatric Clinic and Immunization Outreach.

One program created by Dr. Keener has had lasting international impact. In 1980, she started Safe Sitter, Inc. in Indianapolis as a resource for child-care/parenting education, and the program now operates at more than 800 sites in the United States, Israel and England with 4,000 trained instructors. An estimated 300,000 adolescents have learned first aid and airway rescue skills, in addition to child-care techniques and safety precautions through Safe Sitter, Inc.

An IU School of Medicine graduate whose career has spanned three decades, Dr. Keener's most recent accomplishment was the publication of *Caring for Kids*, a book available free to parents and caregivers throughout Indiana.

"The thousands of students, peers, community organizations and individuals whose lives have been touched by Dr. Keener certainly is remarkable," said Cathy Burack, associate director of the New England Resource Center for Higher Education at the University of Massachusetts in Boston.

"She exemplifies the connection between teaching and sharing knowledge to improve



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society and to motivate her students to follow her lead," added Burack, whose office oversees the Ernest A. Lynton Award for Faculty Professional Service & Academic Outreach Award program.

Dr. Keener was nominated for the award by Gerald Bepko, chancellor of the Indiana University-Purdue University Indianapolis, where the IU School of Medicine - the second largest medical school in the nation - is located.

Dr. Keener is a member of the Indianapolis Medical Society, American Academy of Pediatrics-Indiana Chapter, American Medical Association, and the honorary medical society, Alpha Omega Alpha. She also has been honored by the AAP for the Safe Sitter program and is a two-time recipient of the IU School of Medicine Outstanding Professor of Pediatrics Award.

###

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#### **Indiana University School of Medicine News**

[www.medicine.indiana.edu/](http://www.medicine.indiana.edu/)

#### **Ernest A. Lynton Award Information and Awards**

[www.nerche.org/Lynton/Winners/winners.html](http://www.nerche.org/Lynton/Winners/winners.html)

#### **Safe Sitter, Inc.**

[www.safesitter.org](http://www.safesitter.org)

#### **Caring for Kids-Riley Memorial Association**

[www.rileykids.org/caringforkids/](http://www.rileykids.org/caringforkids/)

#### **Indiana University-Purdue University Indianapolis**

[www.iupui.edu/](http://www.iupui.edu/)

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December 11, 2001

## IU School of Medicine Physician Honored Abroad

INDIANAPOLIS -- John N. Eble, M.D., M.B.A., has been named an Honorary Fellow of the Royal College of Pathologists of Australasia

Formal admission to fellowship took place at the Royal College's Admission of Fellows Ceremony in Hong Kong in October. Dr. Eble became the 12th Honorary Fellow in the history of the Royal College and only the third from the United States.

The Council's decision was based on Dr. Eble's contributions to the advancement of pathology within Australasia through his dedication to post-graduate training and research projects in Australia and New Zealand and in particular, his commitment to the field of urogenital pathology and pathobiology of renal cell neoplasms.

The Royal College of Pathologists of Australasia was founded in 1956 in Australia, New Zealand, Singapore, Malaysia and Hong Kong.

Dr. Eble received his bachelor's of science degree in 1973 and his medical degree in 1976, both from Indiana University. He completed his residency in pathology at Indiana University Medical Center and joined the IU faculty in 1980.

In 1990, he earned an M.B.A. from the IU Graduate School of Business.

From 1981 to 2000, he was the chief of pathology and laboratory medicine at the Richard L. Roudebush VA Medical Center. He was appointed chairman of the School of Medicine's Department of Pathology and Laboratory Medicine in 1999. At that time, he was also appointed chief pathologist of Clarian Health Partners.

Last year, Dr. Eble was honored with a named chair, becoming the Nordschow Professor of Laboratory Medicine at IU School of Medicine.

He is the editor-in-chief of Modern Pathology, the journal of the United States and Canadian Academy of Pathology. From 1997 to 2000 he was the editor-in-chief of the Journal of Urologic Pathology, the journal of the International Society of Urologic Pathology. He edited the textbook Urologic Surgical Pathology, published in 1997, and will also edit the second edition which will be published in 2002.

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December 7, 2001

## Christmas Comes Early At IU With Delivery Of Super MRI Scanner

INDIANAPOLIS - Radiologists and researchers at the Indiana University School of Medicine have received their biggest and most expensive holiday present of the year. A \$2.2 million Magnetic Resonance Imaging scanner, the most powerful one in the state, was moved by crane Friday, Dec. 7, to its new home on the medical center campus.

The 10-ton MRI is unique because of its magnetic strength and because it only images the head, unlike other MRI scanners that perform whole-body scans. Those scanners can produce anxiety for patients who suffer from claustrophobia.

The new scanner is 3 Tesla in strength. Tesla is a measurement of magnet strength.

"The new MRI is twice as strong as any other one in the state of Indiana and one of the first of this strength in the U.S.," said Mark Lowe, Ph.D., assistant professor of radiology and director of the IU School of Medicine 3 T Research MRI Facility. "The federal Food and Drug Administration only recently approved the use of MRIs of this strength."

Until now, the strongest MRI in Indiana was 1 1/2 Tesla. One Tesla is 20,000 times the strength of the magnetic field of the earth, said Dr. Lowe. It also is equivalent to the strength of the magnets used in salvage yards to lift automobiles.

"The higher the Tesla, the better the visualization of fine structure in the brain," said Dr. Lowe. "The new MRI will be state-of-the-art for imaging neurological structures in the brain as well as blood vessels."

Patients with brain cancers, stroke, blood vessel abnormalities, aneurysms and other neurologic conditions will benefit from the stronger capacity of the MRI because a better defined and higher quality image is produced by the stronger magnetic field, he said.

The magnet in an MRI scanner generates a static magnetic field; additional equipment modulates the field to generate an image. The stronger the magnet, the better defined the image.

Funding for the MRI was provided by the IU School of Medicine Department of Radiology.

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December 5, 2001



## **IU and GE Launch Institute for Digital Radiology Imaging Education and Research**

Radiology programs and hospital systems throughout the country are rapidly replacing X-ray films with digital images to provide faster and more accessible imaging results to physicians and their patients.

The migration to digital imaging and archiving systems is creating a need for training and education among physicians, technologists and administrators of imaging programs who anticipate using the new systems. The need to know is facing a steep upward curve as health care technology consultants estimate that 60 percent of U.S. hospitals will have adopted digital imaging systems by 2006.

The Indiana University Department of Radiology, its affiliated practice group, IU Radiology Associates, and General Electric Medical Systems (GEMS) Information Technology, have created a matrix within this technology stream by forming the REWARDS Institute at the IU School of Medicine. The REWARDS Institute will support a research program, a customer learning center, and a showcase site for the GE Picture Archiving and Communication Systems (PACS). This type of collaborative education and research program is the first of its kind in the country and will offer courses beginning March 2002.

IU Radiology Associates and GEMS are jointly funding and developing the REWARDS Institute's customer learning center. This new center will develop image management educational and training programs for hospital and a free standing imaging center for executives, administrators, physicians, technologists and other health care personnel interested in improving clinical radiology productivity, workflow and healthcare quality. In addition, the REWARDS Institute is funded by GEMS for research projects related to behavioral and technical aspects of radiology information technologies.

"A picture archiving and communications system (PACS) provides the foundation for a virtual radiology department by facilitating the rapid transfer of computed radiography and digital information, allowing high quality images to be rapidly accessed, viewed and shared by radiologists and referring physicians," says Mervyn Cohen, M.B., Ch. B., Eugene C. Klatt Professor, chairman of the IU Department of Radiology and president of IU Radiology Associates.

"The impact on patient care will be very positive due to the rapid accessibility of current and historical images with PACS," says Dr. Cohen. "We are very happy to have created this joint venture with General Electric."

When using film images, a patient's X-rays have to be manually located and delivered to a radiologist. With digital imaging and archiving, current and historical images can be accessed and examined within seconds. In addition, the images will not become

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lost, borrowed and not returned, or damaged from handling.

Lori Rumreich, MBA, director of the REWARDS Institute, says the IU radiologists' extensive capabilities in research and education and their experience in moving from conventional to digital radiography position them to offer a superior learning experience. "IU and GEMS aim to offer customer-oriented education that provides solutions for successful digital imaging implementation, productivity improvements, change management and leadership," she says.

The IU group's experience results from implementing a hospital-wide digital imaging system at Clarian Health Partners, a multi-hospital system served by the IU faculty. Clarian Health is currently using the GEMS PathSpeed PACS<sup>®</sup> system at Methodist Hospital and will be using it at Riley Hospital for Children during the week of Dec. 3. They anticipate that the system will be in operation at Indiana University Hospital in early 2002.

The collaboration between GEMS and the Indiana University faculty allows both to offer unique learning opportunities in a clinical setting to health care organizations. "We identified GEMS as our strategic partner not only because of their innovative digital imaging product line, but also because of their strong focus on customer education and responsiveness to customer needs," says Rumreich.

The REWARDS Institute is housed in a new \$7 million facility owned by IU Radiology Associates, located in the emerging technology park in Downtown Indianapolis. The facility offers the latest in audio visual and remote learning technology, state-of-the-art training rooms, clinical reading rooms staffed by board-certified radiologists and a learning lab for digital imaging education and demonstration events.

-30-

#### **NOTE TO SCIENCE WRITERS AND EDITORS:**

The REWARDS Institute is participating in **ConnectTech 2001** on Dec. 6 at University Place Conference Center. The program has been organized by the technology schools on the Indiana University-Purdue University Indianapolis campus to showcase successful collaborations between university faculty and private industry. For more information about programs offered by the REWARDS Institute, please call 317-715-6393.

#### **Indiana University Department of Radiology**

A faculty of 46 board-certified radiologists, 60 residents and 17 fellows staff the Indiana University Department of Radiology. The faculty provides radiological services to five major teaching hospitals in the Indianapolis metropolitan area, including the Clarian Health hospitals, Richard L. Roudebush VA Medical Center, Wishard Health System and two nearby community hospitals. The unique patient populations from each of these hospitals provide extensive and varied clinical experiences. The department supports training programs for the IU School of Medicine (which educates the second largest medical student body in the nation), technical training programs in the IU School of Allied Health Sciences, post-graduate programs in imaging sciences

and a robust research program.

### **About GE Medical Systems**

GE Medical Systems is an \$8 billion global corporation that leads in the development of medical information and technology. It offers networking and productivity tools, health care information systems, patient monitoring systems, conventional and digital X-ray, computed tomography, magnetic resonance imaging, ultrasound and bone mineral densitometry, positron emission tomography (PET), and nuclear medicine. For more than 100 years, health care providers worldwide have relied on GE Medical Systems for high-quality medical technology, services, and productivity solutions. For more information on GE Medical Systems, visit its Web site at [gemedicalsystems.com](http://gemedicalsystems.com)

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June 19, 2006

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December 4, 2001

## Indiana Receives Funding To Expand Health Care Education, Access

INDIANAPOLIS - Indiana has expanded its outreach to medically underserved communities with the acquisition of a \$2.1 million Area Health Education Center grant.

The federal funding, awarded by the U.S. Health Resources and Services Administration, is for a three-year period but renewal options for additional three-year periods are provided. Additional three-year match funding commitments have been provided, including \$210,000 from the Indiana State Department of Health and \$450,000 from the Indiana University School of Medicine.

AHECs have been established in the majority of the 50 states. The program is unique because the funding allows states and individual communities to determine the needs of the people and develop programs to fulfill those needs.

"AHEC is community-based and possesses the flexibility to meet specific and changing community health care needs," said Stephen J. Jay, M.D., associate dean and chairman of the Department of Public Health at IU School of Medicine. Dr. Jay is the project's principal investigator and played a key role in bringing AHEC funding to Indiana.

"The entire process was a collaborative effort with Indiana's state and federal leaders, health care institutions including the Indiana State Department of Health, educational institutions including the School of Medicine, and others concerned with the well-being of the state's communities," said Dr. Jay.

The IU Department of Family Medicine was a key collaborator in developing the AHEC proposal and will play a major role in managing the Indiana AHEC initiative.

Senators Richard Lugar (R-Ind.) and Evan Bayh (D-Ind.) and Gov. Frank O'Bannon were instrumental in assisting with the grant process and securing the funding, Dr. Jay said. Other federal and state legislators also played a role, making the entire process a bipartisan, community effort to benefit Hoosiers, he added.

The primary mission of AHEC is to enhance access to quality health care through community and health care provider educational programs, training, practitioner support, practitioner recruitment, and disease prevention.

The unique aspect of AHEC that makes it so appealing is each community determines its needs and the support services necessary to meet those needs, said Dr. Jay. Advisory boards are established in each region to determine the focus and tools necessary to make the primary mission a reality.

In Indiana, regional AHECs will be established with the first forming in the Terre Haute region. The West Central AHEC, as that region is called, is already establishing its



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advisory board and determining its goals.

The Northwest AHEC in the Lake County region will organize in 2002. The Southeast-South Central AHEC, a 20-county region, and smaller community AHECs in the remaining regions of Indiana determined to be medically underserved will be established by 2006.

Roy W. Geib, Ph.D., assistant dean and director of the IU School of Medicine Terre Haute Medical Education Center, is interim director of the Terre Haute AHEC. The funding be used to support clinical education for health profession students in rural settings to encourage them to practice in the area. Recruitment of future health care providers, public health education and other health-related programming also are in the planning stage.

"This is an important opportunity for the School of Medicine to once again partner with other educational institutions to meet the health care needs of Indiana. By working together with the legislators, the partnering educational institutions can more effectively address the future workforce needed to meet the health care needs of an aging population in the 21st century," said Dr. Geib.

"By working with school corporations, AHECs around the nation have been very successful in attracting young individuals to consider careers in the health care industry. We look forward to establishing a a very successful model program here in West Central Indiana," he added.

Congress created the AHEC program in 1971 to encourage medical schools to increase the number of students and residents trained in underserved community-based settings. The focus of the AHEC program in 2001 includes the primary care needs of local communities as well as contemporary issues of public health infrastructure, access to quality health services and diversity of health professions workforce.

For additional information, see [www.nationalahec.org](http://www.nationalahec.org).

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December 4, 2001

## IU School of Medicine Receives Funding To Study Means To Delay Diabetes' Onset



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INDIANAPOLIS - The Indiana University School of Medicine has received a \$2 million National Institutes of Health grant to seek ways to delay or reverse the onset of type 1 diabetes, also known as juvenile diabetes.

The study, known as Type 1 Diabetes TrialNet, is a 7-year clinical trial and Indiana University is the only site in the Midwest and only one of 14 in the nation involved. The research trial at IU School of Medicine is a collaborative effort between Henry Rodriguez, M.D., assistant professor of pediatric endocrinology, and Mark Pescovitz, M.D., professor of surgery.

The trial is designed to identify therapeutic agents to delay the onset of type 1 diabetes in those at risk for developing the disease or reverse the course of the disease in newly diagnosed patients. Type 1 diabetes most frequently occurs in children, but also can develop in adults under the age of 40.

The incidence of type 1 diabetes is on the rise, said Dr. Rodriguez, the principal investigator for the IU trial. Juvenile diabetes affects as many as three people in 1,000 in the general population, he said. However, the risk of developing the disease is greater than tenfold higher for first-degree relatives of individuals with type 1 diabetes.

Through an earlier clinical trial at Riley Hospital for Children, Dr. Rodriguez and his colleagues identified relatives at risk. That trial, known as the Diabetes

Prevention Trial - Type 1, screened first-degree relatives of children with diabetes to identify those at risk for developing the disease.

Children determined to be at medium risk were given minimal daily doses of oral insulin to see if it would prevent or delay onset of diabetes. That portion of the clinical trial is ongoing. Those at high risk, determined to have a greater than 50 percent chance of developing diabetes within 5 years, were given small doses of injectable insulin twice a day and intravenous insulin for 4 days each year.

The National Institute of Diabetes and Digestive Disorders, a division of the NIH which funded the Diabetes Prevention Trial and TrialNet, concluded at the end of the high-risk trial that injectable insulin, in the manner given, does not delay the onset of diabetes in individuals at high risk.

"It is unknown what causes type 1 diabetes, but through TrialNet we are hopeful we can determine ways to reduce the number of children who are forced to live with this devastating disease," said Dr. Rodriguez.

Researchers now are seeking an effective means to prevent the development of

diabetes in young people. Physicians at the various TrialNet centers will establish protocols and the actual clinical trials are expected to begin in early 2002.

One protocol physicians at IU School of Medicine are reviewing is the use of immunosuppressant drugs to delay or reverse the damage caused by the body to cells in the pancreas. That damage is what causes type 1 diabetes, an autoimmune disease that results from the body attacking its own insulin-producing beta cells in the pancreas. The diabetic can no longer produce insulin.

Dr. Pescovitz is a transplant surgeon and an expert in immunosuppressant therapies. Since type 1 diabetes is an autoimmune disorder, Dr. Pescovitz's role in the clinical trial will be to evaluate the effect of pharmaceutical agents used to prevent the body from attacking itself, which is a major hurdle for patients who have had organ transplants.

Dr. Pescovitz and his immunology team and Dr. Rodriguez and the Riley diabetes team currently are evaluating the use of the immunosuppressive drug daclizumab in people with newly diagnosed type 1 diabetes.

"The body has a built-in mechanism for protecting itself against viruses and other unnatural agents," said Dr. Pescovitz. "When the body identifies organs, or in this case beta cells, and thinks they are foreign objects and tries to reject them, then immunosuppressants are effective tools. We are hoping that these drugs are as effective with type 1 diabetes as they are with organ transplant patients."

For additional information on the clinical trial, contact Linda Amstutz, R.N., the pediatric diabetes research nurse coordinator, at 317-274-2574.

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Nov. 27, 2001

## Children's Health Book Free to Hoosier Families

*Caring for Kids* is the title of a new book published by Riley Hospital for Children, offering a wealth of information and tips not found in traditional parenting books.

Patricia Keener, M.D., clinical professor of pediatrics and director of general pediatrics at Wishard Memorial Hospital wrote the book, which was partially funded by the Lilly Endowment Inc. The book has four sections: child health care, growth and development, nutrition and child safety. It also includes references to relevant books and publications, helpful Web sites and a list of organizations whose goals are to promote better health and the wholesome development of youths.

The idea for the book originated with the Riley Memorial Association, the fund-raising group for Riley Hospital. The goal is to distribute 750,000 copies of the book to all Hoosier families.

"With the input from other physicians, health care professionals and parents throughout the state, Dr. Keener and her staff have spent many hours to ensure this book met our vision," said Richard Schreiner, M.D., chairman of IU School of Medicine's Department of Pediatrics and Riley's physician-in-chief.

Those interested in receiving the book should visit [www.rileykids.org](http://www.rileykids.org) to see if their pediatrician or family doctor is distributing the book. Also, they may call (800) 505-1996 to obtain a copy.

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November 27, 2001

## Flu Shots Don't Trigger Asthma Attacks, National Study Reveals

INDIANAPOLIS - Influenza vaccines are safe for children and adults with asthma, according to a study appearing in the Nov. 22 issue of the *New England Journal of Medicine*.

The study, which took place in part at the Indiana University School of Medicine, was conducted by the American Lung Association Asthma Clinical Research Centers network. Its findings have important health implications, because influenza causes substantial illness in both children and adults with asthma.

The study proves that flu shots do not cause asthma attacks, noted Indiana University School of Medicine researcher John G. Mastronarde, M.D., whose work at the Asthma Clinical Research Center in Indianapolis is supported by the ALA-Indiana.

"Unfortunately, only about 10 percent of people with asthma currently get a flu shot, in part because they have been afraid it would adversely affect their asthma," said Dr. Mastronarde, a clinical assistant professor. "If everyone with asthma gets a flu shot this year, we can potentially prevent millions of asthma attacks, many of which would have been severe and resulted in hospitalizations."

And the time for the flu vaccine is now. "We urge children and adults with asthma who haven't already received a flu shot this year to get one right away," said Francis X. Kenny, ALA-Indiana's chief executive officer.

"This study shows for the first time that the influenza vaccine is safe to use for children and adults with asthma, regardless of the severity of their asthma," said the study's lead author, Mario Castro, M.D., M.P.H., principal investigator for the Washington University/St. Louis American Lung Association ACRC. "The flu vaccine is effective in preventing illness in 70-90 percent of cases."

Dr. Castro noted that in the past, some physicians have been concerned about giving the flu shot to patients with severe asthma, or to children with asthma. "We found that the flu vaccine was safe for both groups," he said. "The study found that people with asthma did not have any higher rates of side effects for the 14 days after receiving the influenza vaccine compared with those who received placebo, or inactive shot."

The study included 2,032 children and adults - 106 from Indiana - who were diagnosed with asthma. Patients were randomly assigned to receive the actual flu shot or a placebo injection that did not contain the flu vaccine. The two groups switched mid-study so that all participants received the real flu vaccine by the end of the study.

The study was conducted and funded by the American Lung Association, which has 19 ACRC centers nationally, including Indiana. The study was coordinated by the



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American Lung Association-American Thoracic Society/Merck Asthma Clinical Research Data Coordinating Center at Johns Hopkins University in Baltimore.

"This study demonstrated that the network was able to develop a practical, large clinical trial to provide important information about asthma that will benefit patients directly," Dr. Mastronarde said.

An estimated 26 million Americans (8.6 million under the age of 18) have been diagnosed with asthma. Of these 26 million, 10.6 million (3.8 million children under 18) had an asthma attack or episode in the past year.

More than 321,000 people in Indiana have asthma, including 92,600 under 18. More than 8 percent of Hoosiers have asthma; Indiana ranks 13th nationally in reported asthma.

Over the past two decades, asthma deaths have risen dramatically. The number of deaths attributed to asthma has increased by 109 percent, from 2,598 in 1979 to 5,438 in 1998.

Influenza can be very dangerous for people with asthma and other high-risk conditions, including those with other lung ailments, as well as those with heart and kidney disease. Hospitalization rates for such people increase two- to five-fold during major flu epidemics.

The influenza virus is associated with serious illness and even death. During influenza outbreaks, pneumonia cases tend to increase and a high rate of influenza hospitalizations occur. Annually, influenza accounts for 70 million lost working days and 346 million days of restricted activity.

"It is especially important to get a flu shot this year because of concerns about bioterrorism," Dr. Mastronarde said. "Most of the potential infections, such as anthrax, begin with symptoms of the flu."

Viral respiratory infections, such as influenza, may cause asthma episodes in people of all ages. Viral infections are believed to be the cause of about 85 percent of asthma episodes in children. In addition, influenza infection often renders people with asthma more susceptible to constriction of the airways and persistent decline in lung function.

Indiana's Asthma Clinical Research Center, awarded to the Indiana University School of Medicine by the ALA-Indiana, is located at the National Institute for Fitness for Fitness and Sport on the Indiana University-Purdue University Indianapolis campus.

For more information about asthma, influenza, lung centers, call the American Lung Association of Indiana at 800-586-4872, or visit its Web site at [www.lungin.org](http://www.lungin.org).

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November 20, 2001

## Improving Patient Safety Through Information Technology

INDIANAPOLIS -- J. Marc Overhage, M.D., Ph.D., associate professor of medicine at the Indiana University School of Medicine and research scientist at the Regenstrief Institute for Healthcare has received a three year, \$1.5 million grant from the Agency for Healthcare Research and Quality (AHRQ) of the Department of Health and Human Services. AHRQ awarded the money to study how information technology can improve patient safety. The project will focus on patients with two prevalent and costly conditions: congestive heart failure and asthma.

Dr. Overhage and his research team will use the Regenstrief Medical Records System to identify “indicators” of potential errors in the care of outpatients and changes in the health care delivery system that can potentially reduce these “indicators”. The RMRS is a physician-designed information system which contains 30 years of data comprised of over 500 million on-line laboratory results, radiology reports, diagnostic studies, procedure results, operative notes, discharge, and other patient treatment data.

The RMRS has registered over one million patients since 1972 and contains more than 10 million prescriptions, 100 million numeric or coded patient observations, 2 million dictated reports and 200,000 EKG tracings. It is accessed more than 400,000 times a month.

“The only way we are going to improve patient’s safety to the level it should be is to support the clinician’s decision-making using advanced information technologies. There is simply too much to keep track of for a clinician to make all the right decisions all the time without this kind of support,” said Dr. Overhage.

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Nov. 14, 2001

## **Mini Medical School**

### **Back to the Future: Experimental Spinal Procedures Promising**



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INDIANAPOLIS - The spinal cord is a maze of nerves extending from the base of the brain to the waist. Enclosed within the backbone, the cord carries complex electrical signals to and from the brain. If the power supply along the cord is cut or disrupted seriously enough, so too can a person's ability to walk, to control the bladder and bowels, to feel the touch of another's hand, to scratch an itch - and to breathe.

Each year, more than 11,000 Americans, overwhelmingly male and under the age of 30, suffer spinal cord injury, leaving them paralyzed or seriously disabled and with little hope of recovery. Humans have many capabilities but restoring the electrical power supply that controls everyday body functions and movements is not on that list.

"Mammals, most notably humans, stand alone in the world of vertebrates as not having the capability of naturally regenerating spinal cord nerve processes that have been damaged," said Scott Shapiro, M.D., professor of neurosurgery at the Indiana University School of Medicine, speaking at the Nov. 13 session of Mini Medical School. "Most spinal cord injuries involve the crushing and not the severing of the cord. The crushing leads to cell death and separation of nerve fibers, and when fibers separate and the electrical impulses stop, paralysis sets in."

Dr. Shapiro, who also is chief of neurosurgery at Wishard Memorial Hospital, is leading the first human clinical trial to test whether weak electrical fields applied to spinal cord injuries can help regenerate nerve fibers to promote some functional recovery to patients. The electricity comes from the cigarette lighter-sized extraspinal oscillating field stimulator, surgically implanted over the injured area.

Six patients have undergone the procedure at the IU School of Medicine since the trial got under way. The trial is open to patients between the ages of 18 and 65 who have sustained a complete motor spinal cord injury. Patients must be entered into the trial within three weeks from the time of their injury.

The trial, which began in mid-2001 following approval by the Food and Drug Administration, is based on research and treatment of spinal-injured dogs pioneered and developed at the Purdue University Institute for Applied Neurology. One canine suffering from a disk herniation was paralyzed in its hindquarters. The dog was wagging its tail and climbing stair steps within six months of receiving the implant.

Will the stimulator device work in humans? "It's too early to tell, Dr. Shapiro said. "Certainly it's a novel approach, but it's only a start."

Another promising approach to treat spinal cord injury is the use of a polymer commonly used in cosmetics, toiletries and medicine. Polyethylene glycol is a water-soluble waxy substance that has been shown to repair damaged nerve membranes in



guinea pigs.

"PEG appears to fuse the membranes of nerve cells that have been damaged," said Dr. Shapiro, adding that some researchers believe the polymer might one day be used to reduce or reverse damage to nerve cells that causes paralysis.

Dr. Shapiro's appearance was the final session of a six-week series of the fall Mini Medical School. Participants met each Tuesday night to hear from IU School of Medicine's leading physicians and researchers.

Mini Medical School is partly funded with a \$10,000 educational grant from Pfizer Pharmaceuticals Group. Three Indianapolis-area high schools - Lawrence Central, North Central and Zionsville - each received \$250 checks for sustained student attendance during the fall series. The money will be used for in the schools' science programs.

Additional support for Mini Medical School comes from WIBC-AM radio in Indianapolis, and IU Medical Group, which is offered by the Indiana University School of Medicine Faculty Community Relations Committee through the IUPUI Division of Continuing Studies.

The next series of Mini Medical School begins Feb. 12, 2002. For more information about dates and scheduled presentations, see [www.medicine.indiana.edu/mini\\_med/spring\\_02.html](http://www.medicine.indiana.edu/mini_med/spring_02.html). For registration information, call 317-278-7600.

#### **Web Sites of Interest**

##### **IU School of Medicine-Section of Neurosurgery**

[www.iupui.edu/~neurosur](http://www.iupui.edu/~neurosur)

##### **IU Head and Spinal Cord Injury Center**

[www.medicine.indiana.edu/news\\_releases/archive\\_00/nra00.html](http://www.medicine.indiana.edu/news_releases/archive_00/nra00.html)

##### **National Spinal Cord Injury Association**

[www.spinalcord.org](http://www.spinalcord.org)

##### **Christopher Reeve Paralysis Foundation**

[www.paralysis.org](http://www.paralysis.org)

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EMBARGOED UNTIL  
4 p.m. ET  
Monday, November 12, 2001



## Cognitive Impairment High Among Older People, IU Study Suggests

INDIANAPOLIS - Nearly one in four older African Americans in Indianapolis have measurable cognitive problems, according to an Indiana University School of Medicine study published in the Nov. 13 issue of the journal *Neurology*.

The study is the first population-based study of cognitive impairment in the United States. It suggests that the condition may affect a significant proportion of older people. Researchers looked at cognitive difficulties that had not progressed to the point of Alzheimer disease or dementia. Cognition is defined as the process of thinking, learning and remembering.

The study showed that prevalence increased with age, finding that 38 percent of people age 85 and older had some degree of cognitive impairment short of dementia. The findings appear to be consistent with the few studies done to date in other countries.

Researchers interviewed 2,212 African Americans age 65 and older living in the Indianapolis community and 106 people age 65 and older living in nursing homes in the Indianapolis area. They found that 23 percent had cognitive impairment that did not reach the level of dementia. Of those, 25 percent developed Alzheimer disease or other dementia within 18 months.

"Occasionally forgetting where your glasses are doesn't mean you have cognitive impairment," according to study author Frederick Unverzagt, Ph.D., clinical assistant professor of psychiatry at the IU School of Medicine.

"Many people of all ages feel their memory is not what it should be, and that's not necessarily a cause for concern," Dr. Unverzagt said. "Our own judgment of our memory is generally not very accurate. When a relative or someone else notices significant changes, that is an important sign that you should be seeking medical attention."

Dr. Unverzagt was assisted with the research project by Hugh Hendrie, MB ChB, professor of psychiatry at IU School of Medicine and research scientist at the Regenstrief Institute for Health Care in Indianapolis, and colleagues at the University of Ibadan in Nigeria. The work is part of a 10-year study of African Americans living in Indianapolis and Nigeria, which is supported by grants from the National Institute on Aging and the Alzheimer's Association.

A total of 457 of the study participants (351 in the community and 106 in nursing homes) received full clinical assessments and a diagnosis. In a number of cases, the researchers conducted interviews with spouses or close relatives or sources who could describe a participant's symptoms and the progression of symptoms of memory

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loss, language disturbance, decline in judgment and reasoning, and personality change. After the baseline assessment, the clinically assessed participants were followed for up to 48 months from the start of the study.

Applying the findings from the clinically assessed group to the larger community sample, Dr. Unverzagt and colleagues estimated that 23.4 percent of the community-dwelling participants and 19.2 percent of the nursing home residents were classified as Cognitive Impairment No Dementia (CIND). The prevalence of cognitive impairment increased significantly with age, with rates increasing by about 10 percent for every 10 years of age after age 65. CIND was almost five times more common in the community than dementia (23.4 percent CIND to 4.8 percent dementia for people 65 and older).

In addition, the scientists found 26 percent of those characterized with CIND at the start of the study went on to become demented only 18 months later. Twenty-four percent of participants who were initially diagnosed with CIND appeared normal after 18 months. The factors that influence whether CIND will progress to dementia or return to normal have yet to be determined.

It is unclear whether the prevalence of cognitive impairment short of dementia in the Indianapolis group is higher or lower than other population groups. The new analysis is the first reported in the U.S. and one of only a few worldwide that have examined the prevalence of cognitive impairment short of dementia.

In the research so far, findings of prevalence in large epidemiological surveys have ranged from 10.7 percent in Italy to 26.6 percent in Finland. The variation in findings can be explained by differences in study methodology, including diagnostic criteria, although it is difficult to compare findings directly. However, Dr. Unverzagt says all the studies completed so far suggest that mild cognitive impairment may be common.

The Indianapolis data were approached from a second perspective, figuring the proportion of people in different age groups who were cognitively normal instead of impaired. Incorporating information about the prevalence of dementia from earlier studies of the Indianapolis group, the team added together the prevalence of CIND and dementia and then looked at the proportion remaining, classified as normal. From that perspective, only 45 percent of people age 84 and older were found to be cognitively normal, compared with 79 percent of people ages 65 through 74.

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## Mini Medical School

### MRI: Journey to the Center of Your Brain

October 31, 2001

INDIANAPOLIS - When Lewis and Clark set out on their bold mission, they relied on the compass and personal observations to map the vast and uncharted land. Similarly, today's scientists rely on functional magnetic resonance imaging (fMRI) to explore the largely undiscovered frontier of the human brain.

MRI is a non-invasive imaging technique, using a powerful magnetic field and advanced computing, to produce animated 3-D images of the inside of the human body. MRI technology at the Indiana University School of Medicine allows physicians to better understand how the brain works by mapping sites of activity, thus allowing them to better diagnose and treat patients with diseases such as brain cancer, stroke and Parkinson disease.

"The fMRI works on the premise that when brain cells become active, blood flows to them increases and the MRI scanner detects biological changes and increased oxygen in the areas," said Micheal Phillips, M. D., assistant professor of radiology at the Indiana University School of Medicine, speaking at the Oct. 30 session of Mini Medical School. "High resolution images resulting from scans allow us to peel away bone and tissue and map brain activity in real time.

The fMRI can map and gauge brain activity to a resolution as small as three millimeters. This is accomplished through the performance of motor or sensory tasks.

As the body performs a motor task, such as finger tapping, an fMRI scan illustrates those regions of the brain activated during the finger-tapping exercise. The resulting image shows a bright signal in the activated regions of the brain. A stroke victim, for example, can perform the exercise, thus allowing scientists to determine the extent of brain damage and how the brain "re-learns" certain functions.

When an fMRI scan is performed, it's necessary the patient remain still inside the MRI cylinder for a two- to-seven minute period. It doesn't seem like a long time to wait, but the tight quarters poses somewhat of a problem for many undergoing a scan.

"It's a difficult environment and not for claustrophobics," Dr. Phillips said, adding that newer MRI

equipment and technology is making the procedure less uncomfortable for patients.

The fMRI also has revealed some interesting and highly publicized data at the IU School of Medicine. Dr. Phillips, along with Joseph Lurito, M.D., Ph.D., assistant professor of radiology, conducted a study a year ago that demonstrating that men listen only with one side of their brains while women use both sides. In the study, 10 men and 10 women underwent the fMRI while listening to a book passage. A majority of men showed exclusive activity on the left side (temporal) lobe, which is associated with listening and speech. The majority of women showed activity in the left temporal and right temporal lobe - the side associated with non-language auditory functions.

"As scientists, we're figuring out what normal is, and more and more often it seems we're finding that normal for men may be different than normal for women," Dr. Phillips, jokingly adding that the information from the study has led to other conclusions more closer to home.

"My wife reminds me that it just means that women listen a heck of a lot better than men."

Dr. Phillips' appearance was the fourth in a six-week series of the fall Mini Medical School. Participants meet each Tuesday night and hear from IU School of Medicine's leading physicians and researchers.

Mini Medical School is partly funded with an educational grant from Pfizer. IU Medical Group and Indianapolis radio station WIBC sponsor Mini Medical School, which is offered by the Indiana University School of Medicine Faculty Community Relations Committee through the IUPUI Division of Continuing Studies.

### **Web Sites and Interesting Links**

#### **IU School of Medicine-Department of Radiology**

[www.indyrad.iupui.edu/](http://www.indyrad.iupui.edu/)

#### **News release and Images: Men/Women Brain Imaging Study**

[www.medicine.indiana.edu/news\\_releases/archive\\_00/men\\_hearing00.html](http://www.medicine.indiana.edu/news_releases/archive_00/men_hearing00.html)

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October 31, 2001

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## **Mini Medical School**

### **The Perils of Placebos: Are They Ethical?**

October 17, 2001

INDIANAPOLIS - Placebos, non-therapeutic dummy substances used in research, have value in clinical studies, but restrictions placed on their use by international guidelines hinder the development of new treatments, says an internationally acclaimed medical ethicist.

The Declaration of Helsinki - originally written 1964 by the World Medical Association as a statement of ethical principles providing guidelines to physicians and other participants in medical research involving human subjects - was revised a year ago. The revamped statement asserts that using placebos is unethical whenever withholding an effective treatment would place research participants at risk of death or long-term disability. Not so, says Robert J. Levine, M.D., a professor of pharmacology at Yale University School of Medicine and director of that university's Interdisciplinary Bioethics Project.

"The truth is that placebos have played and continue to play a crucial role in evaluating the effectiveness of many new drugs," said Dr. Levine. "Forbidding the use of placebos rules out the development of new therapies. If researchers had followed such rules in the past, drugs currently used to treat high blood pressure and stomach ulcers never would have been developed because of the existence of older, yet less-effective medications."

The Yale University professor's remarks were made before a joint session of Indiana University School of Medicine's Mini Medical School and the IU School of Law-Indianapolis on Oct. 16. Dr. Levine received the McDonald-Merrill-Ketcham Award, a program co-sponsored by the schools of medicine and law that recognizes individuals who demonstrate excellence in fostering better understanding in the professions of medicine and law.

Dr. Levine emphasized the importance of explaining to research patients the need for placebo control. "In the event that any particular placebo-controlled research clinical trial can be justified, patients should be informed forthrightly of the perils of withholding active therapy," added Dr. Levine, who has been an advisor to the National Institutes of Health, Centers for Disease Control and other federal agencies on issues related to research ethics and protection of human research subjects.



While the latest Helsinki declaration is an improvement, it needs further revision, said Dr. Levine, and not only in the realm of placebo use. He described the declaration's definition of therapeutic research as an "incoherent concept" because it prohibits research components that have no treatment value; most research does.

Also, researchers and physicians around the globe do not universally follow Helsinki guidelines, and developing countries don't always reap the benefit of new treatments pioneered in clinical trials in which their citizens participated.

"There's an inherent global injustice because the distribution of wealth among the nations of the world is inequitable," said Dr. Levine. "We must avoid development of guidelines that would impede the efforts of researchers and sponsors in industrialized countries to assist poorer countries in their efforts to deliver treatments and preventions they can afford."

Dr. Levine's appearance was the second in a six-week series of the fall Mini Medical School. Participants meet each Tuesday night and hear from IU School of Medicine's leading physicians and researchers.

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October 22, 2001

## Boning Up On The Genetic Factors Of Osteoporosis

INDIANAPOLIS - Indiana University School of Medicine is seeking biological brothers for a research study to evaluate the genetic link to osteoporosis, a common and often debilitating disease characterized by bone loss.

The study will involve 1,400 biological brothers between the ages of 20 and 60 with no apparent health problems.

Participants will be required to make one four-hour visit to the IU Medical Center for free bone density measurements, cholesterol and blood pressure screenings and a blood draw. Compensation will be provided.

To participate in the brothers' study, call 317-274-0950.

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October 17, 2001

## Mini Medical School The Perils of Placebos: Are They Ethical?

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October 16, 2001

## Participants Sought For Glaucoma Study At Indiana University

INDIANAPOLIS -- The Department of Ophthalmology at Indiana University School of Medicine is seeking participants for clinical trials on the effectiveness of two medications to lower eye pressure in individuals with glaucoma.

Glaucoma is the second leading cause of blindness in the United States. Trial participants must have been diagnosed with glaucoma or be at risk for the disease. Participants must be over the age of 18 years and in generally good health.

Qualified participants will be financially compensated for their time, which would involve six or eight visits to the IU Medical Center over a period of either six months or one year, depending on which clinical trial they are enrolled.

For additional information, call 317-278-1596.

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October 16, 2001

## Swiss Hypertension Researcher To Receive 2001 Beering Award At IU School of Medicine

INDIANAPOLIS -- The 2001 Steven C. Beering Award for Outstanding Achievement in Biomedical Science will be presented to Bernard C. Rossier, M.D., professor of pharmacology and toxicology of the Institut de Pharmacologie et de Toxicologie at the Université de Lausanne, Switzerland.



Dr. Rossier's lecture, entitled "Salt-Sensitive Hypertension: From Monogenic to Polygenic Disease," will be 8:30 a.m., Wednesday, Oct. 24, at the University Place Conference Center auditorium.

Dr. Rossier's research involves genetic cloning and characterization of the amiloride-sensitive sodium channel, known as EnaC. His research is pioneering work with implications for all individuals with hypertension.

Dr. Rossier was made an Honorary Foreign Member of the American Academy of Arts and Science in 1999, the same year that he was awarded an honorary doctorate, Doctor Honoris Causa, by the University Pierre et Marie Curie in Paris.

Presented annually, the Beering Award honors an internationally recognized individual for contributions to the advancement of biomedical or clinical science. The award was named in honor of Steven C. Beering, M.D., who served as dean of the IU School of Medicine from 1974 to 1983, then as president of Purdue University for 17 years, retiring in 2000.

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October 15, 2001

## Therapies For Age-Related Macular Degeneration Under Review At IU

INDIANAPOLIS - The Indiana University School of Medicine Department of Ophthalmology is seeking participants for two clinical trials to evaluate new therapies for severe vision loss associated with age-related macular degeneration, a devastating disease that affects more than 15 million Americans and is a leading cause of functional blindness.

Patients over the age of 50 years who have been diagnosed with wet macular degeneration are sought for the trials. Two forms of age-related macular degeneration exist - a dry form which is the more common condition and the wet form which is caused when abnormal blood vessels develop under the retina and leak fluid and blood ultimately causing a blinding scar in and under the retina.

The two trials are for different forms of anti-angiogenesis therapies known as anti-VEGF. Angiogenesis is the abnormal proliferation of blood vessels; anti-angiogenic therapies are designed to retard or reverse the growth of these blood vessels and to eliminate the leaking of fluid and blood into the eye.

Trial participants who are on photodynamic therapy, the standard treatment for age-related macular degeneration, may continue the treatment during the course of the trial. The trial involves three treatments with anti-VEGF over a three-month period.

Both clinical trials are being conducted at several medical centers across the United States. Enrollment of participants will continue for up to one year.

For additional information, contact Linda Pratt, R.N., at 317-278-3322.

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October 15, 2001

## Physician/Patient Relationship a Necessary Covenant

INDIANAPOLIS - Ethics in medicine is often more about the journey than it is the destination, largely because of the relationship that forms between the physician and patient.

"Physicians constantly are surrounded by ethical issues when they make decisions regarding their patients' care, and sometimes the questions they find themselves asking are more important than the answers or results they get," said the Rev. James Stender, speaking to students and faculty attending the Indiana University School of Medicine "Ethics at Lunch" program.

The Washington minister's visit to the campus was a homecoming for two reasons. He is a former campus minister for the medical school and Indiana University-Purdue University Indianapolis - and was responsible for helping launch the "Ethics at Lunch" 20 years ago. It started as "brown bag" gathering of Stender and students to discuss a variety of issues in medicine.

Stender, a Lutheran minister from Vancouver, Wash., described the doctor/patient relationship as a necessary covenant, a mutual trust requiring physicians to be more attentive when communicating with patients. Clear communication builds on that trust, he added.

"Doctors have been given a lot of information and knowledge by virtue of their education and training, and people like me look to you as the technical experts and the teachers who will make us understand about our health and decisions affecting our treatment," Stender said.

Stender's presentation was part of the *Bioethics Today: Discourse and Dialogue*, a series of presentations in October on the Indiana University-Purdue University Indianapolis and IU-Bloomington campuses.

Today, the "Ethics at Lunch" program is overseen and organized by IU School of Medicine students with guidance offered by faculty. The organization meets and eats about 18 times during the academic year, providing a forum for debate and discourse on current medical ethical topics. For more information about the program, go to <http://msaa.iusm.iu.edu/organizations/soealtxt.html>.

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October 11, 2001

## **IU Mini Medical School Bioethics: Science With Conscience In Human Research**



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INDIANAPOLIS - Human participation in biomedical research is vital in helping scientists understand and ultimately treat disease, but much more needs to be done to ensure participants fully understand the risks and their rights.

Regulations governing human participation in federally funded research exist, but they do not apply to all research studies conducted in the United States. Less than 20 of the nearly 80 federal agencies and departments follow a single set of regulations called the "Common Rule." Institutions that are not federally funded do not have to follow these rules.

"We have a set of regulations but we do not have a federal system that guarantees the best possible protection for humans, and that should be the foremost concern in research," said Eric M. Meslin, Ph.D., director of the Indiana University Center for Bioethics, speaking to those gathered for the first of a six-week series of Mini Medical School presentations at the IU School of Medicine.

The assistant dean for bioethics and a professor of medicine and philosophy has an up-front perspective on the effectiveness of human research regulations before coming to the IU Center for Bioethics, he was executive director of the National Bioethics Advisory Commission. The commission, established in 1995 but recently disbanded, probed ethical issues related to the human participation in research and made recommendations to the president and the government on issues ranging from federal funding of embryonic stem-cell research to research conducted in developing countries.

Dr. Meslin cited controversial examples of past research where patients' safety was seriously jeopardized or were devoid of ethical considerations. Among the better known cases are Nazi experiments on concentration camp prisoners in World War II Germany and revealed in the subsequent Nuremberg trials; Tuskegee Syphilis Study, an observational research project from 1932 to 1972 of 600 African American males who were misled to believe they were being treated, and government ionizing radiation experiments on servicepersons, prisoners and unwitting civilians between 1944 and 1974.

Ethical questions also have surfaced in more recent research such as the 1997 U.S.-funded studies of maternal-fetal transmission of HIV conducted in Africa, a preventive drug trial that drew fire because it used placebos as the control instead of current accepted therapy, and the lack of continuing treatment at the conclusion of the trial.

"Why design a study that shows people can benefit from treatment and yet deny them access to it?" Dr. Meslin asked. "Clearly, this points to what obligations are due to humans once research is complete."

Society often views biomedical research with what Dr. Meslin described as the "therapeutic misconception," the belief that participation in research or a clinical trial is going to directly benefit their health. "While in fact this might occur, research is about gathering facts, weighing the evidence and finding answers."

It's important to note that a distinction exists between research ethics and medical ethics, Dr. Meslin noted. The former primarily is the scientific search for "truth and knowledge." The latter is the moral obligation physicians have to meet the total needs of the people they serve.

Whatever present or future challenges loom before society and science, never before have there been greater opportunities for progress. "Thousands of studies in the United States are conducted ethically and safely each year," Dr. Meslin said. "We live in exciting times in research and people can benefit from what is occurring and what lies ahead."

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### **Related Sites**

**IU School of Medicine Mini Medical School**  
[www.medicine.indiana.edu/mini\\_med/index.html](http://www.medicine.indiana.edu/mini_med/index.html)

**Indiana University Center for Bioethics**  
[www.bioethics.iu.edu](http://www.bioethics.iu.edu)

**Clinical Trials at the IU School of Medicine**  
<http://medicine.iupui.edu/ctp>

**National Institutes of Health**  
[www.clinicaltrials.gov](http://www.clinicaltrials.gov)

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October 10, 2001

## New Faculty Joins IU Center for Bioethics

INDIANAPOLIS - Three members of the Indiana University-Purdue University Indianapolis academic community have been appointed core faculty of the Indiana University Center for Bioethics.

The center was established in July 2001 with the mandate to conduct research, engage in education and provide a full range of services to the university and public communities in Indiana. Eric M. Meslin, Ph.D., is director of the center and also is assistant dean for bioethics and professor of medicine at the Indiana University School of Medicine.

Joining Dr. Meslin at the IU Center for Bioethics:

Kimberly A. Quaid, Ph.D., associate professor of clinical medical and molecular genetics and psychiatry at the IU School of Medicine, is the director of school's Predictive Testing Program and also is on the clinical staff of the Indiana Alzheimer Disease Center.

After earning her doctorate in psychology at the Johns Hopkins University, she went on to become the coordinator of genetic predictive testing of Huntington disease at Johns Hopkins School of Medicine, one of the first of its kind in the nation. Dr. Quaid chairs the IUPUI Committee on Ethics and Research, is an active member of the Indiana Genetics Advisory Group and is co-chair of the Ethical, Legal and Policy Issues subcommittee of the advisory group.

David Orentlicher, M.D., J.D., Samuel R. Rosen Professor at the IU School of Law-Indianapolis, has practiced both medicine and law. He also is an adjunct associate professor at the IU School of Medicine and member of the American Law Institute.

Before coming to the IU School of Law in 1995, Dr. Orentlicher served as director of the Division of Medical Ethics at the American Medical Association and held various appointments at the University of Chicago Law School and Northwestern University Medical School. He is a founding board member of the American Association of Bioethics.

William H. Schneider, Ph.D., is professor of history and associate dean in the IUPUI School of Liberal Arts. He directs that school's Medical Humanities program and holds an adjunct appointment with the IU School of Medicine. He's past president of the IUPUI Faculty Council and co-president of the IU Faculty Council

Dr. Schneider has written two books and many articles on the history of science in medicine, including a book on the history of eugenics in France. His most recent research work centered on the discovery of human blood groups and their use as the first genetic markers.



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The IU Center for Bioethics plays a critical role in the Indiana Genomics Initiative, a comprehensive IU biomedical endeavor established in December 2000 with a \$105 million grant from the Lilly Endowment. The center received \$5 million in funding from the grant.

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October 4, 2001

## Child Safety Takes Front Seat With New Statewide Program

INDIANAPOLIS - An overwhelming number of Hoosier adults are aware booster seats are designed to protect youngsters but only a small percentage actually use them in their vehicles, placing children at alarming risk for death and serious injury on roadways.



To reduce the threat, the Indiana University School of Medicine and James Whitcomb Riley Hospital for Children has teamed with Ford Motor Company and other organizations for *Boost America!*, a program that will provide thousands of free booster seats for income-eligible families throughout the state.

The program in Indiana was unveiled Oct. 4 at the IU School of Medicine as part of Ford's campaign to provide 1 million booster seats nationwide. Other partners in the program are the United Way of Central Indiana, Toys "R" Us and the Indiana Governor's Council on Impaired & Dangerous Driving.

Safety experts report booster seats are a necessary transition for youngsters between the ages of 4 and 8 years who have outgrown child safety seats, but who are not big enough to use adult safety belts. When properly used, a booster seat elevates a child so that lap/shoulder belts fit more snugly across the chest and hips.

A recent survey reveals that 86 percent of Indiana parents and caregivers have read or heard about booster seats; however, only 17 percent use them for children. Indiana lags behind the national average in awareness and usage, *Boost America!* officials say.

"Every day of the year, our hospital takes care of sick and injured children, many of whom were injured in vehicle crashes," said Richard Schreiner, M.D., chairman of the school's Department of Pediatrics and physician-in-chief at Riley Hospital. "Ford's *Boost America!* campaign ensures children will ride safely secured in cars, and we can reduce the number of kids whom might otherwise come through our doors for treatment."

Highway crashes are the leading cause of deaths among children; national data indicate most of the nation's 4-to-8 year olds are not safely secured in child safety or booster seats while riding in vehicles.

"We are focused on protecting our children on the highways, educating parents about



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the importance of booster seats and lending a helping hand to those who cannot afford seats,” notes LaVaughn Henry, Ford’s assistant regional manager for state and local government relations.

Here’s how *Boost America!* works in Indiana:

- Distributes 7,500 free booster seats through the United Way to pre-screened, income-eligible families at events in Indianapolis and across the state
- Gives vouchers for free booster seats to Ford Motor Company customers statewide (effective Nov. 1) that are redeemable at Toys “R” Us
- Sends education videos and literature to all Indiana preschools and elementary schools
- Seeks sensible state-level booster-seat legislation

For more information about the *Boost America!* program, call toll free at **866-BOOSTKID** or visit its Web site at [www.boostamerica.org](http://www.boostamerica.org).

IU School of Medicine’s Automotive Safety Program for Children at Riley Hospital provides information, programming and resources throughout the state to ensure safe travel for all Hoosiers. The program works with local partners including law enforcement, medical personnel, fire departments, EMS, educators, and other local advocates.

For more information about the Automotive Safety Program for Children, call 800-543-6227, or go to [www.preventinjury.org](http://www.preventinjury.org).

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October 2, 2001

## Fife Assumes Editor's Role With Clinical Journal

INDIANAPOLIS - Rose S. Fife, M.D., associate dean for research at the Indiana University School of Medicine, has been appointed as associate editor of the Journal of Laboratory and Clinical Medicine.

Dr. Fife, a professor of medicine, biochemistry and molecular medicine, and the Barbara F. Kampen Professor of Women's Health, previously served on the publication's editorial advisory board. In her new role, she will be involved in the peer review process of assessing articles for publication.

The Journal is the monthly publication of the Central Society for Clinical Research, an organization serving several states in the Midwest and Canada. Dr. Fife also is an officer in that organization.

A graduate of Johns Hopkins University School of Medicine, Dr. Fife, who specializes in rheumatology, is director of the IU School of Medicine National Center of Excellence in Women's Health.

Dr. Fife completed an internship and residency in internal medicine at Johns Hopkins and a fellowship in rheumatology at the University of Washington, Seattle.

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October 1, 2001

## Antibiotic Linked To Newborns' Intestinal Disorder

INDIANAPOLIS - An Indiana University School of Medicine study has confirmed a linkage between erythromycin, one of the most commonly prescribed antibiotics, and the subsequent development of pyloric stenosis, a condition that affects one in 500 newborns. The study appears in the current issue of the Journal of Pediatrics.

Pyloric stenosis, which usually occurs in the first or second month of life, is a blockage of the outlet of the stomach that causes projectile vomiting, leading to weight loss and dehydration. It is the most common indication for abdominal surgery in infancy.

"The link between erythromycin and pyloric stenosis is an important finding which will make a difference to the health of babies," said the study's principal investigator, Barbara E. Mahon, M.D., M.P.H., a clinical assistant professor of pediatrics at the IU School of Medicine.

Using clinical data extracted from the Regenstrief Medical Record System -- a comprehensive electronic medical records system that gathers and stores data including diagnoses, radiology and operative reports, pharmacy records, and physician observations -- the researchers studied 14, 876 babies born between June 1993 and December 1999. They found that if given erythromycin during the first two weeks of life, babies were 10.5 times more likely to develop pyloric stenosis than babies who were not given the antibiotic.

"This large scale study could only have been undertaken with the vast amount of data available in the Regenstrief system," said Dr. Mahon. Co-authors of the study are Marc Rosenman, M.D. a health services research fellow at the Regenstrief Institute for Healthcare, and Martin Kleiman, M.D., Ryan White Professor of Pediatrics at the IU School of Medicine.

The newborns were given erythromycin by mouth in a 10-to-14 day course, usually because of maternal chlamydia at the time of delivery. Erythromycin has had a long history as a useful, safe, and generally well-tolerated drug, the researchers reported. However, as a result of their study they say that the antibiotic should be used only with prudence in the first two weeks of life.

The IU School of Medicine study also showed that babies who received an erythromycin eye ointment, a common treatment for conjunctivitis, did not have a higher risk of pyloric stenosis.

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October 1, 2001

## Pascuzzi Named Best Neurology Teacher

INDIANAPOLIS - Robert M. Pascuzzi, M.D., has been named the American Neurological Association's Distinguished Neurology Teacher at the organization's 126th annual meeting Oct. 1.

Dr. Pascuzzi, an Indiana University School of Medicine professor, is vice-chairman of the IU Department of Neurology and chief of neurology at Wishard Memorial Hospital.

The award was established in 1997 to honor outstanding accomplishments in teaching neurology in unique and gifted ways. Nominees are gleaned from all fields of clinical neurology or neuroscience.

This is not the first time Dr. Pascuzzi's innovative teaching style has been recognized; on numerous occasions he has received recognition from IU School of Medicine students, including the prestigious Golden Apple Award presented by the graduating medical school class. He twice has been awarded an IU School of Medicine Faculty Teaching Award by the Trustees of Indiana University.

Dr. Pascuzzi attended Indiana University-Bloomington as an undergraduate and completed his medical degree at IU School of Medicine in 1979. He completed his residency training in neurology at the University of Virginia and returned to Indianapolis to teach and practice neurology in 1985.

He specializes in neuromuscular disease and directs the clinical trials program for patients with amyotrophic lateral sclerosis (Lou Gehrig's disease) at the IU Medical Center.

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October 1, 2001

## Rothenberg To Guide Title X Funding Allocation In Indiana

INDIANAPOLIS - Jeffrey M. Rothenberg, M.D., clinical assistant professor of obstetrics and gynecology at the Indiana University School of Medicine, has been appointed medical director of the Indiana Family Health Council.

Dr. Rothenberg is medical director for The Coleman Center for Women at Indiana University Hospital.

The Indiana Family Health Council is responsible for allocation of federal Title X money for the state of Indiana. Title X is administered by the U.S. Department of Health and Human Services, which is responsible for allocating annual congressional appropriations to the 10 federal health regions.

Title X grantees include various community-based organizations, community action organizations, community health centers, nursing service organizations and other nonprofit agencies. The program also supports functions aimed at assisting clinics to respond to clients' changing needs.

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October 1, 2001

## Bioethical Issues Probed At Indiana University Events

INDIANAPOLIS - As scientists apply what they learn from the mapping of the human genome, they, along with all of society, must grapple with a vast and largely undiscovered world of bioethical issues, ranging from embryonic research and stem cell therapies, to human cloning and end-of-life care.

"The impact of genetics on daily life will be profound to be sure, and advances in science and technology always raise important ethical, social, legal and political issues," notes Eric M. Meslin, Ph.D., director of the Indiana University Center for Bioethics and professor of medicine at the IU School of Medicine.

This and many other related topics will be the focus of Bioethics Today: Discourse and Dialogue, a series of presentations in October on the Indiana University-Purdue University Indianapolis and IU-Bloomington campuses.

**On Oct. 5**, Henry T. Greely, J.D., co-director of the Stanford University Program in Genomics, Ethics and Society, will speak about the issues surrounding the human cloning debate at the VanNuys Medical Science Building at the IU School of Medicine.

**On Oct. 9**, Dr. Meslin will be the featured speaker at the first session of the IU School of Medicine's Mini Medical School, a twice-yearly series of public lectures by IU clinicians and researchers. He will discuss the evolving role of patients in human research, the ethical responsibilities of clinicians and researchers and the public and private funding of human stem cell research.

The IU Center for Bioethics plays a critical role in the Indiana Genomics Initiative, a comprehensive IU biomedical endeavor established in December 2000 with a \$105 million grant from the Lilly Endowment.

**On Oct. 16**, the co-director of Yale University's Interdisciplinary Bioethics Project will discuss recent controversies and the emergence of new international standards in research ethics. Robert J. Levine, M.D., professor of medicine at Yale University School of Medicine, is the keynote speaker at Mini Medical School, a joint lecture with the IU School of Law at IUPUI. The law school is co-hosting Dr. Levine as the McDonald-Merrill-Ketcham Memorial Lecturer with the IU School of Medicine.

Earlier that day, Dr. Levine will be the keynote presenter at a medical ethics and humanities seminar, sponsored by IUPUI's School of Liberal Arts. He will discuss the current crisis in the credibility of protecting human research subjects.

Other events planned for the Bioethics Today program:

**Oct. 8** Dr. Meslin will address the faculty and students of the IU schools of medicine, dentistry, law, nursing and liberal arts, followed by a reception for Dr. Meslin at the



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VanNuys Medical Science Building at the IU School of Medicine.

**Oct. 11** The Rev. James Stender, a Vancouver, Wash., pastor, will address students, faculty and others attending the student-organized "Ethics at Lunch," a program he founded at the IU School of Medicine nearly 20 years ago.

Dr. Meslin will address faculty and students, followed by a reception hosted by IU's Poynter Center for the Study of Ethics and American Institutions at the IU School of Law in Bloomington.

**Oct. 17** Dr. Levine, Department of Medicine Grand Rounds, Myers Auditorium, Wishard Hospital on the IUPUI campus.

For more information about these and other related events, contact the IU School of Medicine's Office of Public and Media Relations at (317) 274-7722.

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September 26, 2001

## **IU School of Medicine Targets Ovarian Cancer with Department of Defense Grant**



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INDIANAPOLIS -- The U.S. Department of Defense has awarded a three-year, \$2 million grant to Indiana University School of Medicine for research to improve the effectiveness of treatments for ovarian cancer.

Nearly one woman in 70 will develop ovarian cancer in her lifetime. Called the "silent killer," ovarian cancer is not diagnosed in the majority of women until it has spread to other parts of the body, making it more difficult to treat. Cancer confined to the ovary frequently can be cured with surgery and possibly additional chemotherapy or radiation treatments. Initially, the tumors respond well to chemotherapy or radiation, however, the tumors can become resistant to treatment.

Making the tumor cells more sensitive to chemotherapy or radiation, while protecting normal cells in the body, is the focus of the DoD-funded program at the IU School of Medicine.

"We have a unique opportunity with this grant to capitalize on our strengths in ovarian cancer research and therapy to find new therapeutic strategies for treating this disease," said Stephen D. Williams, M. D., director of the Indiana University Cancer Center and principal investigator for the grant. "The research we will be doing represents the next step in the development of beneficial treatments for ovarian cancer."

The overall goal of the project is to increase the cure rate for ovarian cancer. Strategies to do this include identifying methods of altering genes that either by themselves or in combination would increase sensitivity of human ovarian cancer cells to therapy, and to develop methods of delivering the gene therapy treatment to cancer cells only, leaving normal cells free from damage from chemotherapy or radiation. Initial research will be conducted in cell lines in the laboratory and then evaluated in mice.

The laboratory projects focusing on these strategies involve finding a way to "confuse" or inhibit one of the body's mechanisms to repair the cell damage caused by chemotherapy or radiation. This would allow researchers to create ovarian tumor cells that are more responsive to chemotherapy and radiation, thus allowing lower, less toxic doses of the drugs or radiation to be used. The lower doses should provide less toxicity to normal cells. These research projects are being conducted by Mark R. Kelley, Ph.D., the Jonathan and Jennifer Simmons Professor of Pediatrics, and Suk-Hee Lee, Ph.D., associate professor of biochemistry and molecular biology.

In a third project supported by the grant, Jean A. Hurteau, M.D., associate professor of obstetrics and gynecology, will look at cell division within the ovarian cancer cell to determine if specific proteins can be used to disrupt the cycle and cause the cancer cells to die.

Kenneth P. Nephew, Ph.D., assistant professor in the Medical Sciences Program in Bloomington, is looking at genes that serve as "on-off" switches specific to ovarian cancer cells. These "switches" are part of the natural cell division process. Although several switches, also known as cell promoters, are known, none has been isolated that only targets ovarian tumors and not other critical tissues, such as the brain, liver or blood cells. This discovery is instrumental to the development of gene therapy for ovarian cancer.

Another component of the study is to evaluate the feasibility of the laboratory research in mice. Robert M. Bigsby, Ph.D., associate professor of obstetrics and gynecology, is the principal investigator of this portion of the research. Dr. Bigsby will collaborate with the other study investigators to further evaluate in animals the possibility of sensitizing ovarian cancer cells to therapy to increase the effectiveness of treatments.

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September 26, 2001

## Computer Reminders Can Increase Delivery of Preventive Care To Hospitalized Patients

INDIANAPOLIS -- In a study to be published in the September 27, 2001 issue of the *New England Journal of Medicine*, researchers from the Indiana University School of Medicine and the Regenstrief Institute for Health Care demonstrated that computer reminders can dramatically increase the number of pneumonia and flu vaccinations ordered by physicians for hospitalized adults. Further, the researchers found that a majority of all hospitalized patients are appropriate candidates for preventive care.

This is the first randomized trial to show that computer reminders can increase pneumonia and flu vaccination rates among hospitalized patients. Pneumonia and flu vaccinations are associated with decreased mortality, lower hospitalization rates and cost savings in older adults.

In this 18-month study, the computer reminder system identified 3,416 patients admitted to a general medicine service (54 percent of all patients) as eligible for preventive care measure(s), which were not ordered at the time of admission. When prompted by computer reminders, physicians ordered influenza vaccinations for 51 percent of appropriate candidates (compared to only 1 percent when not reminded). Reminded physicians also ordered pneumonia vaccinations for 36 percent of appropriate candidates (compared to less than 1 percent when not reminded).

“Hospitalization represents an opportunity to ‘target’ individuals who are particularly likely to benefit from preventive care and prevent future hospitalizations,” said the study’s first author, Paul Dexter, M.D., clinical assistant professor of medicine at the IU School of Medicine and research scientist at the Regenstrief Institute for Healthcare. “Physicians are appropriately primarily focused on treating the problem that brought the patient into the hospital. Computer reminders can relieve clinicians of having to focus on treatments unrelated to the patient’s acute medical problem, yet still maximize the benefits of hospitalization.”

The computer tools employed in the study made it extremely convenient for the physician to order preventive care. The computer reminder was an order ready to sign and the physician only had to press the “enter” key to complete a vaccination order. In addition, the reminders were highlighted with a distinctive color scheme and integrated with the physicians’ routine workflow.

“Although the reminders in this study were based on a physician order entry system and the Regenstrief Medical Records System, a rich clinical repository, neither of these features is a necessary prerequisite to improving hospital-based preventive care. The majority of reminders were triggered by information, such as the patient’s age, routinely available in hospital information systems,” said Clement McDonald, M. D., Indiana University distinguished professor and director of the Regenstrief Institute for Healthcare and senior author of the *NEJM* study.



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It is likely that with a small amount of programming development and the creation of nursing protocols to check for the very rare contraindications and previous vaccinations, many hospitals could implement simple reminders to improve preventive care in the inpatient setting according to Dr. Dexter and Dr. McDonald and their co-authors, Susan Perkins, Ph.D., J. Marc Overhage, M.D., Ph.D., Kati Maharry, M.A.S, and Richard B. Kohler, M.D. of the Indiana University School of Medicine and the

Regenstrief Institute for Healthcare. The study was funded by the Agency for Healthcare Research and Quality.

Regenstrief investigators were the first to implement and study computer reminders for physicians. Their first study examined the effect in an outpatient setting and was published in the *New England Journal of Medicine* twenty-five years ago: ["Protocol-Based Computer Reminders, the Quality of Care and the Nonperfectibility of Man," *NEJM*, 1976;295:1351-1355.]

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September 24, 2001

## IU Study Looks To Increase Mammography Screening

INDIANAPOLIS -What can be done to increase the numbers of African American women who get regular breast cancer screenings? That is the question researchers at Indiana University School of Nursing seek to answer in a National Institutes of Health study focusing on low-income African American women.

Victoria Champion, D.N.S., R.N., distinguished professor and associate dean for research at the IU School of Nursing, is leading the study, which will compare the effectiveness of three different ways woman can be approached about the merits of getting regular mammograms. The behavioral study will focus on three communication tools: an interactive computer program, a video or written materials.

Four interview sessions will be held for each participant, who will receive \$25 for each interview.

The study is part of the IU Cancer Center Prevention and Control Research Program.

African American women between the ages of 41 and 75 years who have not been diagnosed with breast cancer and have not had a mammogram in the past 18 months may participate. The women also must be on a limited income and reside in Indianapolis or any of its contiguous counties.

"It is important to find ways we can best encourage women to be screened each year for breast cancer so women don't have to die," said Dr. Champion.

Recruitment of participants will began in February and will continue through 2002.

For additional information or to participate, contact Maltie at the IU School of Nursing at 317-274-4198.

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September 20, 2001

## IU Physicians Return to Heroes' Homecoming

INDIANAPOLIS - For nearly a week, they worked dangerous, nerve-wracking, round-the-clock shifts in the ruins of lower Manhattan, aiding rescue efforts and recovery efforts in the most deadly terrorist attack ever launched. Today, they and their teammates returned to cheering crowds, hundreds of waving American flags and patriotic music.

Christian C. Strachan, M.D., and Stephanie J. Evers, M.D., Indiana University School of Medicine emergency medicine physicians, are on the Task Force One which was immediately deployed to New York City for search-and-rescue operations after two hijacked jet airliners destroyed the World Trade Center towers.

"It's wonderful to be back," said a tired looking Dr. Evers, standing on the steps of Monument Circle in downtown Indianapolis and surrounded by fellow team members. "It was a horrible situation and I wish we could have accomplished more."

Dr. Evers, 26, is a second-year resident in the school's emergency medicine program and does rotations at Methodist Hospital and Wishard Memorial Hospital on the IU Medical Center campus.

Dr. Strachan huddled with family members and friends tightly holding his toddler son, Jacob, and closely following the welcoming ceremonies. "This is just amazing," he said, surveying thousands of well-wishers who turned out for the early afternoon homecoming.

Dr. Strachan is a member of the IU School of Medicine's Emergency medicine department and a physician at Methodist Hospital of Clarian Health, following completion of a five-year, combined emergency medicine/pediatrics residency at I.U. During that time, he attended rescue training with the Federal Emergency Management Agency.

They weren't the only IU physicians on the scene at the New York City disaster site. Michael L. Olinger, M.D., assistant professor of emergency medicine and medical director of emergency and medical and ambulance services at IUSM, was in upstate New York at a conference when the attacks occurred in New York City and Washington, D.C. Within hours, Dr. Olinger, a FEMA medical services coordinator, was working alongside rescue workers (see [www.medicine.indiana.edu/news\\_releases/archive\\_01/ground\\_zero01.html](http://www.medicine.indiana.edu/news_releases/archive_01/ground_zero01.html)).

Dr. Olinger was scheduled to return home a few days after Indiana Task Force One's return.

Indiana Task Force One's return could be heard long before it was seen. An Indianapolis Police Department motorcycle escort with wailing sirens led the team's



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trucks and buses down Meridian Street and onto the circle. Drs. Evers and Strachan immediately blended into an area cordoned off for team members and their families to have private time before the ceremonies.

It wasn't the first time Dr. Strachan, a 1996 graduate of the University of Illinois College of Medicine-Chicago, was pressed into action by FEMA. He and other members of Indiana Task Force One were called up for Hurricane Floyd, which struck the North Carolina coastline in September 1999.

Dr. Evers is an honors graduate of the University of Missouri School of Medicine-Kansas City, where she was active in volunteer and community work. She completed FEMA training before her assignment to Indiana Task Force One. Dr. Evers has a background working in emergency situations; she was an emergency medical technician in Lincoln, Neb.

Dr. Olinger participated in emergency operations in the terrorist bombing of the federal building in Oklahoma City and Hurricane Marilyn in 1995, and served as support staff at the 1996 Olympic Games in Atlanta. He's also assistant medical director for the Indianapolis Motor Speedway and Indianapolis Racing League.

In their roles as FEMA team members, physicians provide emergency medical care to disaster victims, treat rescue workers and perform health evaluations.

"They went into the jaws of hell and they came back," said the homecoming emcee John Gillis, a helicopter traffic reporter for WIBC-1070 AM, Indianapolis. "We realized what evil there is in the world on September 11 -- but we know there is much more good because of who you are and what you did. You are our heroes."

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September 18, 2001

## Health Fair Benefits Community and Future Physicians

INDIANAPOLIS - An ounce of prevention may be worth a pound of cure and that weighty yet sage message is exactly what Indiana University School of Medicine students hope to deliver to near-westside city residents.

Students, working under the direction of IU physicians and faculty, are organizing and sponsoring a health fair 9 a.m. to 1 p.m., Saturday, Oct. 20, at the Westside Community Health Center, 2732 W. Michigan St.

"The fair gives us the opportunity to apply our education and, more importantly, serve the community and to better learn the needs of patients," says fair organizer Amanda Myers, a fourth-year medical student. "The Westside center was selected because it is an area that largely is medically underserved, but has active community leadership to encourage residents to take advantage of what we have to offer."

Students will assist IUSM faculty and staff physicians to provide free screenings for blood pressure, cholesterol, diabetes and colon cancer in adults. Vision and hearing screenings will be offered to children. Also, free information about breast and skin cancer, osteoporosis, exercise and diet, weight loss, prostate problems, dental hygiene and other health topics will be distributed to visitors.

Also, the Indiana chapter of the American College of Physicians will have a booth and offer to adults at high risk for complications from influenza or pneumonia, says Michael Sha, MD, who is helping medical students coordinate the event.

Students from the IU schools of dentistry and allied health science also will join the medical students in providing screenings and other services. While the medical students and their counterparts in other schools will be on the giving end, they also reap benefits, notes Palmer MacKie, MD, MS, clinical assistant professor of medicine. "Standard medical practice is good for setting bones and writing prescriptions, but I think that students discover that people and communities have different needs and different voices."

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**News Release Archives | Media Relations | IU School of Medicine**

September 18, 2001

## Special Program Focuses On Alternative Health Care, Treatment

INDIANAPOLIS - Aspirin or acupuncture? Psychological counseling or St. John's Wort? Medication or meditation? With any such choice, perhaps there's room for both.

Increasingly, Americans are looking to the Eastern culture for answers and are turning to alternative forms of medicine to maintain health and treat their maladies. *Eastern Medicine Approaches to Health and Disease*, an upcoming special program at the Indiana University Medical Center, will be part of the citywide 2001 Spirit & Place Festival.

The festival is sponsored by The Polis Center, an academic research center at the Indiana University-Purdue University Indianapolis campus.

The program is 1 p.m. to 4 p.m., Sunday, Nov. 11, and located in the Ruth Lilly Auditorium at the Riley Outpatient Center, 575 West Drive on the IUPUI campus.

"This program will introduce alternatives: alternatives in conceptualizing health, illness and recovery. These alternatives are based on Eastern philosophies and techniques and are sometimes used alone and often in conjunction with conventional care," says Palmer MacKie, M.D., clinical assistant professor of medicine at the IU School of Medicine. "Participants will have the opportunity not only to hear but to witness Eastern medicine in use."

Dr. MacKie, director of the school's Integrative Pain Center at Wishard Hospital, is a licensed acupuncturist and incorporates other forms of alternative and complementary medicine in his practice. He will be joined by panelists from other related disciplines, including:

- **Larry Gerstein, Ph.D.**, professor and director of the doctoral program in counseling psychology at Ball State University, will moderate the session. Dr. Gerstein is an expert in Eastern religion and philosophy and conducts research at the Tibetan Medical and Astrological Institute in India.
- **Young Ki Park, D.O.**, is an Indianapolis family practitioner and osteopath, specializing in acupuncture, herbal therapies and Oriental medicine.
- **John Peterson, M.D.**, is a Delaware County family physician who uses ayurvedic techniques (an India-originated herbal and meditation approach to diagnose and treat patients), is medical director of the Expectations Birthing Center near Muncie.
- **Yangbum Gyal**, a Kachupa doctor of Tibetan medicine, diet and lifestyle, and has taught at IU-Bloomington.

For more information about the *Eastern Medicine Approaches to Health and*



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*Disease program*, call 317-579-9015 or e-mail [Rangzen@aol.com](mailto:Rangzen@aol.com).

For information about the 2001 Spirit & Place Festival and The Polis Center, see [www.polis.iupui.edu/polis/home.htm](http://www.polis.iupui.edu/polis/home.htm) or [www.rangzen.com](http://www.rangzen.com).

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September 14, 2001

## IU School of Medicine Pauses to Reflect, Mourn and Unify

INDIANAPOLIS - Some looked upward as the commercial jet airliner climbed slowly into a cloudless blue canopy spreading above the Hoosier landscape. A medical student with closed eyes whispered a prayer while a scientist read from the Book of Lamentations.

An Indiana University-Purdue University Indianapolis student wearing an American flag t-shirt dabbed at his eyes and in an emotional voice proclaimed that the events of Sept. 11, 2001, have galvanized the United States into a nation of "250 million New Yorkers." The haunting yet hopeful words of "America, the Beautiful" and "Star-Spangled Banner" were sung in hushed tones.

An estimated 600 people gathered Sept. 14 in front of the IU School of Medicine's VanNuys Medical Science Building on the IUPUI campus to mourn and memorialize the tragedies in New York City and Washington, D.C.

"Today, we're feeling a range of emotions, from impotence to anger to grief because of what has happened, but today we come together as a nation," said IU School of Medicine Dean Craig Brater, M.D. "We are here today - this extended family of ours - and know that we have solidarity in purpose."

Dr. Brater was among faculty, staff and students who addressed the crowd gathered on the sun-splashed plaza for the noon service. Herb Cushing, M.D., acting associate dean of for Medical Student Academic Affairs, said the best legacy our nation could attain is to move forward toward a more perfect world. "I want to believe the slain would want us to do this."

For first-year medical student Ahmed Athar, the events that unfolded Sept. 11 have left him feeling a mixed bag of emotions, and that he was alarmed by television news accounts of some in Arab nations cheering the attacks. "Please know that I would like to change the perception that terrorist acts are not part of the Islamic faith - my faith - nor do they represent any other true religious faith. We stand together," Athar added, "all being different and all being the same."

Those same sentiments were echoed by Emad Rahmani, M.D., assistant professor of medicine. Reading from a letter from the Council on Islamic-American Relations, he emphasized the outrage Muslims continually have expressed at terrorist acts not only in the United States but throughout the world.

"This is America!" he said, alluding to reports of growing anti-Arab violence committed against citizen and visiting Muslims in the United States.

Indeed, America's unity is strengthened only by its willingness to not only tolerate but also embrace the diversity of its people and many cultures, noted Meredith Hull, M.D., assistant dean of IUSM's House Staff Affairs.



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Fear certainly has been in large supply in recent days. For IUPUI sophomore Angie Green, her dreams of one day living and working in New York City are not as certain. "But I have hope when I see the way people are reaching out to one another in these terrible times," she said. "Everywhere I look I see how much love there really is in this country. We will learn to laugh again."

Healing will not occur overnight, said Suzanne Kunkle, Ph.D., director of Student and Resident Counseling at the IU School of Medicine. Dr. Kunkle's office has offered sessions to all at the school who are trying to cope emotionally with the terrorist acts that has claimed an estimated 5,000 lives. "We're always there for you and especially more so in the days ahead," she said.

With American flags fluttering at half-staff across the IUPUI campus, Diane Southard, Ph.D., a scientist in the school's Infectious Diseases Division, stepped forward and asked the gathering to join her in singing "America, the Beautiful" beneath the cloudless, spacious skies.

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September 14, 2001

## At 'Ground Zero' in Manhattan IU-Wishard Emergency Doc on Tragedy's Frontlines

As an emergency room physician, Michael L. Olinger is familiar with working in an environment where calamity, trauma and tragedy can strike and swirl like a twister. But nothing in his vast experience could prepare him for the devastation wrought by the terrorist attacks on the World Trade Center's twin towers in lower Manhattan.

"Unbelievable, very surreal," says Dr. Olinger, assistant professor of emergency medicine at the Indiana University School of Medicine and medical director of emergency medical and ambulance services at Wishard Hospital in Indianapolis.

"The enormity of the destruction is so vast and virtually impossible to describe," adds Dr. Olinger, whose crackled cell phone conversation is laced with the staccato background noise of wailing sirens and grumbling heavy-equipment vehicles.

While the total number of casualties is unknown at this time, it's estimated that as many as 5,000 people were killed and thousands injured when two hijacked commercial airliners slammed into the World Trade Center towers. Shortly thereafter, another hijacked airliner veered into the Pentagon in Washington, D.C., killing all aboard and about 190 military and civilian employees.

Dr. Olinger was in upper state New York at an emergency medicine conference when the attacks occurred in Manhattan and Washington. He was immediately dispatched to New York City to serve in a role for which has extensive training. Dr. Olinger is a medical services coordinator for the Federal Emergency Management Agency's Urban Search and Rescue System, working side-by-side with emergency crews to provide emergency care to victims who are trapped beneath rubble.

It isn't the first time Dr. Olinger's expertise has been put to the test. He was involved in emergency operations in the 1995 terrorist bombing of the federal building in Oklahoma City, and later that same year when Hurricane Marilyn struck the U.S. Virgin Islands. Dr. Olinger also was among the support staff at the 1996 Olympic games in Atlanta.

Closer to home, Dr. Olinger has served on Indiana's Emergency Medical Services Commission and has been medical director for several EMS agencies in the Indianapolis-Marion County area. He also is assistant medical director for the Indianapolis Motor Speedway and the Indianapolis Racing League.

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August 14, 2001

## IU School of Medicine Offers Vascular Disease Screenings

INDIANAPOLIS - The Indiana University School of Medicine Department of Radiology and Surgery and the Indiana Vascular Institute will conduct free screenings for people suffering from leg pain to determine if they are at risk for peripheral vascular disease, a common condition affecting thousands of Hoosiers.

The Indiana Vascular Institute will sponsor free screenings from 8 a.m. to 4 p.m., Thursday, Sept. 20, in Room 4420, at Indiana University Hospital. The department's participation is part of the nationwide *Legs for Life™ National Screening Week for PVD*, sponsored by the Society of Cardiovascular & Interventional Radiology. The screening will be coordinated by Michael S. Stecker, M.D., assistant professor of radiology, and an SCVIR member.

PVD is a condition in which arteries in the leg can become narrowed or blocked. Untreated, walking can become difficult due to pain, numbness or muscle weakness. Skin ulcers can develop and in severe cases, gangrene can set in, possibly resulting in amputation. The disease starts quietly and many sufferers wrongly conclude that the pain and weakness in their legs are normal signs of aging. PVD is most common in those 50 years of age and older and factors that might aggravate the condition are smoking, high blood pressure, high cholesterol, diabetes and being overweight.

The screening program at IU School of Medicine is fast, free and painless. During the Legs for Life screening, participants will complete a questionnaire designed to help assess their risk for developing PVD. Medical staff will take blood pressure readings in the ankles and arms to check for possible circulation problems. Those who report symptoms of PVD have multiple risk factors or abnormal blood pressure readings will be advised to consult further with their personal primary care physician.

To arrange for your free screening, call Clarian On-Call at 317-916-3525. Participants with access to the Internet can visit the Department of Radiology's Web site at [www.indyrad.iupui.edu/legsforlife](http://www.indyrad.iupui.edu/legsforlife), for more information or to complete a pre-screening survey.

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August 14, 2001

## Free Immunizations Offered Sept. 8 to Hispanic Children

INDIANAPOLIS - Hispanic youngsters soon can roll up their sleeves to gain protection against diseases through a program offered by the Indiana University School of Medicine.

"Super Shot Saturday" will offer free immunizations to children 10 a.m. to 2 p.m., Saturday, Sept. 8, at the Indianapolis Hispanic Center, 617 E. N. Street. The program is conducted by IU physicians and volunteer School of Medicine students, many of whom have Spanish-speaking skills.

The immunization program is offered in the fall and spring of each year and provides students with the opportunity to interact with patients and the city's Hispanic community.

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August 8, 2001

## Landmark NIH Study: Diet And Exercise Dramatically Delay Type 2 Diabetes



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INDIANAPOLIS - At least 10 million Americans at high risk for type 2 diabetes can sharply lower their chances of getting the disease with diet and exercise, according to the findings of a major clinical trial conducted by the Indiana University School of Medicine and 26 other medical centers nationwide.

The results of the five-year study were announced Wednesday, Aug. 8, in Washington, D.C., by Health and Human Services Secretary Tommy G. Thompson. The National Institutes of Health clinical trial was ended early because of the conclusive results.

"In view of the rapidly rising rates of obesity and diabetes in America, this good news couldn't come at a better time," said Thompson. "So many of our health problems can be avoided through diet, exercise and making sure we take care of ourselves. By promoting healthy lifestyles, we can improve the quality of life for all Americans and reduce health care costs dramatically.

The same study found that treatment with the oral diabetes drug metformin (Glucophage®) also reduces diabetes risk, though less dramatically, in people at high risk for type 2 diabetes.

"This is the largest clinical trial ever conducted by the National Institutes of Health and it will have profound public health implications," said David G. Marrero, Ph.D., professor of medicine and principal investigator of the IU School of Medicine trial.

"This trial shows that type 2 diabetes can be prevented or delayed and will emphasize a shift to prevention in diabetic care."

Dr. Marrero also was active on the national level, serving as one of about a dozen researchers who designed the study. He also is chairman of the committee translating the national findings.

Participants randomly assigned to intensive lifestyle interventions reduced their risk of getting type 2 diabetes by 58 percent. On average, this group maintained their physical activity at 30 minutes per day, usually with walking or other moderate exercise, and lost 5 percent to 7 percent of their body weight.

Participants randomized to treatment with metformin reduced their risk of getting type 2 diabetes by 31 percent.

"Every year a person can live free of diabetes means an added year of life free of the suffering, disability, and the medical costs incurred by this disease," said Dr. Marrero. "The Diabetes Prevention Program findings represent a major step toward the goal of containing and ultimately reversing the epidemic of type 2 diabetes in this country. We



are very grateful to the 192 Hoosiers who participated in the study at IU."

The findings came from the Diabetes Prevention Program, a major clinical trial comparing diet and exercise to treatment with metformin in 3,234 people with impaired glucose tolerance, a condition that often precedes diabetes. On the advice of the DPP's external data monitoring board, the trial ended a year early because the data had clearly answer the main research questions.

Smaller studies in China and Finland have shown that diet and exercise can delay type 2 diabetes in at-risk people, but the DPP is the first major trial to show that diet and exercise can effectively delay diabetes in a diverse American population of overweight people with impaired glucose tolerance. IGT is a condition in which blood glucose levels are higher than normal but not yet diabetic.

Forty-five percent of the participants enrolled in the DPP were from minority groups that suffer disproportionately from type 2 diabetes: African Americans, Hispanic Americans, Asian Americans and Pacific Islanders, and American Indians. The trial also recruited other groups known to be at higher risk for type 2 diabetes, including individuals age 60 and older, women with a history of gestational diabetes, and people with a first-degree relative with type 2 diabetes.

Lifestyle intervention worked as well in men and women and in all the ethnic groups, as well as those age 60 and over, who have a nearly 20 percent prevalence of diabetes. Metformin also was effective in men and women and in all the ethnic groups, but was relatively ineffective in the older volunteers and in those who were less overweight.

DPP volunteers were randomly assigned to one of the following groups:

- intensive lifestyle changes with the arm of reducing weight by 7 percent through a low-fat diet and exercising for 150 minutes a week.
- treatment with the drug metformin (850 mg twice a day), approved in 1995 to treat type 2 diabetes.
- a standard group taking placebo pills in place of metformin.

The latter two groups also received information on diet and exercise.

A fourth arm of the study, treatment with the drug troglitazone combined with standard diet and exercise recommendations, was discontinued in June 1998 due to the potential for liver toxicity.

DPP participants ranged in age from 25 to 85, with an average age of 51. Upon entry to the study, all had impaired glucose tolerance as measured by an oral glucose tolerance test, and all were overweight, with an average body mass index of 34.

About 29 percent of the DPP standard group developed diabetes during the average follow-up period of 3 years. In contrast, 14 percent of the diet and exercise arm and 22 percent of the metformin arm developed diabetes. Volunteers in the diet and exercise arm achieved the study goal, on average a 7 percent - 15 pound - weight

loss, in the first year and generally sustained a 5 percent total loss for the study's duration. Participants in the lifestyle intervention arm received training in diet, exercise (most chose walking) and behavior modification skills.

Whether the interventions prevent diabetes altogether is unknown. Researchers intend to follow the DPP population beyond the 3-year period of the study to learn how long the interventions are effective. The researchers will analyze the data to determine whether the interventions reduced cardiovascular disease and atherosclerosis, major causes of death in people with type 2 diabetes.

Diabetes afflicts more than 16 million people in the United States. It is the main cause of kidney failure, limb amputations, new onset blindness in adults and a major cause of heart disease and stroke.

Type 2 diabetes, which accounts for nearly 95 percent of all diabetes cases, is most common in adults over the age of 40. It also affects 8 percent of the U.S. population age 20 and older. Risk factors include obesity, inactivity, family history of diabetes and racial or ethnic background. African American adults have a 60 percent higher rate of type 2 diabetes and Hispanic adults have a 90 percent higher rate.

The prevalence of type 2 diabetes has tripled in the past 30 years and much of the increase is due to the dramatic upsurge in obesity. People with a BMI of 30 or greater have a five-fold greater risk of diabetes than people with a normal BMI of 25 or less.

To date, the cost of the DPP trial is \$174.3 million. It was funded by the National Institute of Diabetes and Digestive and Kidney Diseases, the National Institute of Child Health and Human Development, the National Institute on Aging, the National Center on Minority Health and Health Disparities, the National Center for Research Resources, the Office of Research on Women's Health and the Office of Behavioral and Social Science Research within the NIH.

Additional funding and support was provided by the Centers for Disease Control and Prevention, the Indian Health Service and the American Diabetes Association. The study also is funded in part through a Cooperative Research Development Agreement with Bristol Myers Squibb with other sources of corporate support from Merck and Company, Merck Medco, Hoechst Marion Roussell, Lifescan, Slim-Fast, Nike and Health-O-Meter.

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August 8, 2001

## Medical Training Journey Begins For IU Students

INDIANAPOLIS - Marilyn Gearhart and her daughter Shannon always have been close and shared many experiences. For the next four years, they will become even closer as they train to become physicians at the Indiana University School of Medicine.

The Auburn, Ind., mother and daughter will be among 280 students participating in the Aug. 19 White Coat Ceremony, a unique rite of passage marking the beginning of an IU medical student's education. With their families, school faculty and other guests looking on, the first-year students will receive their laboratory coats and recite the Hippocratic oath.

"The White Coat Ceremony impresses upon students the altruistic nature of the doctor-and-patient relationship," says IU School of Medicine Dean D. Craig Brater, M. D. "It encourages students to accept the obligations inherent in the practice of medicine, to excel in science, to be compassionate and to maintain the honor and the dignity of the profession."

The Gearharts are the first mother-and-daughter team to be admitted together at the IU School of Medicine, a situation both view as a benefit. "We each have our own particular strengths and weaknesses, and we can support each other as needed," notes Shannon, a recent biology honors graduate at Loyola University in Chicago. "Certainly, this is an unusual situation but my mother always has been there for me. Now I'll be there for her, too."

"But it's highly debatable we'll sit together in class," jokingly adds Marilyn, a former teacher and mathematics chair at DeKalb High School near Auburn.

In 1993, the Arnold P. Gold Foundation established the White Coat Ceremony, a growing program among medical schools around the country.

The IU School of Medicine, the second largest medical school in the United States with more than 1,200 students, has nine medical education centers throughout the state for first- and second-year students. IU medical education centers are located in Gary (IU-Northwest), Bloomington (IU campus), Evansville (University of Southern Indiana), Terre Haute (Indiana State University), South Bend (University of Notre Dame), West Lafayette (Purdue University), Fort Wayne (Indiana University-Purdue University campus), Muncie (Ball Memorial Hospital), and Indianapolis (IUPUI)

In their first year, IUSM students study gross anatomy, histology, neurobiology, biochemistry, physiology, immunology, microbiology and introduction to medicine. The second year includes courses in biostatistics, pharmacology, medical genetics, pathology and emergency medicine.

All IU School of Medicine students complete their final two years of study at the IUPUI



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campus. Students receive clinical training in that time, in addition to further classroom and laboratory studies.

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For more information about the Indiana University School of Medicine, visit its Web site at [www.medicine.indiana.edu](http://www.medicine.indiana.edu).

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July 26, 2001

## IU Prostate Cancer Prevention Trial Looking For Several Good Men

INDIANAPOLIS -- Can nutritional supplements protect males against prostate cancer? That's what medical researchers at the Indiana University School of Medicine hope to help answer in the largest prostate cancer prevention study ever launched by the National Cancer Institute.

Healthy males 55 years and older are needed for the study. The IU Cancer Center, a member of the Southwest Oncology Group, is among 400 sites in the United States, Canada and Puerto Rico participating in the Selenium and Vitamin E Cancer Prevention Trial (SELECT). The study will take up to 12 years to complete and seeks to enlist more than 32,000 men.

Selenium and vitamin E, both naturally occurring nutrients, are antioxidants, capable of neutralizing toxins known as "free radicals" that might otherwise damage cells and lead to cancer.

"SELECT is the first study designed to look directly at the effects of these two nutrients," says Michael O. Koch, M.D., chairman of the IU Department of Urology. "Previous research involving selenium and vitamin E suggests they might prevent prostate cancer, but we don't know for sure. When this study is finished we will know what benefits these supplements offer to patients."

Prostate cancer is second only to skin cancer as the most common form affecting men. This year, more than 198,000 American males will be diagnosed with prostate cancer with nearly 32,000 dying from the disease. In Indiana, 4,400 will get prostate cancer and 700 will die of it.

The IU trial seeks males who are 55 and older (50 and older for African-Americans) who have never had prostate cancer or other cancers with the exception of non-melanoma skin cancer in the last five years; and are generally in good health. Central Indiana men participating in the study will visit the IU Cancer Center every six months. Upon enrollment, they will be assigned by chance to one of four groups.

Those interested in participating in the study should call the Department of Urology at 317-630-6044, or clinical research coordinator Janis Aichinger, RN, at 317-630-8913.

For more information about the SELECT study and prostate cancer, visit the following Web sites:

National Cancer Institute  
<http://cancer.gov/select>

Southwest Oncology Group  
<http://swog.org> (choose SELECT)



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IU School of Medicine, Department of Urology

<http://www.iupui.edu/%7Eurology/>

Clinical Trials at the Indiana University School of Medicine

<http://medicine.iupui.edu/ctp>.

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July 26, 2001

## Riley Hospital Physician Edits Textbook To Be Used Worldwide

INDIANAPOLIS -- Richard Rink, M.D., director of pediatric urology at Riley Hospital for Children has edited a new major textbook, Pediatric Urology. The textbook will be distributed worldwide as the latest comprehensive clinical guide on pediatric urology.

The textbook is intended for use by residents, pediatric urology fellows, general and pediatric urologists, general surgeons who perform some urology procedures and pediatric sub-specialists.

Dr. Rink, the Robert A. Garrett Professor of Pediatric Urologic Research at the Indiana University School of Medicine, collaborated with two other physicians, Drs. Pierre Moriquand, director of pediatric urology at Hospital Debrousse in Lyon, France, and John Gearhart, director of pediatric urology at Johns Hopkins University. In addition, several other IU School of Medicine and Riley Hospital for Children faculty contributed to the 1,050-page textbook.

Dr. Rink and the pediatric urology department at Riley Hospital of Clarian Health are internationally recognized as experts in the specialty. The only four fellowship-trained pediatric urologists in Indiana practice at Riley Hospital. Together, they see more than 8,000 patients and perform nearly 1,600 surgical procedures on infants and children each year.

While most hospitals still use invasive procedures, many minimally invasive procedures have become common practice at Riley. This has resulted in short hospital stays for inpatients, less need for medication, shorter surgery time and reduced complications. Riley pediatric urologists have pioneered several operative procedures.

In addition, the IU Department of Urology is renowned for its training program and is one of 14 accredited fellowships in the United States and Canada, and is considered to be among the three best in North America.

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June 29, 2001

## Women's Health Topics Spin Off New Web Site

INDIANAPOLIS - The Indiana University School of Medicine's National Center of Excellence in Women's Health has launched a new Web site to provide informative and educational updates on various women's health issues and concerns.

The site, [www.womenshealthtoday.org](http://www.womenshealthtoday.org), focuses on special topics each month; the topic for the site's recent debut is osteoporosis. In addition to providing information about general women health issues and about children's health, users also can submit questions and receive answers from IU School of Medicine physicians and also find useful links to other Web sites.

The CoE partnered with the Lilly Centre for Women's Health and the Indianapolis-Marion County Public Library as topic sponsors. Indianapolis radio stations WZPL 99.5 FM, WTPI 107.9 FM and WMYS AM 1430 (all owned by MyStar Communications) are providing promotional support, Web design and consulting, and project management provided by Amusion Entermedia and Information Resource Consulting.

"Both the Lilly Centre and the Indianapolis-Marion County Public Library are natural partners for this project," says IU physician Ann Zerr, M.D., CoE co-director. "The formation of the Lilly Centre for Women's Health in 1996 formalized Eli Lilly and Company's commitment to integrate women's health into their corporation and to advocate in partnership with like-minded organizations.

The library will make its resources on the monthly topics readily and separately available to the public, Dr. Zerr further notes. "Our dual goal is met by getting women into library branches to learn more about a health issue and get their families oriented to the many services provided the Indianapolis-Marion County Public Library system to children and adults."

"This local initiative provides information and resources women need to empower themselves to make informed health-care decisions," notes Patricia Martin, director of the Lilly Centre for Women's Health. "From this partnership, an added benefit will be available to users in July through the Lilly Centre's Web site *Chat With a Nurse* program ([www.lillywomenshealth.com](http://www.lillywomenshealth.com)), and visitors can pose questions about osteoporosis with registered nurses 24 hours a day, seven days a week."

The Indianapolis-Marion County Library is a natural partner for this venture. "The opportunity for the library is an exciting venture and an outgrowth of our mission to be the information source for the community," says Maria Blake, director of communications and promotions at IMCPL. "We are pleased to provide this service and look forward to a fruitful collaboration."

The CoE encourages links to women's health events and issues of interest from anywhere in Indiana. To include a link or for more information, contact Tina Darling,



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CoE project coordinator at [tdarling@iupui.edu](mailto:tdarling@iupui.edu), or call her at 317-630-2243.

For more information about the: Indiana University School of Medicine National Center for Excellence in Women's Health, visit <http://www.iupui.edu/~Ewomenhlt/>

Lilly Centre for Women's Health, visit <http://www.lillywomenshealth.com> or contact Jill Schaefer at 317-277-3661.

Indianapolis-Marion County Public Library, go to <http://www.imcpl.org> or contact Maria Blake at 317-269-5225.

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June 28, 2001

## Partnership Provides Free Mammograms to Indy-area Women

INDIANAPOLIS - Many local needy women will receive free mammograms because of a continued initiative supported by the Indiana University School of Medicine National Center of Excellence in Women's Health and Quilt America!

The Yes Mam! ® Mammogram Challenge is a project established by Quilt America!, a national initiative by which quiltmakers raise funds from their creations to support free mammograms in communities throughout the United States.

The CoE has received funding from the project since 1998, enabling the St. Margaret's Diagnostic Breast Center at Wishard Hospital to provide free mammograms to more than 300 needy women annually. The center also has a mobile unit that provides on-site mammograms.

The average cost of a mammogram is \$100.

"Mammography is a recognized and proven health procedure that saves lives, but many women remain untested because of the costs," says Tina Darling, CoE project coordinator. "The Mammogram Challenge alleviates that situation and raises public awareness of breast cancer screening and treatment."

For more information about:

IU School of Medicine National Center of Excellence in Women's Health, go to its Web site at <http://www.iupui.edu/~womenhlt/>

St. Margaret's Diagnostic Breast Center at Wishard Hospital, go to <http://www.wishard.edu/internet/women/index.html>

Yes Mam! ® Mammogram Challenge and Quilt America! contact Rita Barber, Barber Diversified, P.O. Box 503, Carlinville, IL 62626.

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June 28, 2001

## Svirsky Named Editor of Journal

INDIANAPOLIS -- Mario A. Svirsky, Ph.D., associate professor at the Indiana University School of Medicine, has been named editor-in-chief of *Ear and Hearing*, the journal of the American Auditory Society.

Dr. Svirsky, who is involved in auditory and speech production/processing research at the DeVault Otologic Research Laboratory in the IU Department of Otolaryngology -- Head & Neck Surgery, previously served as section editor for the Cochlear Implant and Rehabilitative Audiology section of the journal.

The multidisciplinary journal publishes original research focusing on assessment, diagnosis and management of auditory disorders.

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June 27, 2001

## Road Deaths Among Indiana Children On Decline



Pediatrician Marilyn Bull, M.D., and a young mother demonstrate to onlookers the proper way to secure an infant in a child-safety seat. It was part of activities surrounding the IU School of Medicine's Automotive Safety for Children Program June 26 at Riley Hospital for Children. (Photo: Judith Talty)



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INDIANAPOLIS - The fatality rate among youngsters killed in vehicle accidents has reversed gears significantly the past two decades, reports the Indiana University School of Medicine's Automotive Safety for Children Program.

In 1981, 99 children aged 14 and younger were killed on Hoosier roadways. By 1999, the number was significantly lower at 43, a nearly 60 percent decline. The national rate fell about 46 percent during the same time period. State officials cite seat-belt laws and heightened public awareness of child safety as the reasons for the reduced deaths.

The Automotive Safety Program for Children was launched in 1981 under the guidance of Marilyn Bull, M.D., director of development pediatrics and Morris Green Professor of Pediatrics at the IU School of Medicine. Dr. Bull saw a need to ensure the safety of children being transported to and from the hospital, particularly those youngsters with special health-care needs.

"We're pleased the number of deaths and injuries are declining, but we have a long way to go to protect our children," says Dr. Bull, who practices at James Whitcomb Riley Hospital for Children. "Unfortunately, unrestrained or improperly restrained children are far more likely to be injured, to suffer more severe injuries, and to die in the event of a crash."

Information from the National Safe Kids Campaign underscores Dr. Bull's claim. The campaign reports that motor vehicle crashes remain the leading cause of unintentional injuries and deaths in the United States. In 1998, 1,765 child passengers ages 14 and under died in motor vehicle crashes.

The Automotive Safety for Children Program has expanded greatly statewide since its

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establishment. Today's programs include low-cost car seat distribution, child safety-seat fitting stations, Project SEAT (a program with local and state law-enforcement agencies to distribute vouchers to for safety seats during routine traffic stops, curricula guides for elementary teachers and students and advocacy materials for parents, government officials and civic organizations.

The program observed its 20th anniversary June 26 at Riley Hospital, offering safety tips and materials for parents and games and refreshments for hospitalized youngsters.

For more information about the IU School of Medicine Automotive Safety for Children Program, visit its Web site at <http://www.preventinjury.org>

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May 17, 2001

## Genetic Find Links Alcoholism, Depression

INDIANAPOLIS -- Genetic research has confirmed what many have suspected for years: there is a direct link between alcoholism and depression.

Researchers have identified an area on chromosome 1 that is linked with an individual's vulnerability to alcoholism, as well as affective disorders, primarily depression. The revelation, however, does not mean that all individuals with the anomaly will develop depression or alcoholism. It is believed that multiple genetic factors, as well as environmental factors, are involved, according to the groundbreaking study published in the May 2001 issue of American Journal of Psychiatry.

The research, conducted in part at the Indiana University School of Medicine, is the first to confirm a link between alcoholism and depression.

"We are not thinking of genes that cause a disorder," said John I. Nurnberger Jr., M.D., Ph.D., the lead author of the study and director of the Institute of Psychiatric Research at the IU School of Medicine. "What we are looking for are vulnerability factors or predisposition, not causative factors."

The study, funded by the National Institute on Alcohol Abuse and Alcoholism, was conducted at six medical centers in the United States and involved hundreds of families and thousands of individuals.

Dr. Nurnberger, the Joyce and Iver Small Professor of Psychiatry and professor of medical neurobiology and of medical and molecular genetics at IU, said the discovery will allow researchers to look at patterns of development in families. "In the future, we may be able to predict whether an individual is likely to develop these disorders," he said.

"The genetic link also could allow for development of treatments targeting particular abnormalities involved in alcoholism and affective disorders," he added.

Other IU School of Medicine researchers involved in the study are Tatiana Foroud, Ph.D., associate professor, and Leah Flury, M.S., applied statistician, both in the Department of Medical and Molecular Genetics; Eric T. Meyer, M.A., information and technology coordinator, Institute of Psychiatric Research; and Howard Edenberg, Ph.D., professor, Department of Biochemistry and Molecular Biology.

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May 10, 2001

## Spring Medical Alumni Weekend To Recognize Former Deans, Faculty, Alumni And Students



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INDIANAPOLIS -- The Indiana University Spring Medical Alumni Weekend May 18-20 will feature the opening of the new medical student center and a ceremony honoring former deans.

The Walter J. Daly Student Center dedication will be 4 p.m. Friday, May 18. The center will provide 24-hour access to study rooms, exercise equipment and break rooms to medical and graduate students and stand in tribute to Dr. Daly's commitment to student support. The newly remodeled and expanded student center is located immediately west of the Ruth Lilly Medical Research and Library Building. Dr. Daly served as dean of the IU School of Medicine from 1983 to 1995.

Two physicians will be recognized for their contributions to the field of medicine during the annual Strawberry Shortcake Luncheon at noon Saturday.

The Glenn W. Irwin Jr., M.D., Distinguished Faculty Award will be presented to **C. Conrad Johnston Jr., MD**, distinguished professor. A professor of medicine, Dr. Johnston was director of the Division of Endocrinology from 1968 to 1994.

**Ray Nicholson, MD**, class of 1955, will be the recipient of the 2001 Distinguished Medical Alumnus Award. Dr. Nicholson, who served as director of the Family Practice Residency Program at St. Mary's Medical Center in Evansville from 1970 to 1997, served as president of the IU Medical Alumni Council in 1978-79 and 1988-89.

The IU School of Medicine will host a special ceremony 3 p.m., Saturday, May 19, recognizing the nine physicians who have served as dean of the school since 1903.

The highlight of the event will be the unveiling of a statue of Willis D. Gatch, MD, the third dean of the school who served from 1932-46. The bust will complete the group of statues of all former deans on exhibit in the Ruth Lilly Medical Research and Library Building.

The four living dean-emeriti and family members of the deceased deans will be present, as will Ben J. Wilson, MD class of 1944, a retired surgeon and sculptor of the busts of Dr. Gatch and three other deans.

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May 10, 2001

## 261 New Physicians To Take Hippocratic Oath On Mother's Day

INDIANAPOLIS -- Sunday, May 13, will hold special appeal for mothers of the 261 sons or daughters who will graduate from the Indiana University School of Medicine during the annual event on Mother's Day.

One of the most poignant moments for the class of 2001 will begin at 5 p.m. following the primary Indiana University-Purdue University Indianapolis graduation ceremony. At that time Indiana's newest physicians will take the Hippocratic oath for the first time as doctors. Both ceremonies will be at the Indiana Convention Center and RCA Dome.

The processional at the RCA Dome for all IUPUI graduates will begin at 2:30 p.m. with formal ceremonies beginning at 3 p.m. The event should conclude by 5 p.m. at which time IU School of Medicine graduates and their families and friends will reassemble on the stadium floor for the administration of the time-honored pledge to their profession known as the Hippocratic oath, diploma presentations and hooding ceremony.

Honorary degrees to be conferred during the IUPUI ceremony include:

- Doris Merritt, M.D., special assistant to the chancellor for research and graduate education and professor emeritus of pediatrics at the IU School of Medicine, Doctor of Science;
- George Rawls, M.D., a retired Indianapolis surgeon and former assistant dean of the IU School of Medicine, Doctor of Science;
- Daniel Laskin, D.D.S., a distinguished leader in the field of oral and maxillofacial surgery, Doctor of Science;
- Raymond Leppard, Indianapolis Symphony Orchestra music director, Doctor of Music. Leppard's degree will be conferred at both the IUB and IUPUI commencement ceremonies.

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May 10, 2001

## Coalition Forms To Combat Hoosier Suicides

INDIANAPOLIS - In response to the U.S. Surgeon General's call to action for states to mobilize with suicide-prevention programs, a new group in Indiana has responded to that call.

The Indiana Partnership to Prevent Firearm Violence, based at the Indiana University School of Medicine, is spearheading the formation of the Suicide Prevention Coalition to heighten the public's awareness about the risk factors linked to suicide, and reduce the stigma associated with mental illness.

In Indiana, suicide has become a public health epidemic. According to the Centers for Disease Control and Prevention, Indiana's suicide rate is higher than the national average. During the period from 1996-1998, the rate of suicide for Hoosiers was 12.25 per 100,000-making it the second highest rate in the Midwest. Suicide is the ninth leading cause of death for Indiana residents. Kentucky had the highest rate of suicide in the Midwest at 12.74 per 100,000.

"It is so important for citizens to know that suicide affects a broad range of people throughout the state, and we need to work together to bring these numbers down," says Marilyn Bull, M.D., an IU School of Medicine pediatrician and medical director of the Indiana Partnership to Prevent Firearm Violence.

Each year, 30,000 Americans take their own lives, and suicide is now the eighth leading cause of death in the United States. U. S. Surgeon General David Satcher says suicide is a serious public health problem and claims more American lives than homicide. The Surgeon General's "call to action" recommends that each state adopt a suicide prevention plan.

"The trend among African American male suicides is alarming," says Marion County Health Department Director Virginia A. Caine, M.D. "All suicide rates are unacceptable and we will be working with a number of agencies to address the problem."

### **The partnership has teamed up with a number of statewide public health groups to:**

- Distribute information and education about the risk factors associated with suicide.
- Recommend removal of all lethal weapons, including firearms from the home if a family member is depressed.
- Disseminate information to the public about what communities can do to protect their loved ones, such as developing strong social support networks,



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and providing better access to clinical interventions.

- Develop and implement strategies to reduce the stigma associated with mental illness, substance abuse, and suicide.

According to the CDC, from 1990-98, over 400 suicides in Indiana were committed each year with a firearm and three out of five involved a firearm. In 1999, claimed 621 Hoosier lives.

### **Others In Indiana:**

- Suicide is the third leading cause of death for young people ages 15-24.
- During 1996-1998, white males accounted for 77 percent of all suicides.
- Sixty-three percent were committed with a firearm.
- 83 percent of all firearm suicides were committed by white men.
- From 1994-1998, for black males ages 15-24, the suicide rate rose from 15.18 to 37.19 per 100,000.

"There are a number of places where people can get help in Indiana," says Marjorie Towell, executive director of the Mental Health Association in Marion County "For over 30 years, our agency has maintained a crisis and suicide intervention service that provides the public with crisis counseling and referral information."

Additionally, the Mental Health Association provides "Teen Link," a special telephone hotline developed especially for teenagers. "People should not be afraid to talk about depression or mental illness-sometimes we all need help," said Ms. Towell. "We are glad to be part of this national campaign."

Other coalition members collaborating on a statewide strategy to reduce the death toll resulting from suicide include Riley Hospital for Children's Child and Adolescent Psychiatric Clinics, Marion County Health Department, the Indiana State Department of Health, the Mental Health Division of Family and Social Services, and the Mental Health Association in Marion County.

The Indiana Partnership to Prevent Firearm Violence was created to help reduce the numbers of death and injuries resulting from guns. The Partnership is currently developing a firearm injury data collection system that will provide in-depth information about circumstances surrounding suicides involving firearms. This information will be useful for future suicide prevention and intervention strategies.

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May 10, 2001

## Social Anxiety Disorder Study

INDIANAPOLIS -- Many teenagers are nervous when they give speeches or answers in class. Many often feel shy or uncomfortable at parties or when they meet new people. Some teenagers feel extremely nervous and shy most of the time. They worry so much about embarrassing themselves in front of other people that they stay quiet much of the time.

If your teenage son or daughter has had extreme social anxiety for at least six months, your teenager may be eligible for a Social Anxiety Disorder study at Riley Hospital for Children.

Indiana University School of Medicine is conducting a study at Riley Hospital for Children involving a new medication for the treatment of social anxiety in adolescents, ages 12 - 17. Eligible adolescents will receive a free evaluation, free office visits and free study medication.

This study will run through December, 2001.

For more information, please contact Sarah Harris, R.N., at (317) 274-8162.

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May 9, 2001

## Patient Advocates, Consumers In The Spotlight At Annual Symposium



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INDIANAPOLIS -- Practical information on issues related to mental health and addiction will be offered at the fourth annual Mental Health Symposium "A New Century for Mental Health: Exploring the Brain, Treating the Person" from 8 a.m. to 5 p.m., Friday, June 1, at Union Station.

The symposium, which is open to mental health professionals, policymakers, consumers and their family members, and people in recovery for alcohol and chemical abuse, is presented by the Indiana University Department of Psychiatry in conjunction with the annual meeting of the Mental Health Association in Indiana, Inc.

Kay Redfield Jamison, Ph.D., a researcher, consumer and patient advocate, is the keynote speaker. Dr. Jamison is professor of psychiatry at the Johns Hopkins University School of Medicine and author on several books on manic-depressive illness.

Lafayette resident Elaine Doss will address addiction issues from the standpoint of the patient and his or her family. Mrs. Doss lost her husband to a premature, addiction-related death and vowed to make her loss into something positive by working as an advocate for addictions issues. She is a member of the board of directors for the Indiana Addictions Issues Coalition.

Other topics addressed in the symposium are recent developments in child psychopharmacology, attention deficit disorder, alcoholism treatments and Alzheimer disease.

Fourteen workshops will be offered on topics ranging from mood disorders in children to the genetics of bipolar disorders.

For additional information or to register for the symposium by the May 25 deadline, contact the Mental Health Association of Indiana, Inc., at 317-638-3501 or 1-800-555-6424.

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May 7, 2001

## Child Safety Advocates Honored For Service, Leadership

INDIANAPOLIS -- Many of the 6,000 deaths and 120,000 unintentional injuries among children each year can be avoided. That's the thrust behind Indiana SAFE KIDS Coalition's recognition of child safety advocates throughout the state.

The recipients were honored May 7 at a special ceremony at the White River Gardens, Indianapolis. The recipients and their respective categories:

**Individual:** Bus Education for Elementary Students program, Elkhart

**Government:** Indiana Rep. William Crawford, Indianapolis

**Business:** Kenneth Allen and Associates, Goshen

**Law Enforcement:** Cpl. Tim Williams, Mishawaka Police Department

**SAFE KIDS:** Dubois County SAFE KIDS chapter, Jasper

**Community Agency:** Greater Indianapolis Branch of the NAACP

**Media:** Lauren Zeugner, The Paper Incorporated, Elkhart

**Medical:** Nena Ray, Think First program, Indianapolis

Several individuals and organizations also were recognized for their child-safety promotion programs, including Karen Bruner-Stroup, director of the Community Education Department, Riley Hospital for Children; Buckle Up Bug program, Indianapolis; Leatherman Supply, Goshen; and Rosette Partridge, the Indiana University School of Nursing.

"Prevention of unintentional injuries is something in which every adult in our state needs to participate," says Keisha Nickolson, project manager of the Indiana SAFE KIDS Coalition and Automotive Safety Program at the Indiana University School of Medicine. "Many individuals and organizations in Indiana go above and beyond the call of duty to further children's safety and that's why we recognize them."

Karen Freeman-Wilson, former Indiana Attorney General, was the featured speaker and assisted with the awards presentation.

The Indiana SAFE KIDS Coalition has 22 chapters, and is part of the National SAFE KIDS Campaign, the nation's only organization dedicated exclusively to prevent unintentional childhood injuries.

The IU School of Medicine Automotive Safety Program provides information, programming and other resources throughout the state to promote safe travel for all Hoosiers. It works with law enforcement agencies, medical organizations and emergency medicine groups, fire departments, educators and private citizens.

For more details about the Indiana SAFE KIDS Coalition or the Child Safety Advocate Awards recipients, contact Keisha Nickolson at (317) 278-3218.

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May 1, 2001

## Einhorn Elected To National Academy of Sciences

INDIANAPOLIS -- Larry H. Einhorn, M.D., distinguished professor at the Indiana University School of Medicine, has been elected to membership in the National Academy of Sciences.

His election was May 1 during the 138th annual meeting of the Academy. Election to membership in the NAS is considered one of the highest honors that can be accorded a United States scientist or engineer. The 72 new members and 15 foreign associates from 10 countries who were elected at this year's meeting brings the total number of active members to 1,874. Election to the NAS recognizes the member's distinguished and continuing achievements in original research.

A medical oncologist, Dr. Einhorn has received international recognition for his role in the development of a chemotherapy regimen for disseminated testis cancer, the most common cancer in young men. His research led to a marked increase in the cure rate for what had previously been a devastating and rapidly fatal disease.

Testis cancer is not Dr. Einhorn's only area of expertise. He also is an internationally recognized authority on other types of urologic cancer, lung cancer and certain other tumors.

Dr. Einhorn has been recognized with several prestigious awards as a result of his work as a clinician researcher including the Richard and Hinda Rosenthal Foundation Award for Cancer Research, presented in 1981 at the American Association of Cancer Research Meeting; the 1983 American Cancer Society Medal of Honor Winner; the 1990 Karnofsky Lectureship of the American Society of Clinical Oncology; and the 1992 Kettering Prize for Cancer Research, awarded by the General Motors Foundation.

He was named a distinguished professor at Indiana University in 1987. He joined the IU School of Medicine faculty in 1973. A native of Dayton, Ohio, Dr. Einhorn received a bachelor's degree from IU and a medical degree from the University of Iowa. He completed his internship and residency at IU School of Medicine and did hematology/oncology fellowships at IU School of Medicine and the M.D. Anderson Hospital and Tumor Institute in Houston, Texas.

The National Academy of Sciences is a private organization of scientists and engineers dedicated to the furtherance of science and its use for the general welfare. It was established in 1863 by a congressional act, signed by Abraham Lincoln, that calls on the Academy to act as an official adviser to the federal government, upon request, in any matter of science or technology.

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April 16, 2001

## IU Medical Students Make Spring House Calls

INDIANAPOLIS - The crew descended on the property like a flock of hungry seagulls at a fisherman's wharf, unloading yard tools and flowers. They introduced themselves to the homeowner, Mrs. Bellamy, who stood on her porch, beaming in the early-morning Saturday sun and surveying the activity that unfolds before her.



Nearly 100 IU School of Medicine students volunteered to help Indianapolis inner-city residents spruce up their homes and properties, April 14. Spring House Calls is one of many volunteer programs coordinated through the School's Office of Medical Service-Learning.

"This really is a nice thing you're doing for me and others," she said to one of her visitors, her voice muffled by the high-pitched whizzing of a weed trimmer and a pair of roaring lawnmowers.

It was all in a day's work for this crew, who were among nearly 100 Indiana University School of Medicine students participating in the annual Spring House Calls, April 14. The program teams students, with inner-city homeowners to help spruce up their properties.

The students, who fanned out to their assignments in the Haughville and Blackburn areas of the city's near-westside, this year served Mrs. Bellamy and 23 other homeowners. Home base was Christamore House, a multiservice organization and facility in Haughville. Each work crew had specific jobs, ranging from grass-cutting to installing smoke and fire detectors

The Spring House Calls program began in 1996, and since its inception, nearly 500 students have rolled up their sleeves and logged more than 4,500 hours in service. The students, most of who are in their second year of medical school at the Indiana University-Purdue University Indianapolis campus, plan, organize and execute the entire event.

"This program gives us a sense of what people face in their daily lives, the kind of things you wouldn't ordinarily see or know in a clinical visit," noted student Arpan Patel, who along with Marc Kohli, Smriti Banthia,



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Students prepare to tackle their assignments in the Haughville neighborhood.

Mark Fisch and Leon Kelly directed this year's program. Patel said experiences such as Spring House Calls prepare him and his fellow classmates to become more caring physicians.

That sentiment is echoed by Patricia Keener, M.D., clinical professor of pediatrics and assistant dean for the Office of Medical Service-Learning at the IU School of Medicine. "Student volunteers for Spring House Calls and other projects learn the value of community service and, as a result, are more likely to become advocates for health-care policies that ultimately improve health care delivery," she said.

This year's program was supported with donations from several local business and civic organizations, including: Keep Indianapolis Beautiful, Nations Rent, Health and Hospital Services-Marion County Health Department, Flanner and Buchanan Mortuaries and Crematory, Meridian Street Greenhouse and Crossroads Greenhouse.

"Most of the folks in this neighborhood, particularly the senior citizens, take a lot of pride in their homes, but because of their income or health they just aren't able to make the repairs and keep it in the shape they would like," said Patrice M. Abdullah, vice president of the Neighborhood Association of Haughville.

"What the students are doing is invaluable - they're helping give back that pride to my neighbors," Abdullah added.

For more information about Spring House Calls and other IU School of Medicine Office of Medical Service-Learning volunteer activities, visit its Web site at [www.medicine.iu.edu/~omsl/](http://www.medicine.iu.edu/~omsl/).

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April 5, 2001

## **Krannert Institute to move to Methodist campus in Adult Cardiovascular Consolidation**

Clarian Health, IU, Riley and Methodist - and the IU School of Medicine are recognized trailblazers in cardiovascular patient care, research and treatment. Their outstanding programs are now about to come together to create the new Clarian Cardiovascular Center.

On June 18, 2001, all adult cardiovascular services and research facilities, including the world-renowned Krannert Institute of Cardiology, will consolidate at a newly renovated facility on the Methodist campus.

"We talked about it at length and the Methodist campus clearly had the space, with remodeling, to absorb us. We did not have the space on the IU campus to absorb the Methodist groups," says Douglas Zipes, MD, distinguished professor and director of the Krannert Institute of Cardiology, who currently serves as president-elect of the American College of Cardiology. "The expense would have been far greater had we consolidated cardiovascular services on the IU campus," he says.

The Clarian CV Center includes pediatric programs, but those services will continue to be provided at Riley Hospital for Children. In addition, a cardiovascular presence for consultative and outpatient care will be maintained at IU Hospital, including a catheter lab for emergency care.

### **Exceptional Programs**

As one of the largest heart centers in the Midwest, the Clarian Cardiovascular Center will provide patients with a combination of the clinical expertise and practice of the Methodist Heart Institute along with the cardiovascular patient care, research and teaching excellence of the Krannert Institute of Cardiology, the Indiana University School of Medicine, IU Hospital and Riley Hospital for Children. The history of each institution is impressive.

Just a few of their highlights include:

- Krannert Institute of Cardiology is known throughout the world as the leader in heart research and pioneering techniques in echocardiology and electrophysiology.
- Indiana University is a nationwide leader in minimally invasive cardiac surgery and state-of-the-art heart valve surgery.
- The Methodist Heart Institute was the site of the first heart transplant in Indiana and the world's first at a private institution.
- Riley Hospital for Children was one of the first centers in the country to perform heart transplantation in a newborn infant and is among the top five pediatric hospitals in the country for the number of cardiovascular diagnostic and surgical procedures performed annually.



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The Clarian Cardiovascular Center will be the only heart center in the region with complete cardiothoracic services, including diagnostic testing, interventional treatment and cardiac for infants and adults. More than 70 percent of the heart transplants in Indiana are performed at Clarian.

"Our consolidated cardiovascular program provides one-stop shopping for patients with a multitude of different cardiovascular problems, says Dr. Zipes. "For example, persons with both cardiac and peripheral vascular or surgical problems can have all those conditions attended to in either the same building or in one close by, within walking distance."

The combined, whole program is even better than its already-outstanding individual parts. "The combination of research, teaching and clinical skills together in one location greatly benefits our patients," says William Storer, MD, co-medical director of the cardiovascular program. "By consolidating into one program at one location, there is more money available to put into the programs, such as a new heart failure program."

"By combining all of the CV resources at one center, Clarian can invest heavily at one site and make certain it is the premier site for all adult cardiovascular services. That means premier bricks and mortar - clinical, administration, and research space, without having to build two separate sites at that level - which would be virtually impossible," says Dr. Zipes.

Patients are the ultimate beneficiaries of all the improvements.

"Our patients are at the center of this design process," notes Ann Hendrich, senior vice president of nursing and patient care services for Methodist Hospital and the Clarian Cardiovascular Center. "Nursing has partnered with the physicians and ancillary areas to create a truly superior cardiovascular program for the Indianapolis community and the state of Indiana."

### **Unique Combination**

Drs. Zipes and Storer both hope to see increased funding for research studies at the consolidated center. "By combining forces, we become much more formidable in the competition to participate in multi-center trials," says Dr. Zipes. "When we pool our numbers of patients with pacemakers, coronary stents, etc., we then become a very impressive partner for any industry that wants to participate in clinical studies," he explains.

The unique combination of research, education, and the clinical leadership of Methodist, IU, and Riley hospitals and the IU School of Medicine make it possible to more quickly implement new strategies for preventing and treating cardiovascular disease. New procedures will move from lab bench to bedside more quickly and more efficiently than at any other major Indiana hospital.



And that, says Dr. Storer, distinguishes Clarian's heart program from both Community's and St. Vincent's heart hospitals.

"We are creating a heart hospital on the Methodist campus that combines all of the available clinical skills, research and education, to form a facility without equal in Indiana," says Dr. Storer. "We offer the combination of research and education along with our clinical skills. Cutting edge cardiology and cardiovascular surgery will be a given at our center," he points out.

Cardiologists' offices will also be located at the center. In addition, the facility includes more catheter lab capability, more operating room suites, and more cardiovascular patient beds with the opening of a nursing floor and a cardiac interventional unit located in the old Methodist Hospital Cardiac Care Unit.

"We will also convert a large majority of beds to private rooms to meet patient expectations," says Barb Peters, administrative director of the cardiovascular program. "Fifty percent of the beds in the renovated facility will be private."

Even so, Clarian is a multi-building campus and it will be necessary for caregivers and others to move between Methodist, IU and Riley.

"Fundamental to all of this is the People Mover," says Dr. Zipes. "It will enhance our strengths and our cohesiveness by facilitating transportation of house staff, fellows and the senior staff. They can hop on this train and be transported from one campus to other. That is essential as we have grand rounds and division meetings and other education processes. When it's 30 degrees outside and snowing, it's a lot of trouble to get in your car and drive between campuses. But with the People Mover, they can just ride over in five minutes," says Dr. Zipes.

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April 5, 2001

## Attention Deficit-Hyperactivity Disorder Focus Of Child Psychiatry Conference

INDIANAPOLIS -- "Attention Deficit-Hyperactivity Disorder: Practice and Research Updates in Assessment and Treatment" is the title of the 24th Annual Richter Conference in Child Psychiatry, hosted by the Indiana University School of Medicine.

The one-day conference will be Friday, April 27, at Larue Carter Hospital, 2601 Cold Spring Road. The deadline for registering is April 19 and can be done by calling the IU School of Medicine Division of Continuing Medical Education at 317-274-8353.

The program will address ADHD research and clinical perspectives about major issues facing physicians, psychologists, social workers, marriage and family therapists, mental health counselors, educators and family members. Research findings will be blended with clinical experience to provide an overview of the assessment and treatment of youngsters with ADHD and related symptoms.

Guest lecturer Peter S. Jensen, M.D., is the 2001 Arthur B. Richter Visiting Professor. Dr. Jensen is director of the Center for the Advancement of Children's Mental Health and the Ruane Professor of Science in Child Psychiatry at the Columbia University College of Physicians and Surgeons.

Other lecturers at the conference are from the IU School of Medicine, Purdue University, Central Indiana Chapters of CHADD (Children and Adolescents with ADHD) and ADDS (Adults with ADD Support Group), and Adaptive Services at Indiana University-Purdue University Indianapolis.

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May 5, 2001

## Alzheimer Disease Patients Sought For Study

INDIANAPOLIS -- The Indiana University School of Medicine Department of Neurology is seeking individuals with Alzheimer's disease for participation in a study.

The study is investigating a surgical device to determine if it will stop or slow the progression of Alzheimer disease. Participants must be between 62 and 85 years of age, in the early to middle stages of Alzheimer disease and in otherwise good health.

Reimbursement for reasonable travel expenses for caregivers will be provided.

For more information, see <http://www.csfluids.com/patient.html> or call 1-888-4-MY-MIND.

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April 4, 2001

## Face Guard Protects 'Boys And Girls of Summer'

INDIANAPOLIS- From major league stadiums to small-town sandlots, America's favorite pastime is a grand slam memory for many; but for some children those memories are tainted by preventable injuries, according to research conducted at the Indiana University School of Medicine with Prevent Blindness Indiana.

There are 5 million children who play in youth softball and baseball leagues every summer. Player reports indicate that 5 percent of those youth are hit in the face with a ball or bat each year.

"Baseball and softball are the primary causes of severe sports-related eye injury in Indiana and in most other states," said Ronald Danis, M.D., professor of ophthalmology at Indiana University School of Medicine and past president of the United States Eye Injury Registry.

Dr. Danis is the principal investigator for a study, whose findings on protected and unprotected youth league baseball team eye injuries was reported in the September issue of the journal Injury Prevention.

Dr. Danis sees these injuries as a serious and, in many cases, a preventable problem with an easy and inexpensive answer. For about \$10 players can be equipped with a face guard on their batting helmets. It is estimated a face guard may prevent between 25 percent and 47 percent of potential facial injuries when a player is struck by a bat or ball.

During the summer of 1997, Dr. Danis and his colleagues surveyed 2,000 league players in Indiana between the ages of 5 and 14 years, their parents and nearly 300 coaches. The purpose of the survey was to determine effectiveness and acceptability of face guards in youth league play.

For the study, one group of youth league players in Indiana was supplied with several helmets and face guards; the second group used face guards on an individual preferential basis. According to the survey, 40 of the players on the teams not wearing face guards and 50 players on the teams outfitted with face guards reported at least one facial impact during the course of the season.

Acceptance of the face guards varied, primarily by team, but nearly four out of five players determined at the end of the season that the face guard was at least "okay" to wear. The majority of the parents favored the use of face guards and the number of coaches saying they thought the use of face guards should be mandatory increased significantly by the end of the season.

In 1995, the U.S. Consumer Product Safety Commission reported 162,100 hospital emergency room visits for baseball-related injuries to children between the ages of 5 and 14 years. Of those, 37 percent suffered facial injuries and 6,139 emergency room



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visits were due to baseball-related eye injuries.

Of the 9,000 cases documented in the U.S. Eye Injury Registry, 38 percent of all sports-related eye injuries are baseball or softball injuries and 40 percent of those injuries required surgery.

“Baseball injury to the eyes are of significant concern and are the injuries most likely to produce disability,” Dr. Danis said. “This is a public health issue that needs to be taken seriously.”

The study was supported by a grant from the Midwest Eye Foundation, Inc., Prevent Blindness Indiana, Inc., both of Indianapolis, and Research to Prevent Blindness, New York.

###

### **Quick Facts On Sports-Related Eye Injuries**

- Five percent of serious eye injuries nationwide are baseball related (from the United States Eye Injury Registry).
- The most common cause of sports-related eye injuries is baseball related.
- For about the cost of a fast-food meal for two, a face guard can be purchased to prevent a significant proportion of baseball-related injuries.
- Batters are the single player position most at risk.
- 5 million youths play baseball each year in organized leagues.
- In 1995, there were 162,100 hospital emergency room visits for baseball-related injuries to children ages 5 to 14 years, according to the U.S. Consumer Product Safety Commission. Thirty-seven percent of these ER visits were due to facial injuries.
- Of the reported injuries in 1995, 6,139 emergency room visits were due to baseball-related eye injuries.
- Of the 9,000 cases documented in the U.S. Eye Injury Registry, 38 percent of all sports-related eye injuries are baseball or softball injuries, 40 percent of which required surgery.
- The face guard may prevent between 25 percent and 47 percent of facial impacts from a bat or ball.

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March 29, 2001

## Zipes Now Leads American College of Cardiology

INDIANAPOLIS -- Douglas P. Zipes, M.D., director of the Krannert Institute of Cardiology at the Indiana University School of Medicine, was inaugurated March 21 as president of the American College of Cardiology at its annual meeting in Orlando, Fla.



Dr. Zipes, a distinguished professor at Indiana University and professor of medicine and of pharmacology and toxicology, is the director of the university's Cardiology Division. He will lead the 25,000-member organization comprised of cardiologists from all over the world for one year. The ACC is a non-profit medical society and teaching institution dedicated to fostering the best in cardiovascular care and disease prevention through professional education, research and leadership. The ACC is active in the development of standards and guidelines and the formulation of health care policy.

An active member of the ACC and other professional organizations, he has served in several leadership roles and received the ACC's Distinguished Scientist Award in 1996.

His goals while president of the ACC are typical of Dr. Zipes' enthusiasm for the field of cardiology and his interest in patient care and education.

"During this year, I plan to lead the ACC into greater advocacy efforts on behalf of our members and patients, broaden our reach internationally and help create a Web site, in partnership with the American Heart Association, that will be the 'gold standard' for accurate and timely cardiology information for doctors and patients," said Dr. Zipes.

A graduate of the Harvard Medical School, Dr. Zipes completed his postgraduate training at Duke University Medical Center in 1968. He joined the IU faculty in 1970 and was named a distinguished professor in 1994 and director of the Cardiology Division and Krannert Institute the following year.

Dr. Zipes is a leader in the field of electrophysiology and the founding editor and editor-in-chief of the *Journal of Cardiovascular Electrophysiology and Cardiology in Review*. He is the author or co-editor of 13 books and more than 600 articles.

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(Editor's Note: For 300-dpi JPG image, click photo above. Also available upon request.)

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March 28, 2001

## 'Sound Medicine' Radio Program Premieres in April

INDIANAPOLIS - Physicians from the Indiana University School of Medicine will soon deliver healthy doses of medical information to listeners through a new WFYI Public Radio series that can be heard locally at 90.1 FM.

*Sound Medicine* debuts 12 p.m. (local time), Saturday, April 7, tackling the latest developments in health care and research. The program also features a call-in segment (317-274-IU4U) whereby listeners can discuss medical issues with physicians and other professionals from IU's health schools based at the Indiana University-Purdue University Indianapolis and at other campuses around the state.

The hour-long weekly show will feature interviews with people on the frontlines of medicine. Four School of Medicine faculty will join program host Barbara Lewis on a rotating basis. Faculty members are Ora H. Pescovitz, M.D., executive associate dean for research affairs; David Crabb, M.D., chairman of the Department of Medicine; Michael Koch, M.D., chairman of the Department of Urology; and Kathy Miller, M.D., a breast cancer specialist.

"The intent of this program is to educate and encourage listeners to make sound health and medical decisions and to provide a forum for issues affecting their communities," says Dr. Pescovitz.

Lewis is a veteran broadcast journalist in television and radio. In addition to freelance anchoring for WTHR, media training and business video making, she also reports on business news for Inside *INDiana Business with Gerry Dick*, which airs on WFYI public television and WRTV-6. She is a former anchor/reporter for WRTV-6, an Indianapolis ABC affiliate.

A Web site also will be launched to make the program fully interactive. It will provide a way for listeners to ask questions for the program through a "real time" chat room will enable users to send questions to interact with IU physicians on a monthly basis. Each segment can be heard weekly at <http://soundmedicine.iu.edu> or [www.wfyi.org](http://www.wfyi.org).

"The latest developments in medical research and the most relevant health topics are now just a click away on your radio preset or computer mouse pad," says Lloyd Wright, WFYI's president and general manager. "Our goal is to eventually offer *Sound Medicine* for broadcast nationwide on public radio stations, providing millions of Americans with medical news from a trusted source."

*Sound Medicine* programs will be permanently archived on the IU School of Medicine's web site.

The series is made possible through grants from Indiana University Medical Group, Wishard Health Services and Clarian Health Partners.



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March 28, 2001

## IU Joins Fight Against Lymphoma With Vaccine Study

INDIANAPOLIS -- Indiana University School of Medicine will participate in a clinical trial to investigate the effectiveness of a vaccine in the treatment of low-grade non-Hodgkin's lymphoma.

The trial utilizes vaccine made from antibodies produced by the tumors of each patient.

"The tumor-specific vaccine is made from proteins produced within the tumor of each patient with the intent of making the treatment more effective," said Kristen N. Ganjoo, M.D., assistant professor of medicine and principal investigator of the trial at the IU Cancer Center. "When vaccinated, the body then recognizes the modified protein, mounts an immune response and attacks all the malignant tumors producing that protein."

To participate in the Phase III trial, patients must have been diagnosed with low-grade non-Hodgkin's lymphoma within the past two years and not have undergone prior therapy to treat the disease.

All patients enrolled will receive standardized chemotherapy for their form of cancer. Patients responding to that treatment will continue in the trial, with two-thirds of the patients receiving a series of injections of the vaccine, while a control group will not receive the vaccine.

All patients will receive immunotherapy designed to enhance the immune system. This phase of the trial is to determine if this vaccine is more effective than standard therapy alone in the treatment of low-grade lymphomas.

In an earlier clinical trial utilizing a similar type of vaccine, nearly 50 percent of patients mounted an immune response to the cancer cells after receiving the vaccine and did not relapse for as long as seven years. Patients will not be considered cancer-free until they have gone 10 years without a recurrence of the disease.

The trial, which is sponsored by Genitope Corp., is being conducted at 23 medical centers across North America and will include at least 480 patients.

For more information on the trial at IU Cancer Center, call 317-274-3545.

For additional information on clinical trials available at IU School of Medicine, see <http://medicine.iupui.edu/ctp/>.

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March 27, 2001

## Computer Program Helps Women Kick Nicotine Habit

INDIANAPOLIS - Despite massive mandatory warning labels on cigarette packages and massive anti-smoking advertising campaigns, American women are lighting up in greater numbers and now account for 39 percent of all smoking-related deaths in the United States, the U.S. Surgeon General warns in a March 27 report.

Anna McDaniel, D.N.S., R.N, associate professor at the Indiana University School of Nursing at Indiana University Purdue University-Indianapolis and an affiliated scientist at the Regenstrief Institute for Health Care, has developed and tested *A New Beginning* an interactive smoking-cessation computer program targeting low-income women. It appears to be getting its message across; more than half the women (52 percent) who were exposed to the program reported that they cut down on smoking within one week and 15 percent reported that they tried to quit smoking in that first week.



A screen from *A New Beginning*, an interactive smoking cessation program targeted to low-income women. The program was designed Anna McDaniel, DNS, who is seen on the screen.

The interactive computer program personalizes the process by allowing an individual to respond according to her level of interest in kicking the nicotine habit. The computer program fills the gap in a setting where busy doctors and nurses often are unable to spend much time with their patients discussing the specific reasons why the individual smokes and how best to motivate her to stop smoking.

Dr. McDaniel developed and tested "A New Beginning" as part of her two-year post-doctoral fellowship in informatics at the Regenstrief Institute. Individuals were asked to respond to visual prompts by touching the screen. Dr. McDaniel found that the 100 low-income women in the study enjoyed the simple computer interaction. What they liked the best, she reported, was that the computer program was able to provide them with information specifically tailored to the reasons they smoked. Factors motivating these women to smoke included stress, desire to

stay thin and frequently finding themselves in situations conducive to smoking. User's comments and actions -- thinking about quitting or actually quitting smoking -- showed that interactive smoking cessation computer technology specifically targeted to women with little if any previous computer exposure is feasible in a primary care setting.

*A New Beginning* helped each woman to understand why she smoked in order to



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assist her in determining what might help her stop smoking. For example, touching the screen to select smoking serves as a stress reliever, produced a screen on methods of stress reduction. Touching the screen to select social reasons for smoking made another screen appear discussing the pros and cons of that rationale.

Video testimonials from former female smokers (perceived as peers by the study subjects) incorporated into the computer program inspired confidence in participant's ability to stop smoking, the study subjects reported. Several participants said they appreciated the "nonpreachiness" of these peers and the informative tenor of the program. Several said that past health care providers had not discussed smoking with them or had done so in a manner that was perceived as condescending. "Not a scare tactic in sight," said one of the smokers about the computer material.

Data collected at the end of the study showed that 52 percent of the women reduced the number of cigarettes they smoked daily, 40 percent had discussed quitting with family; 24 percent read additional material about quitting smoking; 15 percent talked to a physician about quitting and 6 percent inquired about a smoking cessation program - all important "first steps" in quitting smoking. .

This research was conducted in affiliation with the Mary Margaret Walther Program for Cancer Care Research. <http://www.walther.org>

In addition to her responsibilities at the School of Nursing, Dr. McDaniel directs the Health Informatics Program at the IU School of Informatics. She also is affiliated with the [National Center of Excellence in Women's Health at the Indiana University School of Medicine](#), where she is director of the Outcomes/Evaluation Component.

Dr. McDaniel presented the results of her interactive computer technology for smoking cessation in low-income women study March 5 in Cleveland at the Midwest Nursing Research Society and March 24 in Seattle at the Society for Research on Nicotine and Tobacco.

For more information about the U.S. Surgeon General Report, go to <http://www.cdc.gov/tobacco>.

For more information on the The National Women's Health Information Center, go to <http://www.4woman.gov>.

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March 23, 2001

## National Resident Matching Program 2001 IU Med Students Prepare For Residencies

INDIANAPOLIS - And when the last envelope was opened, the mystery and wait were over: all 260 graduating Indiana University School of Medicine students accepted residency positions across the country.



### **MATCH DAY 2001.**

Jeremy Roscoe celebrates after learning he will do a pediatrics residency at the Indiana University School of Medicine. He was among 260 students matched at the March 22 event. Roscoe, whose envelope was selected last, also took home a bonus of

\$259, thanks to his fellow students. It has become the practice for each student to leave a dollar bill in a bed pan after receiving his or her residency assignment.

Photo by Rocky Rothrock, [Dept. of Medical Illustration](#)



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IU School of Medicine students ranked well in National Match Day, March 22, a program that coordinates thousands of medical students' and U.S. hospital programs' preferences. During their senior year, students apply and interview for residency positions across the country; their selection is administered through the National Resident Matching Program (NRMP) of Association of American Medical Colleges.

The program, held each year the third week of March, is the primary route by which most students enter their residency training under the tutelage of well-seasoned physicians.

"Almost two-thirds of the IU School of Medicine Class of 2001 received their first choice of programs," notes Dennis Deal, director of Academic Records-Medical Student Academic Affairs. "As is always the case, a few students did not initially match with their selected programs, but within hours after learning this, all of those students secured first-year residency positions."

Students in Class of 2001 accepted positions in 31 states, including Indiana.

Among the IU School of Medicine Match Day 2000 highlights:

- 49 percent of the students will pursue their first year of residency within Indiana.
- 75 students will be residents at IU Hospital, Riley Hospital for Children and other Clarian Health facilities.
- 48.6 percent of IUSM graduates will enter primary-care residency programs, which includes internal medicine, family medicine, pediatrics, obstetrics/gynecology, primary and combined internal medicine-pediatrics.
- 62.8 percent of IUSM applicants were matched to their first choice,
- 12.3 percent matched to their second, and 7.1 percent got their third choice.

Nationally, the NRMP reports that 93.7 percent, or 13,542, received a first-year residency training position. Of all the matches to first- and second-year programs, 85 percent were one of the students' first three choices of U.S. medical schools, down 1 percent compared to last year.

Additional information about Match Day 2001 and the National Resident Matching Program can be found at <http://www.nrmp.org>.

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March 16, 2001

## **Mini Medical School Bridging the Gap Of Alternative and Conventional Medicine**

INDIANAPOLIS - Aspirin or acupuncture? Psychological counseling or St. John's Wort? Meditation or medication? With any such choice, perhaps there's room for both.

Increasingly, Americans are turning to alternative medicine to maintain health and treat their maladies. Such an approach has forged what has become known as complementary and alternative medicine.

"One of medicine's fundamental tenets is to be responsive to society. Unfortunately, our response has been inadequate on many levels," said internist Palmer MacKie, M. D., clinical assistant professor of medicine at the Indiana University School of Medicine. "When conventional medicine doesn't meet the demands of patients, they look elsewhere."

Apparently, patients not only seek but also find. According to an article appearing in a November 1999 issue of the Journal of the American Medical Association, the total number of visits to alternative medicine practitioners had increased 50 percent - and now exceeds visits to all primary-care physicians in the United States.

Dr. MacKie, medical director of the Integrative Pain Center at Wishard Hospital, took participants attending the March 13 IU Mini Medical School on an alternate route to the emerging field of CAM. He said consumers largely are driven to alternative medicine because it offers them more personal choice and control over their health and well-being.

CAM defies a single definition, Dr. MacKie noted, adding that a wide variety of alternative treatments and therapies often can be used in tandem with conventional medicine. "Ideally, CAM is entirely patient-centered, clinically responsible and financially feasible."

It's estimated that 42 percent of Americans use some form of alternative medicine, many of which have been around for thousands of years. Among these are meditation and yoga (mind-body health enhancements), bioelectromagnetism (electrical currents used to mend bones), massage, osteopathic and chiropractic manipulation, aromatherapy, herbal medicine, cross-cultural systems (Native American and Chinese medicine) diet and nutrition and art therapy.

"People considering alternative therapies should first learn as much as they can and decide if there is scientific evidence that a particular approach will help the condition they have," said Dr. MacKie, a member of the American Academy of Medical Acupuncture. Would-be CAM users also should consider consulting with physicians who either use alternative therapies or can recommend licensed and qualified practitioners.



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While the demand and use of CAM has been on the upswing, there isn't much scientific data to support its efficacy and safety, Dr. MacKie said. He said that CAM principles and practices need to be incorporated into medical education. Such principles are part of the curriculum for students at the IU School of Medicine and its primary-care residents.

"We can serve patients better by bridging the gap between conventional and not-so-conventional medicine," said Dr. MacKie.

The IU Medical Group and Indianapolis radio station WIBC sponsor Mini Medical School, which is offered by the Indiana University School of Medicine Faculty Community Relations Committee through the IUPUI Division of Continuing Studies.

### **Related CAM Web Sites**

#### **National Center for Complementary and Alternative Medicine**

<http://www.nccam.nih.gov/>

#### **American Academy of Medical Acupuncture**

<http://www.medicalacupuncture.org/>

#### **National Institutes of Health**

<http://www.nih.gov/>

#### **Health World**

<http://www.healthy.net/asp/templates/center.asp?centerid=1>

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March 15, 2001

## Complementary and Alternative Medicine: A Second Opinion

INDIANAPOLIS - The number of Americans seeking alternative forms of medicine has mushroomed dramatically in recent years, and it's estimated that patients plunk down more than \$30 billion annually for treatments ranging from herbs to acupuncture.

More to the point, more physicians and consumers are exploring complementary and alternative medicine (CAM), an approach that incorporates non-traditional into traditional therapies and treatments. So important is this trend that the Indiana University School of Medicine's Division of Internal Medicine is offering its first symposium on CAM, Saturday, March 24, at the University Place Conference Center and Hotel on the Indiana University-Purdue University Indianapolis campus.

Larry Dossey, M.D., executive editor of *Alternative Therapies in Health and Medicine* and author of several books on this emerging field of medicine, is the conference's keynote speaker and will speak about spirituality and health. Other presentations from IU School of Medicine physicians and international CAM experts will focus on the philosophies, diagnostic methods and treatments used by health practitioners in the Eastern and Native American cultures.

"There is intense consumer demand for complementary and alternative medicine, but there is insufficient data to support its efficacy, not to mention its safety," says symposium director Palmer MacKie, M.D., medical director of IU School of Medicine's Integrative Pain Center at Wishard Hospital. "With this growing demand there also is a need for responsible medical education about CAM principles and practices - and education that balances traditional and non-traditional medicine."

For more information about the symposium, call 317-274-8353, or toll free at 800-6222-4989 and request the Division of Continuing Medical Education.

The CAM symposium is supported in part by a values grant from Clarian Health Partners.

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March 13, 2001

## IU School of Medicine Seeks Patients For Osteoarthritis Study

INDIANAPOLIS -- The Indiana University School of Medicine Arthritis Research Center is seeking participants for a study evaluating the safety and effectiveness of over-the-counter nutritional supplements in the treatment of knee osteoarthritis, also known as degenerative arthritis.

To qualify for the study, participants must be at least 40 years of age and have had knee pain for at least six months. Participants must be able to walk and maintain normal activities without assistance.

Those enrolled in the study will be required to make six outpatient visits at the IU Medical Center in a six-month period. Study-related exams, laboratory tests and a knee X-ray will be performed free of charge. Participants will be compensated for their time.

For additional information, please call 317-274-7798.

(For additional information on IU School of Medicine clinical trials, see <http://clinicaltrials.iupui.edu/>)

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March 9, 2001

## **Mini Medical School Breathing In Zero Gravity**

INDIANAPOLIS -- Like the multiple branches of a large, sprawling tree, the arteries, capillaries and bronchioles in the lungs weave a beautiful and useful pattern. But, unlike a tree, the human system of branches is much more complicated and interdependent.

Halt blood flow to or from the lungs and the system can collapse. The same goes for oxygen.

"The body uses red blood cells to carry carbon dioxide to the capillaries in the lungs where it is exchanged for oxygen," explained Wiltz Wagner, Ph.D., during the March 6 session of Indiana University School of Medicine Mini Medical School. "Oxygenating the body through the cardiovascular system is the main function of the lungs."

Dr. Wagner, who is the V.K. Stoelting Professor of Anesthesia and a professor of physiology, biophysics and pediatrics at the IU School of Medicine, studies the mechanisms that control the human lungs.

The workhorse of the lung is air sacs called alveoli and more than 300 million of them are involved with the process of introducing oxygen into the body.

"The lung has to be stretchy, like a rubber glove," explained Dr. Wagner. "When you take a breath you stretch the rubber, and when you exhale the elastic tissue contracts. Inhaling creates negative pressure."

Diseases, such as black lung, or trauma, such as a puncture wound, reduce the elasticity so the lung cannot take in enough oxygen to support the body.

There is much that researchers understand about the physiology of the lung, but there is much that remains a mystery.

Dr. Wagner and a team of researchers, including Robb W. Glenny, MD, a physiology professor at the University of Washington, have dispelled the principle that blood flow in the lung is governed by only gravity. Instead, the researchers have shown pulmonary circulation is not solely dependent on gravity. Dr. Wagner said the tree-like structure of the lung's arterial circulatory system is another major determinant of how blood flows in the lungs.

Their initial findings were the result of a cooperative experiment with NASA in a jet appropriately named the "Vomit Comet." The plane, a KC-135, gives its passengers the experience of weightlessness at zero gravity with intermittent plunges toward Earth that create two times the force of gravity. Severe nausea is frequently the result. During several of these flights on which Dr. Wagner was a passenger, the



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researchers studied the effect of weightlessness on the lung's circulation in a pig.

Dr. Wagner and his team believe the study shows that gravity may account for only a minor portion of the blood flow in the lung and that the tree-like structure of the lung's circulatory system accounts for the remainder. This discordant finding remains a focus of Dr. Wagner's research.

The IU Medical Group and Indianapolis radio station WIBC sponsor Mini Medical School, which is offered by the Indiana University School of Medicine Faculty Community Relations Committee through the IUPUI Division of Continuing Studies.

For additional information see:

[http://www.medicine.indiana.edu/iu\\_medicine/99\\_summer/pigsfly99.htm](http://www.medicine.indiana.edu/iu_medicine/99_summer/pigsfly99.htm)

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March 8, 2001

## Fife Named Kampen Professor of Women's Health

INDIANAPOLIS -- Rose S. Fife, M.D., has been named the first Barbara F. Kampen Professor of Women's Health by the Trustees of Indiana University. Dr. Fife is the director of the National Center of Excellence in Women's Health at the Indiana University School of Medicine.

Dr. Fife received her medical degree from Johns Hopkins University School of Medicine. She completed an internship and residency in internal medicine at Johns Hopkins and a fellowship in rheumatology at the University of Washington School of Medicine, Seattle.

Dr. Fife, who is an assistant dean for research and professor of medicine, biochemistry and molecular biology, joined the IU School of Medicine faculty in 1981.

The Barbara F. Kampen Professorship was established in 2000 by the Kampen Family Foundation to promote research and sustain the collaboration and commitment to excellence in the study of women's health issues.

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March 8, 2001

## Madura Named Battersby Professor Of Surgery

INDIANAPOLIS -- James A. Madura, M.D., has been named the J. Stanley Battersby Professor of Surgery by the Trustees of Indiana University.

Dr. Madura received his medical degree from Western Reserve University and completed an internship and residency at The Ohio State University Hospital. He served as chief resident from 1970-71. He completed a fellowship as the NIH Academic Trainee in Surgery and was a research fellow at Duke University Division of Immunology. He joined the IU School of Medicine faculty in 1971.

The J. Stanley Battersby Professorship in Surgery was established in 1986 by his friends, colleagues and former residents in recognition of his 40 years of service to the IUSM Department of Surgery. Dr. Battersby, who is the Willis D. Gatch Professor Emeritus of Surgery, became the first full-time member of the IU School of Medicine Department of Surgery in 1943.

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March 5, 2001

## Medical Honorary Society Welcomes New Members

INDIANAPOLIS - Forty-four Indiana University School of Medicine students will be inducted into the Indiana Chapter of Alpha Omega Alpha, the nation's only medical honorary society.

This year's honorees join more than 1,500 members of the Indiana chapter, an organization that recognizes excellence in medical education and the profession. The induction ceremony is March 27 at The Marten House and Conference Center in Indianapolis. Richard B. Gunderman, M.D., Ph.D., director of pediatric radiology at IU School of Medicine, is the featured speaker. Dr. Gunderman also teaches philosophy, philanthropy and medical humanities at Indiana University-Purdue University Indianapolis.

Students inducted from the Class of 2001: Anthony James Bashall, Dan Boskovich, Amy K. Brown, Lori Ann Cashbaugh, Jennifer N. Choi, Victor E. Collier, William E. Cooke, Kristen Edmonson, Kevin S. Emerick, Tyler E. Emley, Susan M. Fugate, Alison R. Gardner, Kristoph M. Giricz, Dona L. Gray, Anna L. Grogg, Vivek V. Gurudutt, Holly A. Heinz, Stanley R. Hubert, Corey B. Kendall, Chris A. Klenck, Brendan A. Kluszynski, Stephanie K. Kraft, Priya D. Kulkarni, Edward S. Kwak, Brandy R. Matthews, Polly A. Moore, Alexandra Moretti Morrison, Christy L. Nebesio, John P. Pierson, Melissa Peck Piliang, Maryam Rezvani, Amy E. Vehec and Lorraine E. Weaver.

Class of 2002 inductees: Chris Bales, Ryan P. Beall, Nicholas C. Fraley, Ryan C. Camp, Lawrence C. Kilinski Jr., Gene H. Kim, Aaron D. Leis, Deborah A. Ronco, Bryan S. Smith, Tamera L. Vandegriff and Christopher Wedding.

Honorary inductees (IU School of Medicine alumni and faculty physicians) are radiologist John A. Knotte, M.D., surgeon Dale E. Rouch, M.D., pediatrician Howard Eigen, M.D., internist Ahdy Wadie Helmy, M.D., internists Brian C. Bigelow, M.D., and Charles J. Kahi, and surgeon Vincent A. Scavo Jr., M.D.

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March 5, 2001

## Medical Student Showcase Talents, Help Homeless

INDIANAPOLIS - They're not performing cardiac surgery, yet the talent and effort Indiana University School of Medicine students put into helping Indianapolis' homeless and needy comes straight from their hearts.

The curtain will rise on the 10th annual Evening of the Arts at 7:30 p.m., Friday, March 23, at the University Place Conference Center auditorium on the Indiana University-Purdue University Indianapolis campus. The program features students displaying their vocal, instrumental and dance talents. IU School of Medicine faculty, residents and staff also perform.

Proceeds from the event will benefit Wheeler Mission, Horizon House Day Center, Salvation Army, Genessaret Clinic and St. Thomas Clinic. IU medical students often volunteer to assist with patient care as part of the IU School of Medicine's Health and Homelessness Project. More than \$9,000 was raised from last year's event.

"Evening of the Arts is a wonderful opportunity for everyone to enjoy a great performance and at the same time help health-related charities in Indianapolis," says Ron Magliola, a third-year medical student and program director.

Tickets for Evening of the Arts are \$8 each and may be purchased at the door.

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March 1, 2001

## Sports Medicine: Thrill of Victory, Agony Of The Feet

INDIANAPOLIS - From dusty, sandlot baseball fields to the artificial turf-carpeted cathedrals of big-time college and professional sports, the common threat stalking participants is injury. That ever-looming possibility has led to an increased need for sports medicine specialists.

"Sports medicine in and of itself is not a specialty," said Douglas B. McKeag, M.D., M. S., chairman of the Department of Family Medicine at the Indiana University School of Medicine. "It is medicine in motion because every system in the body is affected by the motion of an athlete, whether it's running a football downfield or swinging a golf club."

Dr. McKeag gave participants at the Feb. 27 session of IU School of Medicine's Spring Mini Medical School a sideline view of the growing field of sports medicine and the health issues faced by today's athletes. And while many organized contact sports teams-professional and amateur-have made great strides in recent years to ensure the safety of players, some haven't left the locker room when it comes to preventing events such as head injuries.

"The problem with concussions is that there is no way to accurately grade the depth of damage," said Dr. McKeag, director of the IU Center for Sports Medicine at the National Institutes for Fitness and Sport. "The role of the team physician is to make sure a player is fully functioning and capable of protecting himself before returning to the game."

Current guidelines focus more on using consciousness as a means of determining an athlete's condition. But research conducted by Dr. McKeag shows that multiple minor incidents of head injuries can be more damaging. He said that mild traumatic brain injury can be diagnosed through a series of simple tests and is a better way to measure long-term damage.

"Multiple incidents of mild traumatic brain injury are more damaging than loss of consciousness," said Dr. McKeag, whose clients range from professionals to high-school athletes. "This is of particular concern for youngsters in contact sports because what you have to remember is that the central nervous system does not fully mature until a person is in their third decade of life."

With many sports injuries, athletes, coaches and even some team physicians zealously seek "quick fix" solutions to get players back onto the field as soon as possible, Dr. McKeag said. For example, a tear to the knee's anterior cruciate ligament, which stabilizes the knee as it flexes and extends, is a common injury that often treated immediately with surgery.

Dr. McKeag, who served on the National Collegiate Athletic Association to examine competitive safeguards and other medical aspects of sports, said a more conservative



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approach often is justified in ACL cases. It's a delay of game worth waiting for, Dr. McKeag said.

"We've found that in most cases a patient needs to wait at least three weeks (to allow for natural healing) before the surgical procedure is done," he said. Some who have surgery are more prone to develop arthrofibrosis, a stiffness of the knee caused by accumulation of scar tissue in and around the joint.

Women athletes often experience health problems unique to their gender, particular maladies referred to as "The Female Athlete Triad"-eating disorders, amenorrhea and osteoporosis.

Gymnasts, figure skaters and ballet dancers, for example, often develop bulimia and anorexia because they participate in "appearance" sports where they are judged not only on performance but by the way they look to judges.

"Binging and purging and starvation obviously are dangerous ways to maintain weight control," said Dr. McKeag, adding that some studies suggest that as many as 25 percent of all female collegiate athletes are said to have eating disorders.

Amenorrhea, the stoppage of normal menstrual cycles, tends to present itself more with high-impact female athletes. In the general population, amenorrhea affects between 2 percent to 5 percent; the condition ranges as high as 66 percent among various athletes, according to a report appearing in an article of the Journal of American Medicine in 1995. Amenorrhea is associated with decreased serum estrogen levels.

The loss of estrogen during early adolescence can lead to osteoporosis, where bone becomes thin and weak, later in life.

Sports medicine has evolved into far more than just reactive medicine. "We no longer merely react to injury; we anticipate it. All that we learn and is developed from sports medicine has application to the general population," said Dr. McKeag. "At the IU Center for Sports Medicine, our goal is to provide comprehensive care for all athletes who participate in recreational or competitive sports."

The IU Medical Group and Indianapolis radio station WIBC sponsor Mini Medical School, which is offered by the Indiana University School of Medicine Faculty Community Relations Committee through the IUPUI Division of Continuing Studies.

## **Sports Medicine Related Sites**

### **IU Center for Sports Medicine**

<http://www.iufammed.iupui.edu/sportsmed/sportsmed.htm>

### **National Institute for Fitness and Sport**

[http:// www.nifs.org](http://www.nifs.org)

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February 26, 2001

## **Mini Medical School The Heart Of Kidney Transplants**

INDIANAPOLIS - Each one the pair weighs only six ounces and is less than five inches long. Yet, kidneys provide a highly sophisticated pump and filtration system, eliminating poisons, regulating acid concentration and maintaining water balance in the human body. When the two organs don't work, transplantation is an option that can restore function and in many cases improve the quality of life for patients.

Kidney transplants are the second most common transplant operation in this country (corneal transplants rank first) with more than 9,000 procedures annually. Each year, more than 120 kidney transplants are performed at the Indiana University School of Medicine.

"The renal transplant is easier than all other major organ transplants and the patient can be treated with dialysis until a suitable donor can be matched," said Mark D. Pescovitz, M.D., an IU School of Medicine surgeon who specializes in renal (kidney), pancreatic and liver transplants. Dr. Pescovitz revealed the world of transplant surgery and its latest developments for participants attending the Feb. 20 session of IU School of Medicine's Spring Mini Medical School.

Candidates for kidney transplants usually are those who have kidney failure caused by severe and uncontrollable high blood pressure (hypertension), infections or diabetes mellitus. The procedure is not recommended for patients who have heart or liver disease, metastatic cancer, AIDS and other life-threatening diseases.

"The major pre-operative obstacle is finding a suitable donor," said Dr. Pescovitz. While most organs for transplants have come from deceased donors in the past, the number of living kidney donors is on the increase. A recent annual report by the United Network for Organ Sharing found that patients receiving kidneys from live donors are more likely to survive than those receiving organs from cadavers.

"That's largely because blood relatives (ideally a parent or sibling) make the best donors, and they can be more carefully screened and matched to the patient," said Dr. Pescovitz. About 600 living donor transplants have been performed at IU School of Medicine since 1980.

"It's an extremely safe procedure for the donor," said Dr. Pescovitz. Medical statistics show complications occur in less than 5 percent of donors, and less than .01 percent result in death. The post-operative renal function for donors is between 80 percent to 90 percent of the function they had with two kidneys.



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The environment for the living donor procedure is more controlled because there is little time lag between harvesting the kidney and transplanting it; the donor and recipient are in adjacent operating rooms. The donor kidney is transplanted into the patient's lower abdomen (the damaged kidneys remain intact and eventually wither) and stitched into place within the pelvis. In most cases, the transplanted kidney begins to function immediately.

The next obstacle is fighting the body's rejection of the new organ. Dr. Pescovitz said there are three categories of rejection: hyperacute (within two days), acute (the most common and occurring after seven days) and chronic, where scarring within the transplant organ occurs over months or years.

Immunosuppressant drugs, many of which have been researched and used in clinical trials at IU School of Medicine, help fight infection. In 1998, the antibody Zenapax, which blocks immune cells from attacking the new kidney, showed significant results in transplant patients at IU Hospital and James Whitcomb Riley Hospital for Children. That drug was administered with standard anti-rejection drugs during the first eight weeks following the transplant-the riskiest period in which organ rejection can occur.

The average hospital stay for kidney transplant patients is about a week with a recovery period of about a month. "We encourage patients to resume normal activities as soon as they are able," Dr. Pescovitz said.

Perhaps the biggest challenge in transplant surgery is the simple law of economics: supply meeting the demand. According to UNOS, the number of patients awaiting organ transplants has grown five times faster than the supply. Currently, there are more than 72,000 on national transplant waiting lists-three times as many as there were in 1990.

Looming ahead is the controversial transplantation of organs from animals, into humans. Xenotransplantation researchers are investigating the possibility of developing transgenic "miniature" pigs, which express a human gene. The belief is held that these pigs will develop organs adaptable for human transplantation. Current federal laws prohibit xenotransplants.

The IU Medical Group and Indianapolis radio station WIBC sponsor Mini Medical School, which is offered by the Indiana University School of Medicine Faculty Community Relations Committee through the IUPUI Division of Continuing Studies. For registration information, call 317-278-7600.

## **Organ Transplant Resources**

### **Indiana Organ Procurement Organization, Inc.**

<http://www.iopo.org>

### **United Network for Organ Sharing**

<http://www.unos.org>

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February 22, 2001

## Packer Receives Award for Gender-Specific Medical Research

INDIANAPOLIS -- C. Subah Packer, Ph.D., received the M. Irene Ferrer Award for Original Research in Gender-Specific Medicine at the Feb. 12 Partnership for Women's Health at Columbia University conference.

An assistant professor of physiology at the Indiana University School of Medicine, Dr. Packer's award was based on her original research entitled "Estrogen Protects Against Spontaneous Hypertension But Its Protect Mechanism Is Unrelated To Impaired Arterial Muscle Relaxation."

The Partnership for Women's Health At Columbia University was founded in 1997 as a collaboration between academic medicine and the private sector focusing solely on gender-specific medicine. Gender-specific medicine is the science of how normal human biology differs between men and women and of how the diagnosis and treatment of disease differs as a function of gender. The founding co-sponsors of the Partnership were Columbia University College of Physicians & Surgeons, Procter & Gamble and The Kellogg Foundation.

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February 22, 2001

## Study Links Salt Sensitivity and Risk of Death

INDIANAPOLIS -- A sensitivity to salt can put individuals at risk of death even if their blood pressure is not elevated, according to a study published Feb. 16 in the Council Supplement of *Hypertension, Journal of the American Health Association*.

The study is the first to show that salt sensitivity increases the risk of death, as well as other conditions, even for adults with normal blood pressure. Previous studies have found that salt sensitivity increases the risk of death, hypertension, heart attack and other cardiovascular conditions, but this is the first study showing that the risk is increased even for individuals with normal blood pressure.

"Salt Sensitivity, Pulse Pressure, and Death in Normal and Hypertensive Humans," was conducted by researchers at the Indiana University School of Medicine, the Regenstrief Institute for Health Care and the Richard L. Roudebush VA Medical Center. It was funded by the National Heart, Lung and Blood Institute, part of the National Institutes of Health.

"Salt sensitivity increases the risk of death whether or not a person has high blood pressure," says the study's principal investigator Myron Weinberger, M.D., professor of medicine and director of the Hypertension Research Center at IU School of Medicine. "We also found in a prior study that those who were salt sensitive were more likely to develop high blood pressure as they aged. The United States is a 'salt-rich' environment, which exacerbates this problem. Those who are salt sensitive need to take steps to reduce their salt intake and, so, lower their risk of death and cardiovascular diseases."

Salt sensitivity is not the same as the amount of salt ingested; it is a measure of how blood vessels and fluid volume react to salt. In individuals who are salt sensitive, salt intake increases their blood pressure in an exaggerated way and the increased level stays elevated longer.

In this study investigators followed up on individuals who had participated in a hypertension study done more than 25 years ago. The original group included 708 people between the ages of 18 and 80. Of those, researchers located 596 of the original group and, if living, re-examined them. For those deceased, the researchers tried to identify the cause of death and other health problems.

Researchers found that in the 25 intervening years, 123 people or 21 percent of the original group had died from cardiovascular disease or other causes. Participants in the original study who had normal blood pressure but were salt sensitive fared no better than those who were suffered from hypertension. Only those with normal blood pressure who were not salt sensitive at the outset had a significantly better survival rate.

The original study was designed to learn more about the mechanisms involved in how



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the body controls blood pressure. The current study shows that some of those mechanisms can be life threatening.

"Americans can take advantage of this finding," said Dr. Weinberger. "They don't need to drastically cut back on salt intake to reduce their risk of death or developing hypertension as they age. They will reap the benefit if they reduce their salt intake to 2,400 milligrams a day."

He added that only 10 percent of dietary sodium comes from salt added to food at the table, so people should monitor food labels and note the sodium content in prepared, preserved and processed foods.

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Recipes and suggestions for following a low sodium eating plan are available from the National Health, Lung and Blood Institute Web site at <http://www.nhlbi.nih.gov>.

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Feb. 19, 2001

## Ford Drives Home Child Safety Message With Grant

INDIANAPOLIS - More Hoosier families will be able to ensure the roadway safety of their children, thanks to a grant that expands a child safety program at the Indiana University School of Medicine.

Riley recently received a \$10,000 award from Ford Motor Co. as part of the automaker's support of the Boost America! Program, a national campaign geared to heighten awareness and the proper use of child safety and booster seats.

"The grant enables us to provide booster seats to children's agencies throughout the state, and that reduces youngsters' risk of being injured in vehicle mishaps," says Jeff Mathews, director of the School's Automotive Safety Program for Children.

Motor vehicle crashes are the leading cause of unintentional injury-related deaths among children age 14 and younger. However, car seats and safety belts-when properly installed and used-reduce the risk of death as much as 71 percent.

Indiana's mandatory seat belt law requires that vehicle passengers up to 4 years old must be in car seats, and that youngsters from 4 to 12 must be in a car seat, booster seat, or seat belt.

Started in 1981, the IU School of Medicine program educates adults throughout the state on a variety of child passenger safety issues. It also provides training to adults about the proper installation and use of infant and booster seats.

For more information about the Automotive Safety Program for Children, call 317-274-2977, or toll free 888-832-3219. Also, visit the Web site at [www.preventinjury.org](http://www.preventinjury.org).

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February 13, 2001

## African-Americans Develop Alzheimer Disease and Other Dementias at Twice the Rate of Africans

INDIANAPOLIS -- A 10-year study conducted in Indianapolis and Ibadan, Nigeria, has shown that African-Americans are twice as likely as Africans to develop dementia and Alzheimer disease.



University College Hospital,  
Ibadan, Nigeria



Indianapolis-Ibadan Research  
Team in Ibadan

This is the first report of incidence rate differences for Alzheimer disease and other dementias, contrasting populations from industrialized and non-industrialized countries, using the same group of investigators and identical methodologies. The study was conducted by researchers from the Indiana University School of Medicine and the University of Ibadan and published in the Feb. 14 issue of the *Journal of the American Medical Association*.

"Since evaluation of dementia is subject to different interpretations, we felt it was crucial to have the same investigators evaluate both the American and Nigerian study subjects using the same clinical assessment instruments, which we designed specifically for this study," says Hugh Hendrie, M.B. Ch. B., principal author of the paper.

"These findings will allow us to pursue the elusive risk factors for Alzheimer disease in these two disparate populations," adds Dr. Hendrie, who, with IU School of Medicine and University of Ibadan colleagues has been studying the two groups since 1991.

The researchers previously published a prevalence study that indicated both dementia and Alzheimer disease were more prevalent in the Indianapolis African-American community than in the Yoruba community in Ibadan. Prevalence studies indicate how many cases of the diseases exist at one point in time. Incidence rates, which are the number of new cases occurring per year, are better indicators of true disease rates than prevalence studies because



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Dr. Adesola Ogunniyi, principal investigator, Nigeria

incidence studies are able to account for such factors as differing life spans.

Starting with the non-demented subjects from the prevalence study, the researchers conducted the newly published incidence study which for five years followed 2,147 African-Americans in Indianapolis and 2,459 Yoruba in Ibadan, age 65 and older, to see if they developed dementia and Alzheimer disease. In the African-American group studied, 3.24 percent per year developed

dementia, including 2.52 percent per year who developed Alzheimer disease.

In the African group, 1.35 percent per year developed dementia including 1.15 percent per year who developed Alzheimer disease. The majority of those who developed a dementing disorder, in either country, developed Alzheimer disease. In both communities two-thirds of the study subjects were female.

This study was funded by the National Institute on Aging, which also is supporting the next phase of the research, already underway. The new study will attempt to pinpoint the cause or causes of the significant disparity in rates of dementia and Alzheimer disease between the African-Americans and the Africans. Among the areas under consideration are factors that increase the risk of vascular diseases such as heart disease and stroke. Examples of these factors are hypertension, diabetes and high cholesterol levels. All are less prevalent in the African group than in the African-American one.

The researchers will further explore molecular genetic disparities between the two groups by building upon their previous work that showed a weak association between Alzheimer disease and a molecular variant of the ApoE gene in the Indianapolis group. This work revealed an even weaker association between the disease and ApoE in the Yoruba. ApoE has been linked to Alzheimer disease in other populations.

Additionally, the researchers plan to explore the impact of lifestyle and environmental factors, significantly different in the industrialized group and the non-industrialized group.

The *JAMA* study was authored by Dr. Hendrie, former chairman of the IU School of Medicine Department of Psychiatry; Adesola Ogunniyi, M.D., a neurologist at the University of Ibadan; Kathleen S. Hall, Ph.D., an IU School of Medicine epidemiologist; and nine others from the IU School of Medicine and the University of Ibadan. Dr. Hendrie also is affiliated with the IU Center for Aging Research and the Regenstrief Institute for Health Care.

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**Video footage:** Principal Nigerian Investigator Dr. Adesola Ogunniyi (pictured above)

performs a neurological exam on Yoruban study participant Mrs. Ayisatu Laogun.

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February 13, 2001

## Williams Receives Dameshek Prize For Gene Transfer/ Therapy Research

INDIANAPOLIS -- David A. Williams, M.D., has been awarded the prestigious William Dameshek Prize from the American Society of Hematology. The Dameshek Prize is awarded annually to one individual who has made outstanding contributions to the field of hematology.

Dr. Williams, who is the Freida and Albrecht Kipp Professor of Pediatrics and professor of medical and molecular genetics at the Indiana University School of Medicine, received the award for his pioneering contributions in retroviral-mediated gene transfer and human gene therapy.

He also is the founding director of the Herman B Wells Center for Pediatric Research at the IU School of Medicine and an associate investigator in the Howard Hughes Medical Institute.

The award is named after the past president of the American Society of Hematology, who also was the original editor of the society's journal Blood. The society represents more than 9,500 clinicians and scientists whose work is devoted to advancing the understanding, prevention, diagnosis and treatment of hematologic disorders through basic and clinical research relevant to diseases of the blood, bone marrow, immunologic and hemostatic systems.

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February 9, 2001

## Videos Win Awards in National Contest

INDIANAPOLIS -- An Indiana University School of Medicine video about smoking cessation and *Riley Today* have garnered recognition in the 2000 Telly Awards competition.

*Reversing Trends: Smoking Cessation Techniques for the Health Care Professional* received a Bronze Telly Award. IU Nicotine Dependence Program Co-director Stephen Jay, M.D., chairman of the School's Department of Public Health, was a moderator on the video.

*Reversing Trends*, a collaborative effort with Healthcare Excel, a federally authorized organization that helps provide oversight of Medicare and Medicaid programs in Indiana and Kentucky, was researched and written by Anna McDaniel, D.N.S., of the IU School of Nursing. The video project was produced and directed by Diane Hook and edited by Norm Legge of the School's Creative Services facility of the Medical Education Resources Program/Continuing Medical Education.

*Riley Today*, a videotape medical journal sponsored by the James Whitcomb Riley Hospital for Children, also received a Bronze Telly Award.

Produced three times a year, *Riley Today* keeps 3,000 Indiana pediatricians and family practitioners informed of the latest advances in pediatric medicine and surgical care. The video journal is hosted by Patricia Keener, M.D., IU School of Medicine clinical professor of pediatrics. The show is produced by the MERP's Creative Services section.

The Telly Awards were founded in 1980 to showcase and give recognition to outstanding non-network film and video productions. There were more than 11,000 entries in the 2000 contest.

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February 9, 2001

## Forum Focuses On Women's Heart Health

INDIANAPOLIS - February is the month for valentines. It's also National Heart Month, a time when women can give themselves the best valentine of all: better cardiovascular health.

That's why the Indiana University School of Medicine National Center of Excellence in Women's Health and Anthem Blue Cross and Blue Shield are teaming with several local groups to promote health and wellness programs available to women in the Indianapolis and central Indiana area.

"A New Year, A New You" will take place from 10 a.m. to 2 p.m., Monday, Feb. 26, at the Indianapolis Artsgarden at Circle Center Mall in downtown Indianapolis. Health screenings for bone density, blood pressure, carbon monoxide, nicotine dependence and diabetes will be available, in addition to instructions for breast self-exams and chair massages.

"Cardiovascular disease kills 500,000 women in the United States each year, nearly twice as many lives claimed by all types of cancer," says Center of Excellence Co-director Ann Zerr, M.D., clinical associate professor medicine at IU School of Medicine. "Healthy lifestyles and choices reduce a woman's risk of this illness."

The American Heart Association reports that one in every two deaths is related to heart disease, stroke and other cardiovascular conditions. Women 50 and older are at particular risk.

Joining the Center and Anthem as sponsors for the one-day event are Wyeth-Ayerst Pharmaceuticals, Simon Properties and Indianapolis radio stations WZPL and WTPI.

For more information about the health forum, contact Tina Darling at (317) 630-2243.

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**February 8, 2001**

## **Hood To Direct American Board of Dermatology**

INDIANAPOLIS -- Antoinette F. Hood, MD, has been named executive director of the American Board of Dermatology. The five-year appointment was effective Jan.1.

Dr. Hood is a professor of dermatology and of pathology and laboratory medicine and director of the Division of Dermatopathology at the Indiana University School of Medicine.

She has served on the board of directors for the American Board of Dermatology, the American Academy of Dermatology and the Women's Dermatologic Society and as president of the American Society of Dermatopathology.

Among Dr. Hood's professional honors are teaching awards from IU and Johns Hopkins University, where she was on faculty before coming to Indiana in 1993, and the Rose Hirschler Award, the highest honor awarded by the Women's Dermatologic Society.

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Feb. 7, 2001

## Child Safety Advocates Sought For Awards Program

INDIANAPOLIS - Do you know a person or an organization in Indiana who goes above and beyond the call of duty to provide programs that prevent children's injuries and deaths? If so, they might be candidates for the 2001 Child Safety Advocate Awards.

"These awards are presented to those who have a strong commitment to children's safety and actively promote safety issues and injury prevention in their communities or through their line of work," says Keisha Nickolson, coordinator of Indiana SAFE KIDS at the Indiana University School of Medicine.

Nomination categories include individual, government, business, SAFE KIDS local chapter or coalition, community agency, law enforcement, media and health care.

The awards will be presented May 7 and coincide with the National SAFE KIDS Week event in Washington, D.C. Nomination forms can be obtained by contacting Keisha Nickolson at 317-278-3218, or toll free at 888-832-3219. Nominations must be received by March 2.

The Indiana SAFE KIDS Coalition, housed at the Indiana University School of Medicine, is part of the National SAFE KIDS Campaign. The campaign is the first and only national organization dedicated solely to the prevention of unintentional childhood injuries, the number one killer of children ages 14 and under.

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February 5, 2001

## Crabb to lead IU Department of Medicine

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INDIANAPOLIS -- David W. Crabb, M.D., has been named chairman of the IU Department of Medicine, the largest department at the Indiana University School of Medicine. The announcement was made Feb. 1 by Dean D. Craig Brater, M.D.



Dr. Crabb served as interim chair after Dr. Brater resigned the position to assume the duties of dean in July 2000. As chairman, Dr. Crabb will oversee the scientific and clinical activities of 290 physicians and researchers, and the education of more than 150 internal medicine and medicine-pediatrics residents.

Dr. Crabb served as vice chairman for research in the Department of Medicine from 1993-2000 and as the School's assistant dean for research in 1999-2000. He joined the faculty in 1983 as an assistant professor of medicine and of biochemistry and was named a full professor in 1990. He also served as director of the Wishard Memorial Hospital Section of Gastroenterology from 1993 to 1997.

Dr. Crabb graduated Phi Beta Kappa from Purdue University in 1974 with a bachelor's degree in biology and received his medical degree from IU in 1978. He did his residency at IUSM and was chief resident of internal medicine in 1982-83. He completed a fellowship in gastroenterology at IUSM in 1982.

Dr. Crabb received the Indiana University-Purdue University Indianapolis Chancellor's Award for Excellence in Teaching in 1989.

The primary research interest of his laboratory group is the metabolism of alcohol and genetic components of alcoholism. He was the recipient of a MERIT award from the National Institute on Alcohol Abuse and Alcoholism and the Young Investigator Awards from the Central Society of Clinical Research and the Research Society on Alcoholism.

He is married and has two daughters.

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(Editor's Note: JPG photo available upon request.)

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February 5, 2001

## Means Named To Newly Created Position at IU School of Medicine

INDIANAPOLIS -- Lynda J. Means, M.D., has been appointed executive associate dean for academic affairs at the Indiana University School of Medicine. The newly created position will centralize the management of many diverse activities within the School.



Dr. Means, professor of anesthesia and of surgery, is a pediatric anesthesiologist and critical care consultant at Riley Hospital for Children. Former Dean Robert Holden, M.D., who retired in 2000, named her assistant dean in 1998. Dean Craig Brater announced that her new position and responsibilities are effective Feb. 2.

As the executive associate dean for academic affairs, she will continue as chair of the School of Medicine Admissions Committee, which selects the 280 students who admitted to the IU School of Medicine each year.

Her expanded duties include supervision of faculty affairs, which includes school policies and procedure related to faculty, diversity and faculty development. She will oversee all aspects of compliance and conflict of interest issues pertaining to medical and research faculty.

Strategic planning and implementation, faculty mentoring programs and departmental reviews also will fall under the umbrella of Dr. Means' new duties.

Dr. Means is a 1973 graduate of Purdue University and a 1977 graduate of the IU School of Medicine. She completed pediatric and anesthesia residencies at the IU School of Medicine and a pediatric anesthesia and critical care fellowship at the Children's Hospital of Philadelphia. She has been on the faculty at the IU School of Medicine since 1983.

She is the immediate past chair of the American Academy of Pediatrics Section on Anesthesiology and a current board member of the Society for Pediatric Anesthesia.

She has two teenage children, Matthew and Katherine Nugent.

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February 2, 2001

## Students To Explore DNA Universe At IU School of Medicine

INDIANAPOLIS - A special group of Hoosier high school students will soon get the unique opportunity to work side-by-side with leading genetic researchers and physicians at the Indiana University School of Medicine.

**Forty-eight students** will participate in the second annual Molecular Medicine in Action program, March 11-12. The students, who were nominated by their science teachers, were selected from a pool of nearly 200 nominees from around the state.

"Participants will explore the vast and complex universe of human biology," says David A. Williams, M.D., a professor of pediatrics at the Herman B Wells Center for Pediatric Research at Riley Hospital for Children. "The focus is to show them how research can lead to the discovery and development of ways to correct genetic flaws that cause disease."

Under the supervision of School of Medicine scientists in one of the most modern research facilities in the world, the students will rotate through workstations and laboratory sites. They will learn how DNA is isolated and analyzed; how modified genes are inserted into cells; and how gene therapy is used to treat certain diseases. Students also will hear from patients with genetic-related maladies and how they deal with their conditions.

"Our goal is to build a bridge between IU School of Medicine and Indiana's secondary school students and teachers and, as a result, increase the number of young adults who choose professional careers in science," says Lilith Reeves, M.S., who co-directs the Molecular Medicine in Action program with Dr. Williams.

Other supporters of the Molecular Medicine in Action program include: Riley Memorial Association, Clarian Health, Indiana University-Purdue University Indianapolis, Indiana Department of Education, Indiana Association of Biology Teachers and the Hoosier Association of Science Teachers.

For more information about the Molecular Medicine in Action program, visit its Web site at [www.iupui.edu/~wellsctr/MMIA/](http://www.iupui.edu/~wellsctr/MMIA/).

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February 1, 2001

## Wilson Named To State's Top Doc Post

Indianapolis--An Indiana University School of Medicine pediatrics physician is the new commissioner of the Indiana State Department of Health.



Gregory A. Wilson, MD '75, clinical associate professor of pediatrics and a staff member of the Section of Developmental Pediatrics at Riley Hospital for Children, assumed the state's top medical post Jan. 31, following appointment by Gov. Frank O'Bannon.

"Dr. Wilson brings years of experience and expertise to the Department of Health," O'Bannon said. "This agency has an essential role in meeting the needs of so many Hoosier families and Dr. Wilson is a capable leader to help improve the health of Hoosiers, both young and old."

As state health commissioner, Dr. Wilson will oversee an agency of nearly 2,000 employees. The department is responsible for overseeing public health and education programs in Indiana, as well as having regulatory oversight of health-care facilities and nursing homes.

Dr. Wilson will maintain minimal clinical responsibilities at Riley Hospital.

His association with the IU School of Medicine began in 1979 with his appointment as assistant professor of pediatrics. At the time of his appointment, he served as director of the Pediatric Intensive Case Management Program at Wishard Memorial Hospital and as Riley Infant South medical director. Also, he was director of the Comprehensive High Risk Follow-Up Clinic at Wishard and as senior medical student adviser.

Dr. Wilson is the founder and past medical director of the Indiana Poison Center of Clarian Health. He has served in various leadership roles, including president of the Indiana Chapter of the American Academy of Pediatrics, medical consultant to Indiana's Children's Specialist Health Care Services and positions with the Indiana State Medicaid Advisory Committee.

Dr. Wilson, who attended Purdue University and received his undergraduate degree at Ball State University, did residencies at IU and Riley hospitals. Riley. In his 25-year medical career, he has participated in clinical and community service in Afghanistan, Appalachia (Eastern Kentucky) and helped spearhead legislation for vehicle passenger safety for children. He has received several awards from the Indiana Chapter of the AAP and the Indiana Association of Rehabilitation Facilities.

Dr. Wilson succeeds Richard D. Feldman, MD '77, as state health commissioner.



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January 22, 2001

## Noted Bioethicist Will Help Lead Indiana Genomics Initiative

INDIANAPOLIS -- Eric M. Meslin, Ph.D., has been selected to guide the Indiana University bioethics program, filling an important role in the university's development of the recently announced Indiana Genomics Initiative.

Dr. Meslin will be director of the Indiana University Center for Bioethics, assistant dean for bioethics and professor in the Department of Medicine, Indiana University School of Medicine, pending approval by the IU trustees.

Currently, he is the executive director of the National Bioethics Advisory Commission, a position he was appointed to in February 1998. The National Bioethics Advisory Commission was established by executive order signed by President Clinton in 1995.

The Indiana Genomics Initiative was made possible with a \$105 million grant from Lilly Endowment Inc., and will create a world-class biomedical research initiative, building on existing resources at Indiana University.

With a career focused on bioethics, Dr. Meslin served from 1996 to 1998 as program director for bioethics research with the Ethical, Legal and Social Implications Research Program at the National Human Genome Research Institute in Bethesda, Md. In 1994 and 1995, he was a visiting fellow at Green College, University of Oxford, and the visiting clinical ethicist at the Oxford Radcliffe Hospital, where he established the United Kingdom's first clinical ethics program.

In addition, he was assistant director (1991- 95), and then deputy director (1995- 96) of the University of Toronto Joint Centre for Bioethics. He has held academic appointments in philosophy, medicine, pharmacy and health administration at the University of Toronto, and has served as a senior research fellow at the Kennedy Institute of Ethics at Georgetown University.

He received a bachelor's degree in philosophy from York University, Toronto, Ontario, Canada, and his master's degree and doctorate from the Bioethics Program in Philosophy at the Kennedy Institute of Ethics, Georgetown University.

While completing his graduate studies, he was a program analyst at the Office for Protection from Research Risks at the National Institutes of Health. After completing his master's degree, he was the research ethics officer at the American Psychological Association.

He also has served as a consultant to the Medical Research Council of Canada, the Canadian Institutes of Health Research, World Health Organization and the U.S. Observer Mission to UNESCO.

Dr. Meslin has authored or co-authored more than 75 articles and book chapters on



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various aspects of research ethics, clinical ethics and health policy.

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January 22, 2001

## Statewide Gun Survey Triggers Interesting Response

INDIANAPOLIS - An overwhelming number of Hoosiers-many of them gun owners-say they support mandatory background checks of all people who buy firearms at shows in the state, according to the Indiana Partnership to Prevent Firearm Violence at the Indiana University School of Medicine.

Eighty-seven percent of those participating in a recent statewide survey say they would support a state law requiring the background checks. Near-similar percentages of those polled also back laws that would require all new handguns sold in Indiana to be childproofed and a mandatory waiting period for all people wanting to purchase a handgun.

"The survey-the first of its kind in our state-provides an accurate measurement of Indiana residents' opinions about the purchase of guns, safe storage of guns and other firearm injury prevention initiatives," says Marilyn Bull, M.D., director of development pediatrics at IU School of Medicine and medical director of the partnership. "Gun violence in every sense is a public health issue."

The rate of firearm deaths in Indiana-homicides, suicides and accidental shootings-is 14 per 100,000 population, according to the Centers for Disease Control in Atlanta. The state ranks first among surrounding central states in gun-related deaths.

Nearly 50 percent of all homes in Indiana have firearms, compared to a national average of 40 percent. Of Hoosier homes with firearms, 30 percent are handguns, 8 percent higher than the national rate.

The statewide telephone poll, conducted late last year by the Indiana University Center for Survey Research, surveyed the views of 1,109 citizens. It has a margin of error of plus or minus 4 percent.

Among other findings in the survey:

- 86 percent feel that persons convicted of domestic violence should not be able to purchase handguns in Indiana
- 83 percent agreed that mandatory safety training on handling and storing firearms should be required in Indiana for all first-time gun buyers
- 81 percent of respondents say that gun owners with children under 18 years old residing in the home should be required by law to store all guns unloaded and locked away
- 71 percent support a requirement that all Indiana gun owners store their firearms with trigger locks



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"This information is valuable for civic and community leaders who design and implement policy and prevention programs focused on reducing firearm-related deaths and injuries," says Patricia Lau, director of the Indiana Partnership to Prevent Firearm Violence, adding that her organization currently is developing a database to capture information about firearm-related injuries and deaths in Marion County and throughout the state.

The partnership was established by grants from the Joyce Foundation, a Chicago-based philanthropic organization, and the IU School of Medicine.

For more information about the survey or the Indiana Partnership to Prevent Firearm Violence, call (317) 278-7776.

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January 11, 2001

## Lithotripsy Research Brings Researchers Back To The Basics

INDIANAPOLIS -- Researchers at Indiana University School of Medicine and Methodist Hospital of Clarian Health have received an additional \$2 million in two National Institute of Health grants to continue their research to understand kidney stone disease.

Despite the common occurrence of kidney stones in the general population (about 5 percent) little has been learned about how to keep stones from forming. When stones become symptomatic, the pain can be so severe and the discomfort so great that immediate intervention is needed.

Since the mid-1980s urologists have been using a non-surgical approach to remove kidney stones. Shock wave lithotripsy uses focused acoustic pressure to break stones into small fragments. Lithotripsy has become the most popular treatment option, in part because it was thought to be entirely safe.

The lithotripsy research team at the IU School of Medicine and Methodist Hospital has determined, however, that shock wave lithotripsy can cause significant injury to the kidney. This group, currently funded by a \$4.2 million award from the NIH, recently has received an additional NIH grant to study the physical acoustic mechanisms of tissue injury caused by shock wave treatment.

The goal of this new project, directed by James McAteer, Ph.D., professor of anatomy and cell biology at the IU School of Medicine, is to understand how shock waves break stones and how these pressure waves cause tissue trauma.

"We have learned that shock waves can cause damage by a number of mechanisms," said Dr. McAteer. "The acoustic forces that break a stone may not be the same as those that damage tissue. We want to separate these events and find ways to improve stone fragmentation while minimizing adverse effects to the kidney."

Also involved in this IU research project are James Williams Jr., Ph.D., associate professor of anatomy and cell biology, Andrew P. Evan, professor of anatomy and cell biology, and James E. Lingeman, M.D., of Methodist Hospital.

In the other \$1 million, five-year newly funded project IU and Methodist researchers will work with Frederick Coe, M.D., University of Chicago Department of Medicine, to determine the pathological and clinical changes that cause stone formation and growth in patients. Dr. Evan and Dr. Lingeman will analysis kidney tissue samples obtained from patients with significant stone disease.

"We are not trying to treat a stone in these studies, but instead will be looking for the mechanism that caused the stone to form. The origin of kidney stones has eluded researchers for decades. We are making good progress toward understanding how kidney tissue contributes to stone formation in patients. No one has taken this



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approach before," said Dr. Evan, the principal investigator of the study.

A very detailed chemical analysis of the urine of these stone patients will be performed by Dr. Coe, while Dr. Lingeman will perform a detailed clinical history and renal biopies on these same patients. Dr. Evan says they hope their pathological analysis of these tissue samples will reveal clues on how the stone was first formed so that new treatment protocols can be developed to prevent stones from forming.

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January 11, 2001

## **Mind, Body and Soul In Medicine IU Mini Medical School Prepped For Spring Session**

INDIANAPOLIS - Do patients' spirituality affect their health outcome? What are the risks and what kind of life can organ transplant recipients expect? How can people benefit from combining traditional and alternative medicine?

These are among the many questions and medical topics that will be in the spotlight at the Indiana University School of Medicine Mini Medical School, Feb. 13 through March 20. Each session, conducted by IU School of Medicine physicians, faculty and other experts, begins at 7 p.m., followed by a question-and-answer period.

You don't have to work in the health-care field to attend and appreciate the topics discussed at the Mini Medical School. One of the main goals of the school is to introduce and explain to the public -- in everyday language -- the latest issues and developments in health care and research.

Moderators for the series are Stephen G. Lalka, M.D., professor of surgery, and Bette G. Maybury, M.D., clinical associate professor of neurology.

Speakers and topics for the spring session of Mini Medical School:

**Feb. 13 Spirituality in Patient Care** -- Elizabeth Bowman, M.D., clinical professor in neurology, will lead a panel discussion

**Feb. 20 The Science of Organ Transplantation** -- Mark D. Pescovitz, M.D., professor of surgery and microbiology/immunology

**Feb. 27 Impact of Sports Medicine on Everyday Life** -- Douglas B. McKeag, M.D., chairman of the Department of Family Medicine

**March 6 Breathing in Zero Gravity** -- Wiltz Wagner, Ph.D., V.K. Stoelting Professor of Anesthesia, and professor of physiology, biophysics and pediatrics

**March 13 Cryobiology of Cells and Tissues** -- John Critser, Ph.D., professor in the pathology and Laboratory Medicine

**March 20 Integrative Medicine: Bridging the Gap** -- Palmer MacKie, M.D., clinical associate professor of medicine

Each session will be held at the Riley Outpatient Center at the intersection of West and Middle drives on the IU Medical Center campus. Cost for all six sessions is \$35, and includes parking, refreshments and a course certificate. For registration information, call 317-278-7600.



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The IU Medical Group and Indianapolis radio station WIBC sponsor Mini Medical School, which is offered by the Indiana University School of Medicine Faculty Community Relations Committee through the IUPUI Division of Continuing Studies.

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