Spring/Summer 2020

UMKC Medicine

UNIVERSITY OF MISSOURI-KANSAS CITY SCHOOL OF MEDICINE

Journeys toward equity

No-fare bus rides among research interests of Health Equity Institute

CONTENTS

Features

2 **Bending, not breaking**
As buildings closed and classes shifted online, everyone at the School of Medicine had to adapt, and fast. Administration and faculty revamped schedules and curriculum. Match Day became a virtual event, and graduation plans changed. Through it all, the school kept focused on its educational mission.

6 **Leveling the field**
The UMKC Health Equity Institute is using the university's research resources to study and combat inequities in health care. The collaborative effort is led by the School of Medicine's Jannette Berkley-Patton, Ph.D., and aided by community groups and local government agencies.

9 **Healthy healers**
Health system programs to prevent burnout and foster physician well-being have become a national movement, and the School of Medicine is in the vanguard of extending those efforts to faculty members and medical students, as well.

Departments

12 **Match Day 2020**
15 **Alumni**
18 **On the Hill**

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UMKC Medicine

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FROM THE DEAN

AS THE COVID-19 pandemic has unfolded, the School of Medicine has adapted daily, sometimes hourly. Like others, we are thinking of our patients and their families, while navigating the impact of the pandemic on our own families, on our medical practice, teaching, research and advocacy work. We continue to focus on how we keep everyone safe while continuing to educate outstanding future physicians and other health care team members.

It has been inspiring to see the resilience and heroic efforts of our students, faculty and staff. But our success has not been surprising to me, perhaps because the School of Medicine has always taken a different approach. It's in our DNA to emphasize teamwork and creativity over competition, and to see people as unique gifts, rather than collections of skills or symptoms. That approach — and lots of daily Zoom meetings — continues to get us through this difficult time.

This issue of UMKC Medicine looks at how the school is meeting the challenges created by the pandemic, while embracing our mission moving forward.

- Rapid, creative moves by students, faculty and staff have shifted all of our classes online and preserved important traditions and milestones such as Match Day and Commencement.
- We've used new ways to teach clinical skills to ensure our students are poised to move back to their clinical rotations.
- Dollars generated by research grants have increased by 278% since FY16 — and we are now engaged in submission of grants to focus on COVID-19 outcomes.
- The school remains deeply committed to public health efforts, whose importance has never been more apparent. Our own Jannette Berkley-Patton leads the UMKC Health Equity Institute, which has set several collaborative projects in motion.
- Our alumni are in the vanguard of the physician well-being movement at their hospitals, and we are proud of their front line efforts. Their courageous determination is an understatement, and we see this with our colleagues daily as the pandemic has unfolded.

All of us at the School of Medicine are grateful for your service to your communities and for your continued support of the school and our students. I know many of you, like me, also have devoted substantial time to keeping the public informed in a time when widespread, accurate information and sound guidance can save lives. I thank you for all you are doing.

Let's stay safe, stay connected, and help one another continue our vital mission.

Mary Anne Jackson, M.D. '78
Dean, School of Medicine

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OPEN for LEARNING

As the coronavirus keeps people at home, students, staff and faculty keep lessons and work projects on track

By GREG HACK, LISA MALLOW and BRYCE PUNTENNEY

The coronavirus outbreak caused everyone, everywhere — businesses, governments, hospitals, families — to make lots of changes, and fast. And then make more changes. And then again.

That was the case at UMKC and the School of Medicine, where being flexible, adaptable and nimble quickly went from desirable to absolutely necessary. The lives of students, staff and faculty were disrupted, even as they were being protected.

Suggestions to prepare to teach online turned into mandates after March 13, followed by a full campus closure on March 23. Classes moved online. Dorms emptied. Staff worked from home. Research reduced operations. Faculty lectured via Zoom. In a matter of days, virtually everyone at UMKC and the school was working, teaching and learning remotely.

In these uneasy and unpredictable times, COVID-19 has made life at the medical school different, but it hasn't stopped its important work.

Staff members now gather online, rather than around a conference room table.

See the positive

As March began, fourth-year medical student Michael Oyekan and his brother, sixth-year student Anthony Oyekan, were sticking to their routines — studying hard, adding clinical experience, prepping for Step 1, anticipating Match Day and graduation.

As March ended, their focus had not changed, but how they went about everything had been upended.

"Being in health care, we kept up with all the news," Michael said. "Still, it was a shock when things kept spiraling and then everything closed and went online."

The brothers shared an apartment near the UMKC Health Sciences Campus, so they didn't have to move. Nonetheless, they headed back to their hometown, Tulsa, Oklahoma.

"We decided it was better to shelter with our parents and have that support," Anthony said. "That has helped, because surprise and disappointment definitely were emotions I felt."

Anthony just had his emergency medicine rotation left, and was looking forward to experiencing that

environment. “But you’d be surprised what you can learn from those online modules when they simulate a code or other emergency situations.”

He also saw plans for Match Day devolve quickly to a student’s-only event and then to a completely virtual presentation. Again, he was able to see the positive.

“I was linked online to all my family members everywhere,” Anthony said. “I appreciate what the school provided online. The slide show was exciting. You spend six years with people, it’s a special moment to see where everyone is heading. We couldn’t be together that day physically, but in the end that didn’t take away from the experience.”

Anthony also made a great match, an orthopaedic surgery residency at the University of Pittsburgh that includes a research fellowship to prepare him for a career in academic medicine. “I feel ready to be a physician in the real world,” said Anthony.

Michael also felt fortunate, despite the disruptions caused by the shutdown. It was his time to study for Step 1, so he wasn’t taking classes that suddenly shifted online. His plan to take the exam April 20 was thwarted, though, as testing centers had closed. “The hardest part now is just not knowing when I can take the test,” he said.

As for classwork, Michael was about to start a family medicine block. He wasn’t sure how the clinical experience would be provided, though the school was in the process of shifting patient interview experiences from clinical setting to telemedicine exercises.

“I’ve had classes that used Zoom to connect groups or out-of-town faculty, so I’m comfortable with it,” he said.

Anthony confessed that, without clinical schedules to meet and classes to complete, he has strayed a bit from his routine, something he doesn’t recommend. “But I’ve enjoyed having more time for family and old hobbies. I know I won’t have any extra time when my residency starts.”

Both brothers have kept regular contact with their docents, junior or senior partners and other classmates, helping them stay positive and feel connected in what can be lonely and uncertain times.

Anthony Oyekan (left) and his brother, Michael, celebrated Anthony’s Match Day at their family home in Tulsa, Oklahoma.

“There’s no denying it’s a scary, dangerous virus. So it helps to stay in touch, especially with friends who you haven’t heard from,” Anthony said.

Michael says it’s important to be aware of how we feel and what we hope for — besides a return to more normal circumstances.

“I hope it has been a time of people getting to know themselves better, what’s most important to them, and reconnecting with things they enjoy,” he said. “It’s a time for positivity and being flexible. All we can do as people is be ready for what comes next.”

Divide and conquer

According to Cary Chelladurai, the school’s assistant administrative dean with student affairs, she wasn’t shocked by the COVID-19 response of UMKC, but surprised. “What surprised me was the commitment of the university early on to commit to online education for the rest of the semester. I think it was a courageous decision and the right decision so you didn’t have a large number of people hanging by a thread.”

In a world where things changed not just every day but throughout the day, the school’s definitive action was welcomed. But in reality, Chelladurai and her team had already started preparing for significant impacts from COVID-19, the possible scenarios for students, and what staff would need to work remotely.

“We divided and conquered with the information we had,” said Chelladurai. “Some focused on the work from home part, some kept focused on Match Day, and others focused on what curriculum would look like.”

The school's leadership also kept staff informed, keeping lines of communication open and consistent. Regular emails from the dean and Zoom town halls keep staff updated. And Chelladurai has kept many student affairs meetings and routines in place. Staff meetings are still held each Friday online, and her team has Tuesday brown bag lunches on Zoom "where we talk about non-work stuff."

It's essential to keep these staff rituals, both formal and informal, says Chelladurai. "And an important piece of almost every meeting has been a wellness component, to have conversations about the adjustments people are making. There's a culture of care at UMKC and having that in place has just extended nicely into this challenge."

While Chelladurai and her team are adapting well to the changes in their work environment and the delivery of student curriculum, they all miss seeing the students. "As student affairs people, we go into this work because we want to be with students, and when they're not there, it's tough, especially this time of year," she said. "We love seeing them wearing their cap and gown, walking across the stage, giving them a hug, meeting their families. That's an important transition point that we know we are not going to have."

Despite all the changes, Chelladurai says, the department motto when times are tough — admit, advise and graduate — has not changed.

"Staff have been phenomenal in creating online experiences and modifying normal rules and processes to accommodate scheduling needs of students and curriculum," she said. Among these efforts are making alternative arrangements for clinicals, clerkships, licensing exams and away electives.

Chelladurai and her team are working with guidance from the accrediting body and communicating with other medical schools to do what is needed to fulfill on-time graduation requirements while easing students' anxieties.

"It's been very important to remind students that it's not just them or just our school of medicine, but that all medical students and all medical schools are in this same situation. Getting them to think differently and guiding them through that has been key. We really are all in this together."

A tool belt for the future

Across campus — and particularly at the School of Medicine — faculty member Michael Wacker speaks for many when he says the coronavirus hasn't changed what he does at the university. It's just changed how he does it.

In four days, UMKC faculty went from teaching 4 percent of classes online to nearly 100 percent. "At the School of Medicine, there were many meetings to generate solutions to the various challenges that moving all online generates," with no students allowed in the hospitals, said Wacker, vice chair and associate professor of Biomedical Sciences. He also serves as the associate dean of academic affairs, so he was part of the administrative team ensuring faculty and students had the technology needed to conduct business away from the school.

"We quickly set in place measures to move all lectures, team-based learning and simulated laboratory experiences online," said Wacker. "Faculty are live-streaming lectures or recording them with Zoom. They provide Q&A sessions for larger student groups, and are providing virtual office hours where students can 'stop by' to ask questions."

Those efforts have allowed faculty to maintain the same weekly schedules as planned in the syllabus and the same structure for courses.

"The situation has brought unique challenges, but I've heard from many faculty about new technology and approaches that they now have in the tool belt for educating future health care providers," Wacker said.

The school's researchers also made adjustments, as faculty had to reduce operations in many laboratories and pause clinical research. A few critical, time-dependent experiments have continued with those faculty and lab members working in isolation. Wacker said most researchers have taken this opportunity to analyze data, write manuscripts and grants, and catch up on publications. Some are holding virtual data meetings through Zoom to discuss findings and problems.

Despite, or perhaps because of, the interruptions and sudden changes, students have shared a new appreciation of human contact and interaction in the learning environment. And faculty have a strengthened sense of purpose — to continue to provide the highest quality education, graduate students on time and prepare them to be leading health care providers.

"While we haven't had much time to reflect," said Wacker, "I think we will feel proud of how the UMKC School of Medicine and its faculty, staff and students have responded and grown during this time." ■

> "There's a culture of care at UMKC and having that in place has just extended nicely into this challenge."
>
> — Cary Chelladurai

ON A MISSION TO BRIDGE THE HEALTH CARE GAP

Health Equity Institute brings together university researchers, government and community efforts to improve the lives of the underserved

By GREG HACK

When Chancellor C. Mauli Agrawal needed someone to head the new UMKC Health Equity Institute, he didn't have to look far. The School of Medicine's Jannette Berkley-Patton is a leader in community health research — just the right person to direct the institute, which is charged with combining the university's research strengths with community groups' grass-roots involvement to identify, quantify and reduce health care gaps.

Berkley-Patton, Ph.D., a professor in the school's Department of Biomedical and Health Informatics, might be best known for her Taking It to the Pews project, an outreach effort through local churches that gets people tested for HIV. She also is director of the UMKC Community Health Research Group, putting her in an ideal position to bring together the university's research programs and Kansas City social services groups and agencies.

In the year since Agrawal announced the institute, Berkley-Patton has made sure it got off to a running start. The institute has helped new projects large and small, with the goal of lasting improvements in health across social and economic classes. Anything that might improve health — from providing better transportation and more-affordable care to encouraging better eating and exercise — could be involved.

"We spend billions on health care but are still one of the unhealthiest countries in the world," said Berkley-Patton, who has degrees in engineering, human development and family life, and child and developmental psychology. "Large federal grants can help create effective programs, but we need sustainable improvements that continue when the grants end."

Kansas City's move to free public transit is a natural experiment the institute will study and encourage.

Berkley-Patton also is determined to keep the institute's momentum moving forward, despite the COVID-19 disruptions to health care and the wider economy.

"In fact," she said, "the Health Equity Institute is even more important than ever given that these underserved folks who historically have had more challenges in accessing health care services are likely to be hurt the most by these disruptions."

Get on the bus

One big project for the institute will be tracking how free bus service affects people's health. This year, Kansas City, Missouri, plans to become the first large city with free public transit — dropping bus fares to zero to match the city's streetcars, which already are fare-free.

The institute, recognizing a golden opportunity to measure the benefits of free public transit, has drawn up a multi-step research plan and submitted ambitious applications for grants from the National Institutes of Health and the Centers for Disease Control.

The CDC grant calls for research into "a natural experiment," Berkley-Patton said, "and if ever there was a natural experiment, offering free transit is it."

She continued, "We know from other research that people who use public transit tend to get 5 to 15 minutes more physical activity than non-riders, just getting to and from public transit. So if free bus service increases ridership, we hope to also see improvements in the health of people in low-income areas."

The institute will start by gathering baseline data, both from comparable cities' transit systems and from 500 current riders. The plan for identifying those people and getting data from them has been approved by UMKC's Institutional Review Board, which ensures that research subjects are treated ethically. That data gathering is on hold over COVID-19 concerns, but the institute is ready to go when the situation improves.

Jannette Berkley-Patton, Ph.D., is an expert in collaborative community research.

The CDC grant the institute seeks calls for data on 10,000 people, which defies individual recruitment. "So, we're proposing to collaborate with the Truman Medical Centers," Berkley-Patton said. "We have identified 11 low-income ZIP codes, and TMC has data on thousands of people that can serve as a measure of the health of those areas."

Of those patients, the institute hopes to have 4,000 take a brief survey, to gauge some basics about them such as income and incidence of health problems including diabetes and obesity.

The institute also plans to recruit 200 occasional bus riders to track, to see whether free service turns them into regular riders, and whether that improves their health.

Berkley-Patton says the elimination of fares should be a good incentive, saving a regular rider an estimated $1,500 in transit costs. And the research should identify other possible benefits, such as having access to more and better jobs.

"We've had lots of collaboration on this already to design research and make our grant proposals," Berkley-Patton said, ticking off allies from Children's Mercy, the Kansas City Area Transportation Authority and Public Works Department, UMKC Departments of Economics and Psychology, and the Schools of Dentistry, Medicine, and Nursing and Health Studies.

Now the institute must wait — on whether it gets CDC and NIH money to go full bore on its plans, and on when people can resume more normal living and head to jobs, doctor's appointments and other activities.

> "People who use public transit tend to get 5 to 15 minutes more physical activity than non-riders, just getting to and from public transit."
>
> — Jannette Berkley-Patton

'They miss recess'

Another project is Youth Engagement in Sports, or YES, led by Joey Lightner and Amanda Grimes, UMKC assistant professors in the School of Nursing and

Joey Lightner, Ph.D., M.P.A., involves students in his community health research.

Health Studies. When their proposal received an $800,000 grant from the U.S. Department of Health and Human Services, Grimes described the need to increase activity in middle school students.

"The evidence is very clear that American youth suffer from high rates of obesity, inactivity and poor nutrition," said Grimes, who has a master's degree in health science and a doctorate in community health.

"Adolescence seems to be a critical time in a child's life where behaviors are learned or reinforced. Girls are particularly prone to low rates of physical activity during adolescence."

The YES program will help students at two Kansas City middle schools, Central and Northeast, said Lightner, who has a master's in public health with an emphasis in physical activity, and a Ph.D. in kinesiology.

According to Lightner, sixth- through eighth-graders are in a tough place between elementary and high school. "In talking with them, we found out they miss recess. They don't get to play anymore. And they're suddenly supposed to be adults, often without all the information they need on health and nutrition."

One goal of the institute is to come up with innovative programs, and YES is certainly that.

"So after school, we're going to give them a big, healthy snack and then there's a physical activity intervention — they get to play," Lightner said. "We're going to offer competitive and non-competitive games, because we've found that some students gravitate to one kind of sport or another."

By reaching out to the students and their schools, the program also embodies the institute's emphasis on community engagement. And it draws heavily on another institute strength — collaboration.

TMC's Mobile Market, which brings healthy foods to underserved areas, will give students a weekly bag of produce along with recipes. Children's Mercy consulted on the program, providing its expertise with young people's health. The Kansas City Department of Parks and Recreation will help with the sports activities.

And Lightner, as director of the UMKC Public Health Program and a new bachelor's degree under it, has recruited undergraduate students to help gather data — and get first-hand experience in devising and tracking the sorts of programs that could become integral in their careers.

The program's aim is to help at least 300 students at the schools in summer sessions, and then again in the fall. Of course, the level of disruption and other unknowns caused by COVID-19 make it hard to plan. But when school is back in full swing, Lightner wants YES to be making a difference.

"We know this is a pivotal time for students, especially girls," Lightner said. "Peer groups are really important; there's a mentality of, 'If my friends are doing it, I'll do it.' So if we get them engaged in physical activity with their friends at this age, they're likely to continue. And so many benefits, from physical and mental health to staying in school and achieving academically, have been demonstrated."

Seeding other efforts

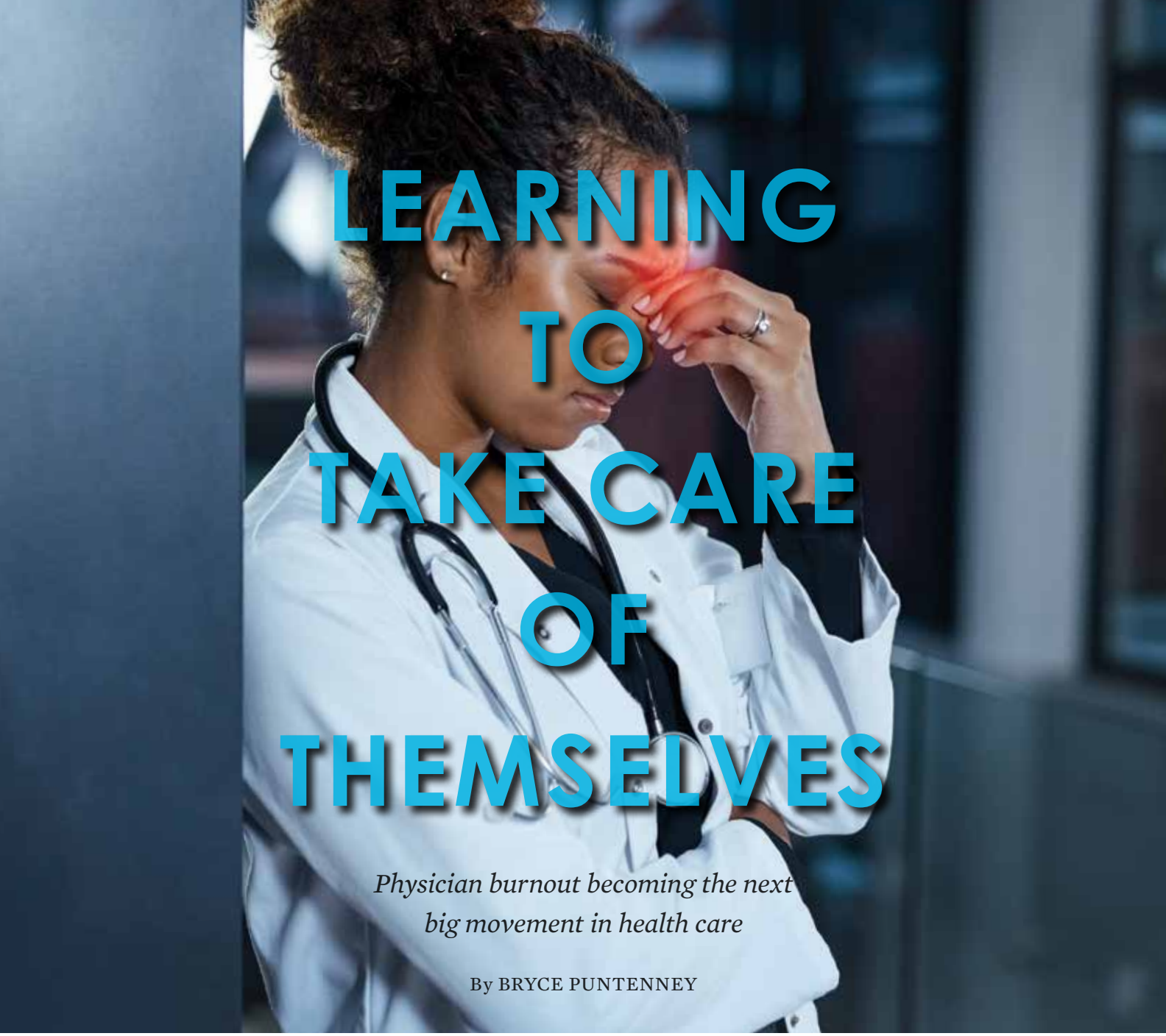
Another goal of the institute is to communicate across the university and among hospitals, government health agencies and community groups. A database is being compiled for training and other resources, along with opportunities to collaborate.

The institute's new website will be a clearinghouse for everything from health indicators to grant opportunities and processes. That could help community groups connect, for example, with the Health Forward Foundation, a Kansas City fund that promotes healthy communities.

The institute also will be awarding mini-grants, with the aim of giving several community groups a few hundred dollars each for health-related training, software, added staff help and other basics.

Overcoming health disparities is a huge task, made more daunting by the COVID-19 disruptions. But Berkley-Patton and other Health Equity Institute partners have had success in the past and will keep looking for new ways to reshape access to health care.

"It will be a while before we know how much damage the pandemic has done," she said. "But we do know that research programs that involve people in improving their own health can make a real difference, and it's going to take all the innovative, collaborative efforts we can build to help those most affected." ■



LEARNING TO TAKE CARE OF THEMSELVES

Physician burnout becoming the next big movement in health care

By BRYCE PUNTENNEY

Twenty years ago, a sea change for patient safety began with a report titled "To Err Is Human," which became a catalyst for the safety movement now embedded in hospital organizations nationwide. Today, the UMKC School of Medicine is working to be at the forefront of the next wave in patient care: physician burnout.

The well-being of health care professionals has been pushed to the forefront during the COVID-19 pandemic. Personal accounts from physicians, nurses and others can be found all over social media and in media reports. Risks have always been part of the job, but the pandemic has shined a spotlight on the toll of these jobs and driven concerns to a new level.

For faculty member Christine Sullivan, M.D. '85, physician well-being has never been more top of mind.

"Now, in addition to added and shifted clinical responsibilities, physicians have a real concern and underlying anxiety that they themselves might get sick," said Sullivan. "Even worse, could what they do as a profession cause their own family members to get ill?"

While COVID-19 may shine the light brighter on burnout, the issue of stressed-out medical students, residents and practicing physicians — and the effect on patients — is nothing new. As broader awareness of the problem has taken hold, the medical school is joining a movement to systematically change health care to combat burnout and address physician well-being. Sullivan is leading the school's charge, along with faculty member Sara Gardner, M.D. '02.

"Part of our profession is to be altruistic and put others ahead of ourselves," said Sullivan, who also serves as the school's associate dean of professional

development. "We're now starting to see that to give our best to our patients, we also need to take care of ourselves."

A movement takes shape

Since the turn of the century, researchers have found that burnout — that toxic mix of exhaustion and detachment that erodes the quality of work and makes people question their abilities in doing their job — is high among medical students and residents. And a 2012 study found the same among veteran doctors, as well. According to that report's leading researcher Dr. Tait Shanafelt, "We're not talking about a few individuals who are disorganized or not functioning well under pressure; we're talking about one out of every two doctors who have already survived rigorous training."

In the years since, the topic has continued to attract attention, and this past fall, the National Academy of Medicine called for system-wide reforms in its report "Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being." It set out several goals to address the issue including creating positive work environments, reducing tasks that do not improve patient care, making electronic health records and other technology easier to use and more relevant, reducing stigma and improving burnout recovery services, and creating a national agency for research on clinician well-being.

A sixth goal mentioned in the report, addressing burnout in training and at the early career stage of practice, is something already built into the school's innovative education program. The curriculum brings together three crucial elements — the docent system, integration of humanities into the curriculum, and emphasis on early and frequent patient contact — that give students a support network. The program also fosters meaningful human contact in the practice of medicine.

Part of the momentum

This spring, the school rolled out the Well-being Index for students, residents, physician faculty and non-physician faculty. Developed by the Mayo Clinic, the index measures six dimensions of distress and well-being in nine questions, all anonymously. Completing the voluntary index is being encouraged in classes, by docents and professors, and through wellness center communications. The school is asking participants to take the survey twice a year. However, they can take the survey monthly to gauge their own wellness and to access a number of resources on wellness topics.

By collecting and aggregating data, Gardner and Sullivan hope to pinpoint areas that may be flashpoints for burnout. They will drill down to specialty, location and even some limited demographic information.

"We'll then be able to develop a scorecard to see what positions are at the most risk for burnout," said Sullivan. "With that data in hand, we will hopefully drive hospital change to improve that particular working environment, because that's the learning environment for our medical students and graduate learners."

Both Gardner and Sullivan see the issue becoming first and foremost among the accrediting body for the university. During the school's recent accreditation process, the number one question seemed to be "What are you doing to address the well-being of your trainees?"

They've also been impressed by the buy-in they've received from every level of faculty. "That faculty support of this initiative is critical," said Sullivan. "Medical students train by role modeling, so it's critical they see their faculty on board. This has that."

> "Medical students train by role modeling, so it's critical they see their faculty on board."
>
> – Christine Sullivan, M.D. '85

Wellness starts within

The School of Medicine has long championed well-being, but that focus has gained a physical presence through the creation of the school's Wellness Wing. First opened in May 2018, it serves as a respite and resource where future doctors can escape the stresses that come with studies, clinical rotations and the health care industry in general.

When the school's Wellness Program coordinator, Niloofar Shahmohammadi, was brought on nearly 10 years ago, wellness was frequently discussed, but there was no space for the students to focus on it.

"Now, we've created a space for the students to retreat to that's not associated with the library or their clinical offices," said Shahmohammadi. "This is a place they can rejuvenate and de-stress that isn't associated with any of the stress that comes with the other parts of the building."

Within the wing, students can unwind using a variety of furnishings — such as a massage chair — along with games, yoga classes and other items to relax and refocus. If they want something a bit more active, footballs and Frisbees can be borrowed for outside use.

The Wellness Wing became a reality thanks to the generous support of the school's alumni association. In addition, the Friends of the School of Medicine provided support for some of the equipment. According to Shahmohammadi, the two groups were critical in bringing this to fruition, and for continued support of the school's efforts to enhance medical student well-being.

The Wellness Wing, stocked with everything from beanbag chairs and herbal tea to jigsaw puzzles and soothing music, is a great place to unwind.

Strength of partnerships

Another of the school's alumni, Jennifer Bickel, M.D. '01, is also in the forefront to combat physician burnout. As the medical director for the Center for Professional Well-being at Children's Mercy, Bickel works with Gardner and Sullivan to assist in analyzing the Well-being Index data, tapping into her experience at Children's.

Bickel herself wears many hats. She has distinguished herself at Children's Mercy as an expert on youth headaches, and also as a member of the School of Medicine faculty, where she was instrumental in making a curriculum change that gives every third-year student an in-class research experience.

Her research on burnout is leading the efforts at Children's to create and develop innovative approaches to preventing and addressing stress and fatigue in the workplace. It's driving the organization to look hard at their burnout rates and foster a high degree of professional fulfillment, which is essential in providing the best care for the young patients they treat.

When Bickel is presenting on this subject, she often includes discussions on burnout through the lens of lean philosophy, a viewpoint that grew from the manufacturing industry looking to increase value and minimize waste. It has been adopted by many industries — including health care — looking to streamline operations.

"Burnout is waste but it's not what you normally think of, monetary or resources," said Bickel. "Burnout is the waste of untapped potential. And what we're talking about here is a waste of some of the most highly trained and compassionate minds in the country."

In past years, it's been well-documented that there is a shortage of medical professionals — and Bickel says there's no doubt that burnout plays a role. She cites the Association of American Medical Colleges, which found that 40 percent of women physicians are leaving medicine altogether or going part time within six years of completing residency.

Beyond just losing workforce, Bickel's thoughts cut to the heart of the burnout issue. "I often think about burnout as essentially whatever is separating you from your life purpose. For doctors — and our School of Medicine medical students and residents, as well — that's caring for others. And burnout is separating them from that purpose." ■

Tools to Strengthen Your Resilience

ACCORDING TO Christine Sullivan, M.D. '85, resiliency may be the most critical aspect of well-being in this time of COVID-19. Given the increased levels of stress, anxiety and physician workload, along with knowing each new day will bring the same if not greater burdens, how do physicians mentally recover? While hospitals and other organizations are addressing clinician well-being in a number of ways, there are things individual physicians can do, as well. Sullivan points to information from the National Academy of Medicine, which shares the following resiliency strategies:

- **Meet basic needs** and ensure that you eat, drink, sleep and exercise regularly.
- **Make sure to take breaks** whenever possible to decompress and de-stress.
- **Stay connected** to get support from colleagues to avoid isolation. It is important to understand that you are not alone in your anxieties, fears and frustrations. Physicians should work to "check in" on each other. Friends and family can also provide support and gratitude for the work we do.
- **Perform "self check-ins"** if you are having difficulty sleeping or exhibit symptoms of depression or stress. Reach out to supervisors, peers or employee assistance programs (EAPs).
- **Honor your service** and recognize yourself and your colleagues for the important work you are providing for your community.

(Source: National Academy of Medicine. Action Collaborative on Clinician Well-Being and Resilience. Available at: https://nam.edu/initiatives/clinician-resilience-and-well-being/. Accessed April 7, 2020.)

A Match like no other!

ON MATCH DAY 2020, the usual bustle bordering on bedlam at the School of Medicine was replaced by quiet, empty hallways. Instead of gathering on campus as a class, with family and friends, 107 graduates-to-be enjoyed video-streamed and email presentations of where they will serve their medical residencies. Many shared photos of their smaller individual celebrations.

Dean Mary Anne Jackson, M.D. '78, addressed students, their families, faculty and friends through a video message, and students and their residency matches were revealed.

UMKC students won assignments in 27 states, from Massachusetts to Hawaii and California to Florida. Missouri had 31 of the placements, followed by 11 in Illinois, 10 in Florida, eight in Texas, five in Kentucky and four each in Kansas and California. As usual, some are headed to the top names in medicine, including Mayo, Stanford, the Cleveland Clinic, Harvard, the University of Chicago and UCLA.

ANESTHESIOLOGY

Harmeet Bawa	U. of Florida-Shands Hospital — Gainesville, FL
Mundeep Bawa	U. of Florida-Shands Hospital — Gainesville, FL
Vinson Huynh	U. of Arizona College of Medicine — Tuscon, AZ
Sarah Kasi	Loyola University Medical Center — Maywood, IL
Christopher Kurian	Harvard/Massachusetts General Hospital — Boston, MA
James Phillips	U. of Kansas School of Medicine-Wichita — Wichita, KS

CHILD NEUROLOGY

Gurpreet Seehra	UCLA Medical Center — Los Angeles, CA

DERMATOLOGY

Karen Figenshau	U. of Kansas School of Medicine — Kansas City, KS

DIAGNOSTIC RADIOLOGY

Zachary Aulgur	AdventHealth Orlando — Orlando, FL
Abygail Dulle	Cleveland Clinic, Cleveland, OH
Madison Looney	UMKC
Kizhan Muhammad	UMKC
Amy Shah	Case Western/MetroHealth Med Center — Cleveland, OH

EMERGENCY MEDICINE

Jordann Dhuse	U. of Texas at Austin Dell Medical School — Austin, TX
Rmaah Memon	Harvard/Massachusetts General/Brigham and Women's Hospital — Boston, MA
Zachary Randall	UMKC
Keton Schroeder	UMKC
Saumya Singh	Creighton University Affiliated Hospitals — Phoenix, AZ
Manna Varghese	U. of Central Florida College of Medicine—Gainesville, FL

FAMILY MEDICINE

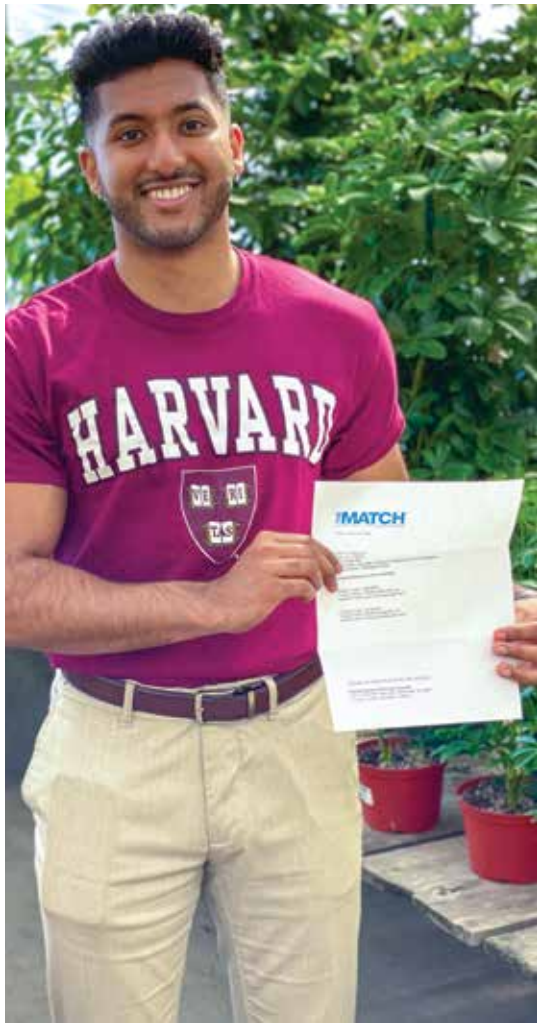
Paige Charboneau	Virginia Tech Carilion School of Medicine — Roanoke, VA
Morgan Dresvyannikov	UMKC
Logan Hemme	UMKC
Haley Kertz	UMKC
Samuel Maples	HCA Healthcare — Kansas City, MO
Kaylee Shrauger	HCA Healthcare — Kansas City, MO
Michele Sun	Mercy Hospital St. Louis — St. Louis, MO
Conner Sutton	University Hospitals — Columbia, MO
Alexander Weber	Baptist Health Madisonville — Madisonville, KY

GENERAL SURGERY

Keaton Altom	Tripler Army Medical Center — Honolulu, HI
Jessica Kieu	U. of Hawaii — Honolulu, HI
Calvin Korba	Southern Illinois School of Medicine & Affiliated Hospitals — Springfield, IL
Louis Sand	Hennepin County Medical Center — Minneapolis, MN
Dylan Schwindt	Northeast Georgia Medical Center — Gainesville, GA
Garima Thakkar	UMKC
Mesgana Yimer	Howard University Hospital — Washington, DC

INTERNAL MEDICINE

Noor Alshami	St. Louis U. School of Medicine — St. Louis, MO
Priyesha Bijlani	UC San Diego Medical Center — San Diego, CA
Ilham Boda	U. of Kansas School of Medicine — Kansas City, KS
Tim Brotherton	St. Louis U. School of Medicine — St. Louis, MO
Tony Cheng	U. of Tennessee Health Science Center — Memphis, TN
Ariana Fotouhi	U. of Tennessee Health Sciences Center — Memphis, TN
Christina Gomez	UMKC
Keerthi Gondi	U. of Michigan Hospitals — Ann Arbor, MI



Thomas Haferkamp	Rush University Medical Center — Chicago, IL
Austin Harris	U. of Kentucky Medical Center — Lexington, KY
Ammar Hasnie	U. of Alabama Medical Center — Birmingham, AL
Athira Jayan	U. of Texas Medical School — Houston, TX
Robert Johnson	Unity Health — Searcy, AR
Diana Jung	Unity Health — Searcy, AR
Saber Khan	Creighton University Affiliated Hospitals — Omaha, NE
Lilac Khojasteh	Loyola University Medical Center — Maywood, IL
Cynthia Liu	Baylor College of Medicine — Houston, TX
Dorothy Lor	Case Western/MetroHealth Med Center — Cleveland, OH
Neil Maitra	Baylor College of Medicine — Houston, TX
Haley McConville	Mercy Medical Center — Des Moines, IA
Thanuja Neerukonda	U. of South Florida Morsani Graduate Medical Education-Brandon — Brandon, FL
Jude-Patrick Okafor	White River Health System — Batesville, AR
Antonio Petralia	LewisGale Medical Center — Salem, VA
Nikita Rafie	Mayo Clinic School of Graduate Medical Education — Rochester, MN
Elizabeth Jane Robin	St. Louis U. School of Medicine — St. Louis, MO
David Roelofsz	UMKC
Adele Soutar	New Hanover Regional Med Center — Wilmington, NC
Abigail Spaedy	Tulane School of Medicine — New Orleans, LA
Erica Swanson	Indiana U. School of Medicine — Indianapolis, IN
Janki Thakker	Baylor College of Medicine — Houston, TX
Heath Turner	UMKC

INTERNAL MEDICINE/PEDIATRICS

Nicole Rogers	UMKC

INTERNAL MEDICINE/PRELIMINARY

Abygail Dulle	U. of Illinois College of Medicine — Chicago, IL
Karen Figenshau	UMKC
Taylor Lind	U. of Texas Health Science Center — San Antonio, TX
Madison Looney	UMKC
Kizhan Muhammad	Howard University Hospital — Washington, DC
Michael Phan	U. of Arizona College of Medicine — Phoenix, AZ
Landon Rohowetz	U. of Miami/Jackson Health System — Miami, FL
Amy Shah	U. of Louisville School of Medicine — Louisville, KY

NEUROLOGY

Iqra Choudhry	Geisinger Health System — Danville, PA
Francesca Pastrana	St. Louis U. School of Medicine — St. Louis, MO
Michael Phan	U. of Arizona College of Medicine — Phoenix, AZ

OBSTETRICS/GYNECOLOGY

Akash Jani	Advocate Health Care — Chicago, IL
Ivrie Oruwari	University at Buffalo School of Medicine — Buffalo, NY
Marcella Riley	Orlando Health — Orlando, FL
Subhjit Sekhon	UMKC
Michael VanDillen	U. of Tennessee Health Science Center — Memphis, TN

OPHTHALMOLOGY

Taylor Lind	U. of Texas Health Science Center — San Antonio, TX
Landon Rohowetz	U. of Miami-Bascom Palmer — Miami, FL

OPHTHALMOLOGY RESEARCH

Sharon Sabapathypillai	Washington U. — St. Louis, MO

MATCH DAY 2020

ORAL AND MAXILLOFACIAL SURGERY

Michael Bashoura	UMKC
Louis Spear	UMKC
Timothy Weber	U. of Alabama at Birmingham — Birmingham, AL

ORTHOPAEDIC SURGERY

Emily Boschert	U. of Florida-Shands Hospital — Gainesville, FL
Chizitam Francis Ibezim	U. of Texas at Austin Dell Medical School — Austin, TX
Robert Link	UMKC
Humza Mian	Wright State Boonshoft School of Medicine — Dayton, OH
Anthony Oyekan	U. of Pittsburgh Medical Center — Pittsburgh, PA

PEDIATRICS

Shelby Chesbro	Children's Mercy — Kansas City, MO
Anu Elangovan	U. of Chicago Medical Center — Chicago, IL
Madeline Harris	U. of Kentucky Medical Center — Lexington, KY
Valerie Hummel	U. of Louisville School of Medicine — Louisville, KY
Anusha Kodidhi	St. Louis Children's Hospital — St. Louis, MO
Elizabeth Onishchenko	Advocate Health Care — Park Ridge, IL
James Phan	UC Irvine Medical Center — Orange, CA
Adithi Reddy	Stanford University Programs — Stanford, CA
Mehr Zahra Shah	St. Louis Children's Hospital — St. Louis, MO
Shane Storm	U. of Nebraska Medical Center — Omaha, NE
Brandon Trandai	Nemours Children's Hospital — Orlando, FL
Krishna Trivedi	U. of Pittsburgh Medical Center — Pittsburgh, PA
Jennifer Vu	Baylor College of Medicine — San Antonio, TX

PHYSICAL MEDICINE AND REHABILITATION

Elizabeth George	Rush University Medical Center — Chicago, IL

PLASTIC SURGERY

Daniel O'Toole	Rhode Island Hospital/Brown University — Providence, RI

PSYCHIATRY

Anisha Chinthalapally	UMKC Center for Behavioral Medicine
Baqir Hassan	Tufts Medical Center — Boston, MA
Richard Lecuru	UMKC Center for Behavioral Medicine
Shipra Singh	Central Michigan U. College of Medicine — Saginaw, MI
Chadwick Yip	Rush University Medical Center — Chicago, IL

THORACIC SURGERY

Vivek Mehta	Zucker School of Medicine-Hofstra/Northwell North Shore University Hospital and Long Island Jewish Medical Center — New Hyde Park, NY

TRANSITIONAL YEAR

Zachary Aulgur	U. of South Florida Morsani Graduate Medical Education-Oak Hill — Brooksville, FL
Vinson Huynh	U. of South Florida Morsani Graduate Medical Education-St. Petersburg — St. Petersburg, FL
Christopher Kurian	U. of Chicago Medical Center — Evanston, IL

UROLOGY

Dane Stephens	U. of Kansas School of Medicine — Kansas City, KS

Let's stay connected

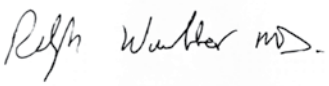
ALUMNI OF THE UMKC School of Medicine are known for clinical excellence and leadership in research, teaching and health care administration. Your contributions are even more apparent — and needed — in these unprecedented times.

For those of you on the front lines, your care for patients and colleagues in the face of this pandemic represents the best of who we are, honoring our oath with unflagging professionalism and humanity.

It's also important in challenging times to tap into one of our greatest resources — each other. The need to cancel events and limit travel kept us from gathering this spring. But it also reminded us that with technology we can "see" each other more easily than ever. So let me ask a small favor. Reach out to one of your classmates; catch up on how both of you are doing. And then perhaps the two of you can widen that circle of connection. Just a few weeks ago I was invited to a Zoom birthday party for Tim Lee, M.D. '94. While we did discuss COVID-19 and our careers, quickly we evolved into just fun banter. It felt as if I was back at Year 5 FAPAN!

And be assured that when we can gather again, the School of Medicine will welcome and honor you as we celebrate the school's 50th anniversary. Our continued connections have always been important to the school, and those efforts are in good hands with the school's first associate dean of alumni and community engagement, David John, M.D. '77. He has already made a difference with his outreach to alumni and parents, and I look forward to working more with him.

If you have ideas on how we can better stay connected, or would just like some help getting in touch with classmates, drop me an email at wuebkermd@yahoo.com.



Ralph Wuebker, M.D. '94
President, Board of Alumni and Partners

DURING THIS TRYING time, maybe it would help a bit to think back on what our profession and the School of Medicine have given us. As physicians, we can appreciate our value to society, our enhanced knowledge base that helps us respond appropriately to this pandemic, and our continued sense of purpose in a time of accelerating anxiety and dysfunction. More than in times of peace — and this is not a time of peace — society draws hope from our profession.

Our School of Medicine placed a mantle on your shoulders at your graduation, to be borne with respect throughout your life. Honor that. Find gratitude knowing that.

For those of you on the front lines, we applaud you. Our young graduates will, very soon, join you. Honor them.

And know that with our lives we all are writing history: our own, our profession's and our alma mater's. These times have taken from us, causing us to regretfully cancel in-person Match Day and graduation, along with our Alumni Weekend and Reunion. They also have given to us many chances to be creative in our practices, our teaching and our connections with one another. With luck they also will help us make our school's coming 50th anniversary celebrations even more meaningful.

I hope for all of you continued health and safety.

David John, M.D. '77
Associate Dean of Alumni and Community Engagement

In memoriam

MARK BERNHARDT, M.D., joined the faculty in August 2013 as the Dr. Rex L. Diveley Endowed Professor and Chair of the Department of Orthopaedic Surgery. He was a skilled surgeon, wonderful educator and engaged colleague. He served most recently as chair of the Truman Medical Center Executive Board.

DOUGLAS GEEHAN, M.D., joined the faculty in 2002 as associate professor of surgery. He was a dedicated teacher and surgeon, and a gracious and engaging colleague. He served on the school's Faculty Council, was promoted to professor of surgery in 2012, and worked in the Department of Surgery at Truman Medical Centers for more than 23 years.

TIMOTHY HICKMAN, M.D. '80, joined the faculty in 2007 as associate professor of pediatrics, served as the medical director of Continuing Medical Education and then as associate dean for curriculum. He was a positive influence on students, faculty and staff. His service included the March of Dimes Prematurity Campaign Collaborative and the American Academy of Pediatrics' section on epidemiology, public health and evidence.

JOSEPH C. PARKER JR., M.D., comitted to the students he taught and the patients he served, was a professor and chairman of the Department of Pathology at the school and Truman Medical Centers from 1986 to 1992. He later practiced with his son, John Parker, M.D. '93.

CHARLES WAYNE SIMPSON, Ph.D., had a passion for learning that propelled him through four decades of teaching and research, including 20 years at the School of Medicine. He performed cutting-edge brain research, presented at worldwide conferences and inspired students to appreciate physiological psychology.

UC San Diego leader is chosen UMKC Alumnus of the Year

ALEXANDER NORBASH, M.D. '86, is the UMKC Alumnus of the Year, the top award given each year. Norbash is an interventional neuroradiologist, a highly technical specialty that addresses life-and-death matters with techniques requiring high precision and composure.

At the University of California San Diego, he fills several big roles as chair and professor of the 550-person Department of Radiology; associate vice chancellor for Diversity, Equity and Inclusion; and adjunct professor of neurosurgery. Norbash has been instrumental in inventing and implementing new technologies which are less invasive and more effective for treating strokes and brain aneurysms.

Norbash sees research and diversity going hand in hand: "What's research? It's critical thinking, looking at preconceptions, exploring assumptions and realizing that everything we believe right now is going to shift or morph. Too often we don't appreciate how many ways you can do something. If you stay in your own little echo chamber or comfort zone, always with people like yourself, you're not going to innovate. It's all about creating the most connected yet diverse teams possible."

Norbash said that throughout his career he has drawn on lessons from medical school. "The School of Medicine's founders and early leaders were a unique community of brilliant innovators who changed the face of medical education," Norbash said. "They questioned the validity of assumptions and sought to improve the world through techniques and approaches that were unconventional."

The medical school has produced the UMKC alumnus or alumna of the year several times. Norbash joins Catherine Spong, M.D. '91, Robert Arnold, M.D. '83, Nick Comninellis, M.D. '82, Mark Ediger, M.D. '78, and David Hayes, M.D. '76, in winning the university's top alumni award.

Alexander Norbash, M.D. '86, fills multiple roles at the University of California San Diego.

Ophthalmologist wins achievement award

THIS YEAR'S WINNER of the Alumni Achievement Award for the School of Medicine is ophthalmologist Kevin Blinder, M.D. '85. Blinder is a leading specialist of vitreoretinal diseases, which affect the back of the eye and fluid around it.

Blinder also is a partner at the Retina Institute in St. Louis and a professor of ophthalmology at Washington University, where he has trained countless residents and fellows in retina education. Blinder also has an interest in clinical research and has been an investigator in more than 30 clinical trials.

"We learned early on in medical school the way to advance medicine is to ask questions and pursue answers," he said. "Clinical research attempts to answer these questions, from the simplest to the most complex. We can offer our patients cutting-edge technology that otherwise may not be available."

COURTESY OF RETINA INSTITUTE

Kevin Blinder, M.D. '85, practices and teaches ophthalmology in St. Louis.

Blinder said he was drawn to UMKC by its six-year medical program and chose ophthalmology after taking an elective in the specialty taught by Dr. Felix Sabates. His time at UMKC also included the searing memory of being on docent rotation when the Hyatt Regency's skywalks collapsed.

"They asked for volunteers to go to the scene where people were trapped underneath tons of concrete to assist with rescue efforts; 114 people were killed, and 214 people were injured," Blinder said. "I would like to think that we played a role in saving those 214 people who survived."

Now, in addition to his research, teaching and regular practice, Blinder takes a monthly trip to Quincy, Illinois. There, at the practice of classmate Eric Sieck, Blinder serves patients who might otherwise not be able to get retinal care.

COURTESY OF LURIE CHILDREN'S HOSPITAL

Dana Thompson, M.D. '91, is a surgeon and authority on pediatric otolaryngology.

Take Wing winner driven by passion to serve

DANA THOMPSON, M.D., M.S., M.B.A '91, was just a child when she began to realize what it meant to be a physician.

Her maternal grandfather, throughout most of his career as a general practitioner in Mississippi, was the only black physician in a nearly 100-mile radius. Thompson watched him and learned about commitment to patients and community. She saw the endless drive for excellence and the longing to provide patient care where it was sorely needed.

Her father, in the midst of the Civil Rights Era, was among the first black physicians to enter the integrated obstetrics/gynecology residency program at Kansas City General Hospital. As she grew older, Thompson accompanied her father to the hospital, and during her high school years she worked in his Kansas City, Kansas, practice. She was even one of the early graduates of the UMKC School of Medicine's Summer Scholars pipeline program for area high school students.

Now, Thompson is a third-generation African-American physician who embodies those same family characteristics, the drive for excellence and a thirst to assure access to medical care for those in need. Those traits also made her a natural for the School of Medicine's 2020 E. Grey Dimond, M.D., Take Wing Award winner.

Thompson serves as the Lauren D. Holinger Chair of Pediatric Otolaryngology at the Ann & Robert H. Lurie Children's Hospital of Chicago, and a professor of otolaryngology head and neck surgery at the Northwestern University Feinberg School of Medicine.

Working in Chicago, where the population is diverse and ranges across socioeconomic backgrounds, Thompson is on a personal mission to educate others about the unintended consequences of bias in health care delivery.

"At this point in my career, I think that's what I'm most passionate about," Thompson said.

After graduating from the School of Medicine, she completed her residency in otorhinolaryngology head and neck surgery at the Mayo Clinic. She followed that with a fellowship in pediatric otolaryngology at Cincinnati Children's Hospital, where she trained under the pioneer of pediatric airway surgery, Dr. Robin Cotton.

Throughout a 23-year career in academic medicine, Thompson has become a leader in pediatric airway and swallowing disorders. Her landmark research in laryngomalacia made her a world authority and transformed the medical and surgical management of the condition, the most common cause of infant stridor, a high-pitched wheezing caused by disrupted airflow.

Thompson spent most of her career at the Mayo Clinic, where she became the inaugural chair of the division of pediatric otolaryngology.

"What an opportunity that was – at age 32, to build a program from scratch and create a service line at a world-class organization," she said.

The experience also helped her understand that she wanted to have the same sort of impact in an urban setting at a major academic children's hospital. So when the opportunity arose to lead the division of otolaryngology at Lurie Children's Hospital, Thompson made the move.

Now a surgeon and administrator, she also serves as vice chair of the Department of Surgery and executive director for the hospital's ambulatory practice.

Much of her work in the operating room involves highly specialized, complex, high-risk surgeries on children with obstructions in the upper airway. With the onslaught of the coronavirus, the procedure is of particular high risk for transmission of the virus to health care workers. As a result, Thompson has been busy helping the hospital and her surgical teams adjust to new, safer ways to provide such patient care.

"We're taking different processes in the operating room in terms of protecting our team with personal protection equipment, while assuring a safe environment to deliver care to children in need," she said. "We've even changed some minor details of how we ordinarily do surgeries to prevent virus aerosolization during surgery. It's rapidly changing and evolving. We're going to have a whole new way of doing things."

Tyler Smith, M.D., M.P.H.

New associate dean of diversity

THE SCHOOL OF Medicine has announced Tyler Smith, M.D., M.P.H., assistant professor of pediatrics, as the new associate dean of diversity, equity and inclusion. Smith, the first physician to fill the role, started April 6.

Smith has been part of the Children's Mercy Department of Pediatrics and UMKC faculty since February 2018. She took over the diversity post from Nate Thomas, Ph.D., who served from December 2017 to March 2020. In addition to her role as associate dean, she will continue to serve at Children's Mercy as the General Academic Pediatrics Fellowship program director.

Smith graduated from the University of South Carolina School of Medicine and completed her pediatric residency at the University of Maryland Medical System in 2008.

Smith earned her M.P.H. and a fellowship in general academic pediatrics at Johns Hopkins School of Public Health and School of Medicine. She was recognized as mentor of the year by Hampton University, where she completed her undergraduate work.

Smith is nationally known for her work in medical education, mentorship, diversity, health care disparities and physician wellness. She is a member of the National Medical Association Editorial Board and the Kansas Children's Cabinet and Trust Fund.

Diabetes research attracts $3.3 million grant

THE NATIONAL INSTITUTES of Health awarded a $3.3 million grant to Jannette Berkley-Patton, Ph.D., professor at the UMKC School of Medicine, to help improve diabetes prevention outcomes for African Americans.

"This is an extension of what we've been doing in the School of Medicine with Project FIT, which stands for Faith Influencing Transformation" said Berkley-Patton, director of the UMKC Health Equity Institute and the Community Health Research Group. With Project FIT, nearly 900 people have participated in the program and more than 200 medical, physician assistant, nursing and health studies, and psychology students have been trained as FIT health coaches.

The grant will bring the Centers for Disease Control and Prevention's National Diabetes Prevention Program to 360 African American pre-diabetic participants recruited from Truman Medical Centers. Over a year, 22 group sessions will focus on eating healthier and exercising regularly.

The first year of the grant was designed for planning — work that can be done despite the restrictions in place to combat the spread of the coronavirus. A year from now, the program's outreach should be underway.

People who participate in the CDC program aim to lose 5 to 7 percent of their body weight and exercise 150 minutes a week, which have been shown to reduce the risk of diabetes by up to 60 percent. The program has also been found to outperform pre-diabetes drugs such as Metformin.

However, African Americans typically don't fare as well, especially women and those with low incomes. Barriers to their success, referred to as social determinants of health, include the cost of the program, transportation, childcare, access to healthy food and places to exercise.

"With the grant, we're trying to address every barrier related to social determinants," Berkley-Patton said. "The most successful outcomes are correlated with attending the sessions — the more sessions attended, the better the outcomes."

Truman Medical Centers will help recruit participants for the diabetes research.

Beloved administrator remembered

MARILYN MCGUYRE, loved across four decades by the students she served at the School of Medicine, died Jan. 9 at age 73. McGuyre joined the school administration in June 1971, two months before the first class of students arrived. Before she retired in 2010, she served as the school's assistant director, director of student affairs and finally as career counselor. McGuyre was deeply committed to the 2,800 students who graduated as physicians during her tenure.

UMKC makes its debut in U.S. News rankings of medical schools

FOR THE FIRST time ever, the UMKC School of Medicine joined the U.S. News & World Report rankings of medical schools and other graduate programs.

The school placed 75th for primary care medical schools and 88th for research medical schools. U.S. News said its rankings covered 122 accredited medical and osteopathic medical schools that participated in the rankings, out of 189 that were asked.

UMKC, whose innovative six-year program takes most of its students right out of high school, did not participate in past surveys because its program is so different from others in the United States. Dean Mary Anne Jackson, a 1978 graduate of the program, said she thought it was time to join the survey.

"Our school is known for excellent clinical training and great success in residency matching, throughout the Midwest and at Mayo and other top institutions," Jackson said. "We also offer expanding research opportunities and have placed students in the top National Institutes of Health student research program for several years in a row."

The medical school rankings were based on a weighted average of indicators, seven for the primary care rankings and eight for research. Some indicators were quality assessments by academic peers and residency directors. But most were objective data submitted by the schools, such as research activity, student test scores and acceptance rate. The UMKC school rated in the top one-third, for example, in faculty-student ratio, on a par with Stanford, the No. 4 school overall, and ahead of 78 other schools. It also did well in the percentage of its graduates going into primary care — a strength reaffirmed on this year's Match Day, when just over half the graduates-to-be matched in primary care residencies.

Dean Jackson said it took a "yeoman's effort" to compile and submit the required data for the first time, and she thanked the school's leadership team including Vice Deans Steven Waldman, M.D. '77, J.D., and Paul Cuddy, Pharm.D., M.B.A., for their efforts.

$1.16 million glaucoma grant extends Koulen's research work

UMKC SCHOOL OF Medicine vision researcher Peter Koulen, Ph.D., has received a $1.16 million grant for a study to battle vision loss and blindness.

Backed by the National Institutes of Health National Eye Institute, his research will investigate how a mechanism that allows nerve cells to communicate effectively could lead to the development of new treatments for glaucoma.

Glaucoma is a major cause of irreversible vision loss and blindness. The disease causes degeneration in the retina and optic nerve, which connects the eye to the brain. Preventing the death of these cells is currently the only feasible way to prevent vision loss from glaucoma.

In the past year, Koulen has won two other major NIH research grants. His current study of new chemical compounds to treat and prevent age-related macular degeneration received a $1.16 million grant. He is also part of an innovative $1.5 million project exploring a novel tissue-preservation method that could help meet far-reaching clinical needs in ophthalmology and other fields of medicine

This new glaucoma research will focus on alternative strategies directly targeting the damaging effects of the disease on the retina and optic nerve.

"Just like elevated blood pressure predisposes patients to stroke, high pressure inside the eye is a predisposing factor for glaucoma," said Koulen, professor of ophthalmology and director of basic research at the Vision Research Center. Several current therapies reduce abnormally high eye pressure, "but when these therapies fail or cease to be effective, glaucoma and the accompanying vision loss continue."

Koulen's project will determine how to boost the cell-to-cell communication that retinal nerve cells use to defend themselves from disease and injury. The hope is this will protect these cells from the damaging effects of glaucoma.

If successful, Koulen's research will result in new drug candidates that would contribute to "neuroprotection" as a strategy to treat and prevent glaucoma.

Peter Koulen, Ph.D., has received a third major NIH grant.

John Spertus, M.D., M.P.H., added to his already large body of published results.

Spertus leads more published research

UMKC SCHOOL OF Medicine researcher John Spertus, M.D., M.P.H., is part of two large NIH-funded clinical studies published recently in the New England Journal of Medicine. The studies indicate eliminating unnecessary revascularization treatments for cardiac patients could save the United States hundreds of millions of dollars annually.

Spertus serves as professor of medicine and Daniel J. Lauer, M.D., Endowed Chair in Metabolism and Vascular Disease Research at the School of Medicine, and Clinical Director of Outcomes Research at Saint Luke's Hospital.

The studies looked specifically at coronary artery disease patients who had high-risk blockages with 10 percent or more of the heart muscle being at risk. One focused on patients with preserved kidney function and the other targeted patients with end-stage kidney failure. That latter group has largely been excluded from cardiovascular trials, despite having a high prevalence of coronary artery disease and death, Spertus said.

Both studies, conducted in unison, examined the most important outcomes for patients, clinical events and patients' symptoms, function and quality of life. Participants underwent invasive angiography and revascularization with aggressive medical therapy or aggressive medical therapy alone.

The studies in patients with preserved kidney function showed that invasive medical procedures provided no reduction in clinical events but did improve patients' symptoms and quality of life, if they had chest pain within a month of entering the trial. These health status benefits were evident within three months and sustained out to four years.

"Importantly, this benefit was only observed in patients who had angina, chest pain, and not in asymptomatic patients," Spertus said. "There is no indication for these procedures in patients whose symptoms are well-controlled with medications alone. If we avoided revascularization in asymptomatic patients, we could potentially save $500 million to $750 million a year in the United States."

Among patients with severe kidney disease, there was no significant difference in clinical events or in patients' symptoms and quality of life.

"While disappointing, this is a very ill patient population for whom an aggressive, invasive treatment strategy does not seem to offer much benefit," Spertus said.

The NEJM published four papers from these studies on March 30, one for each trial focusing on the clinical events and another for each trial focusing on the quality of life outcomes. Spertus was involved in writing all four and is the lead author on the two quality of life papers.

Women of Distinction honor for Rosemergey

SCHOOL OF MEDICINE faculty member Beth Rosemergey, D.O., associate professor and director of the Community and Family Medicine Residency program, was honored recently as one of the outstanding women of Eastern Jackson County, Missouri.

For the past five years, the Independence Examiner newspaper has sponsored the annual Women of Distinction Awards. Women from the fields business, government, education and non-profit are honored based on their accomplishments and community involvement in Eastern Jackson County.

Rosemergey is the third honoree nominated by Truman Medical Center-Lakewood. Last year, Laura Doan, M.D., a 1984 UMKC School of Medicine graduate and University Health women's care provider, was a Women of Distinction honoree. Lynette Wheeler, Truman Medical Center-Lakewood chief operating officer, was honored as Outstanding Woman of the Year in 2018.

Rosemergey, the mother of an autistic child, is passionate in her advocacy for special needs children and their families. She has worked with local schools to develop programs that address the needs of children with Autism Spectrum Disorder and was instrumental in developing state guidelines for the care of autism patients.

Rosemergey also serves as vice chair of the Department of Community and Family Medicine and medical director of the Bess Truman Family Medicine Center.

A graduate of the University of Health Sciences College of Osteopathic Medicine in Kansas City, she completed her family practice residency at UMKC and Truman Medical Center-Lakewood and joined the School of Medicine faculty in 1992.

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Mirroring coronavirus, 1918 flu epidemic put Hospital Hill icon to the test

WHEN THE SPANISH FLU hit in late September 1918, Kansas City's General Hospital had been open for a decade at 23rd and Locust. It was heralded for its 600-bed capacity and design combining historical ornamentation and a utilitarian H-shaped layout to maximize light and cross ventilation. And when the flu first spread from military training areas, some believe General Hospital treated the city's first civilian case of the flu, a Hotel Muehlebach employee named Mary Riley.

Like today, quarantines helped curb the 1918 flu's initial outbreak. And like today, the hospital staff performed bravely, despite the real chance of becoming sick themselves. Currently, our faculty physicians are providing needed patient care, but students are no longer training in the clinical setting to limit exposure and conserve personal protective equipment. But many have taken on new roles: providing daycare to those on the front lines, offering tutoring for children of health care workers, collecting PPE donations and coordinating blood drives. It seems the passing of time doesn't change the dedication of those working in the profession when faced with a health crisis.

After the 1918 epidemic passed, General Hospital periodically was renovated and reconfigured to keep up with patient needs. Demands for larger, more modern facilities eventually led to the construction of Truman Medical Center, Children's Mercy and the School of Medicine. Hospital Hill's early anchor hospital was demolished in stages in the early 1990s.

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Meeting the Gold standard

The School of Medicine's Gold Humanism Honor Society chapter inducted 21 new members Jan. 25. In April, it learned it had been ranked "outstanding" by the national Arnold P. Gold Foundation. The foundation said the chapter's contributions to humanism in health care were a tribute to the school, the chapter's student and faculty members, and the chapter's longtime sponsor, Carole Stanford, M.D. '79.

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