

CALENDAR

Career Boutique

The Career Boutique, a nonprofit retail shop to help women obtain professional clothing at affordable prices, will be holding a Holiday Fashions Fundraiser on the first floor of Jennie Sealy Hospital on Nov. 16-17 and Nov. 29 and Dec. 1. The Career Boutique is currently accepting donations of ladies evening clothing (cocktail and formal). Call ext. 29867 or 28265 for details.

Proceeds of the sale will provide the seed money to open the shop in January 2001.

Flu shots available

The Employee Health Center is currently offering the influenza vaccine to all UTMB employees. The center was able to obtain more vaccine than expected, so rationing will not be necessary. Vaccinations will be administered from 8-10:30 a.m. and from 1-3 p.m. Monday through Friday in the Employee Health Center in Rebecca Sealy Hospital. Satellite clinics and "shots on wheels" will also be available for hospital and clinic staff. Flu vaccinations are free to all employees, retirees and volunteers. For more information, contact Employee Health at ext. 79500.

Lecture series

Dr. John Cidlowski will be the speaker for the Sealy Center for Cancer Cell Biology Distinguished Lecture Series on Thursday, Nov. 9, 4-5 p.m. in the Basic Science Auditorium, Room 212.

Cidlowski is the chief of the Laboratory of Signal Transduction for National Institutes of Health in Chapel Hill, N.C. His lecture will be "Molecular Mechanism for Repression of Apoptosis." The series is co-sponsored by Human Biological Chemistry and Genetics.

History of Medicine meeting

The Chauncey Leake History of Medicine Society will hold a meeting Thursday, Nov. 16, from 5:30-6:30 p.m. in the Rare Book Room (Room 425) of the Moody Medical Library. The program will feature a behind-the-scenes look at the treasures of the Blocker History of Medicine Collections. Anyone interested in the history of medicine or the Blocker Collections are invited to attend. For more information, contact Sarita B. Oertling, at ext. 22397.

Reading program

Volunteers are needed to read to children in UTMB clinic waiting rooms as part of the Reach Out and Read Program. This will help parents to see reading modeled to their children, demonstrate how much children enjoy books and help to entertain the children as they wait for their visit with the health care provider. Volunteers are needed at pediatric clinic locations in Galveston, Texas City, Friendswood and League City.

For more information, please call Chris Turley or Sammie Hester at ext. 29797.

IMPACT

UTMB THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON



SON changes

Dr. Mary Fenton, the dean of the School of Nursing, announced she plans to return to full-time teaching and research after a new dean for the school has been named. **Details in the Nov. 20 Impact**



Inside

Even after record-breaking heat and a rise in utility prices, the Energy Conservation Task Force ends its inaugural year on a positive note—a 10 percent reduction in energy usage. **Page 6**

MESSAGE FROM THE PRESIDENT: SECC

Make it a reality

"Let's open our hearts and wallets and show, again, that our care and concern extend far beyond the UTMB campus."

The people at UTMB always come through when it matters most, and it's been no different with the State Employee Charitable Campaign. Historically, it has always been the final push that has carried us over our goal, and that final push has typically come late in the campaign. It's time now to make that goal a reality.

We've made good progress in the past few days: Our amount pledged is up to nearly \$300,000 and we've had participation from about 10 percent of our employees. As you see, we still have work to do if we're going to make our goals of \$450,000 and participation from 40 percent of our faculty and staff.

We will continue to accept pledges and contributions through Nov. 15, the week before Thanksgiving. Please don't delay. As you look ahead and make plans to celebrate the holiday with your friends and family, think of those less fortunate, and take this opportunity to share some of what you have. We set goals and talk about numbers and percentages, but those are just figures. What is truly important are the good things your dollars make possible: a helping hand to someone who needs it, warm clothes and shelter for the impoverished, a hot meal for a hungry child, a visit for the lonely or lost, hope, a second chance...and so much more. Let's open our hearts and wallets and show, again, that our care and concern extend far beyond the UTMB campus.

If you have any questions or need SECC materials, contact my office at ext. 29870. Remember that you can also see the charities, visit their Web sites and make your gift online at www2.utmb.edu/secc.



Stobo

UTMB passes JCAHO with 'flying colors'

Last month, reviewers from the Joint Commission on Accreditation of Healthcare Organizations visited the UTMB campus to evaluate our hospitals and clinics.

UTMB came through "with flying colors," receiving its three-year accreditation, President John D. Stobo said. The accomplishment is particularly noteworthy this year, because the review process was more comprehensive than in years past.

During the four-day visit, reviewers looked at various aspects of patient care at UTMB, including the rights, assessment and treatment of patients, as well as the quality of patient care.

"You made us proud, and proved again that this institution and its people have what it takes to be the best. Your weeks and months of hard work and preparation have paid off," Stobo said.

The commission is expected to submit its final report in about six to eight weeks.

IMPACT

Impact is the semimonthly newsletter of the University of Texas Medical Branch at Galveston (UTMB). Published by the Office of University Advancement, it is distributed free of charge in support of UTMB's education, patient care and biomedical research objectives.

Vice President for University Advancement
Susan H. Coulter

Executive Director of Public Affairs
Chris Comer

Director of Publications
Mary Havard

Editor
Dave Mathews

Contributing Editors
Joanna Bremer, Tom Curtis, Christian Messa, Cathy C. Nall, John Tyler, Alicia Simmons and Doris White

Art Director
Mark Navarro

Contact us

E-mail: impact.oua@utmb.edu

Phone: Dave Mathews
ext. 28710 (editor)
ext. 22618 (Public Affairs)

Campus mail route: 0802

U.S. Postal address:

UTMB
Office of **OHRP, from page 1**
University
Advancement
301 University Boulevard
Galveston, Texas 77555-0802

Submissions

The deadlines for submissions to be considered for the Calendar, People and Briefs sections of the **Nov. 20 Impact** is **noon, Nov. 14**. Submissions should not be more than 100 words for Briefs or 75 words for People items.

Inclusion of all other articles is determined by the Public Affairs staff. Content is generally scheduled two to four editions in advance.

Items submitted for consideration are subject to editing for style and length.

ON CAMPUS PEOPLE, NEWS AND EVENTS

PEOPLE

Dr. James C. Thompson (Ashbel Smith Professor, Surgery and Physiology and Biophysics) was elected to senior membership in the Institute of Medicine. UTMB President John D. Stobo is the only other institute member from UTMB. The institute's mission is to advance and disseminate scientific knowledge to improve human health. Story in the Nov. 20th *Impact*.

The review committee for the UTMB American Cancer Society Institutional Research Grant announced that two faculty members were selected for the July 2000 round of awards. The primary purpose of this program is to provide seed money to support young investigators who are interested in cancer research. The investigators and projects approved for funding were:

- **Dr. John A. Copland** (Internal Medicine), "Cross talk between PKCs and PPAR gamma."
- **Dr. Xiadong Cheng** (Pharmacology and Toxicology), "Structure and function of cAMP-dependent Protein Kinase Isoforms."

Information regarding the American Cancer Society Institutional Research Grant can be found at <http://www2.utmb.edu/scccb/announcements.asp> or from Brenda Rubio at ext. 71943, e-mail at brubio@utmb.edu.

Dr. Elie D. Al Chaer (Internal Medicine and Anatomy and Neurosciences) received The John C. Liebeskind Early Career Scholar Award at the American Pain Society's annual meeting Nov. 2-5. The award recognizes accomplishment and promise in pain scholarship and is restricted to those who have completed their terminal degree within the last seven years.

EVENTS

Library showcases Galveston artist

Moody Medical Library will present the works of Galveston artist, Donna Cariker during the month of November. Her multimedia works in the exhibit "Diversity" include watercolors, collages, assemblages, ceramics, photography and graphics.

Cariker's university professors told her she needed to choose which medium she liked best, but since she liked them all, she continued to produce her work in a variety of media. She spends her days working as an art director and graphic designer. But in her exhibit pieces, Cariker incorporates the elegant beauty of the Asian culture, the masculine strength of the Southwest, unique designs from Egypt and Africa, and the vivid colors of the Hispanic influence in her art. She also uses "found and recycled" objects, such as items found in the renovation of her 1891 home, to create her contemporary collages and assemblages.

Cariker's works have been shown in Galveston, Houston and the Bay Area. She has received numerous awards, such as first place in the Galveston Harborfest Art Show Contest. Her commissioned works include murals in the Ronald McDonald House and Shriners Burns Hospital in Galveston.

"Diversity" will be on view during regular library hours: Monday-Friday, 7:30 a.m.-midnight; Saturday, 10 a.m.-7 p.m.; and Sunday, noon-midnight.

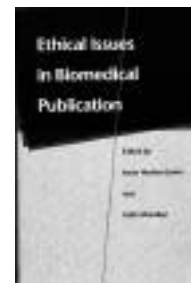
Parking deduction

The Department of Finance, along with Parking Facilities, is happy to announce a pre-tax parking deduction that can be deducted from employees' paychecks. Employees will be able to sign up for the deduction and receive a tax break at the same time.

All you have to do is fill out and return the payroll deduction form located at <http://www2.utmb.edu/auxserv/auxhome.htm> or

REVIEWED

Johns Hopkins University Press recently published *Ethical Issues in Biomedical Publication*, edited by **Drs. Anne Hudson Jones** (Institute for the Medical Humanities) and **Faith McLellan** (IMH graduate and editorial director of Praxis Press in New York City).



The book examines a variety of troublesome issues, including authorship, peer review, repetitive publication, conflict of interest and electronic publishing. Contributors include past or present editors of several medical journals, as well as UTMB researcher **Douglas S. DeWitt** (Anesthesiology).

In the foreword, Dr. Jordan J. Cohen, president of the Association of American Medical Colleges, writes: "Educators, administrators, scientists, editors and students should all welcome this comprehensive new book. Anne Hudson Jones and Faith McLellan have gathered a veritable who's who in the field of publication ethics for biomedical research. All those with a stake in biomedical research will surely want this volume on their bookshelf."

<http://www2.utmb.edu/wcr/FORMS/parking.pdf> or you may visit the parking facilities office in room G24 of the Gail Borden Building.

This option will be available for the pay period of Dec. 9-22 (check dated Dec. 29). The first eligible monthly pay period will be December (check dated Jan. 1, 2001). This payroll deduction will be for the January 2001 parking fee. In order for the parking to be deducted from this check, the deduction form must be turned in by Dec. 12.

Here is how it will work:

- Employee signs up for Parking Deduction (either by filling out the deduction form from the Web site and mailing it to route 0669 or by visiting the Parking Office in Gail Borden). This payroll deduction will continue until the time you terminate your parking agreement.
- Deduction will be taken from the second biweekly or monthly check
- The parking deduction will not be subject to federal withholding or Social Security/Medicare taxes.
- The parking office will update your account accordingly.

For additional information or any questions, please contact Kelly Sotengco at ext. 24786 or Kristen Featherly at ext. 77913.

UTMB Fraud and Abuse Hotline

1 (800) 898-7679.

Your guide to honesty!

To report suspected waste, abuse and fraud.

All calls are strictly confidential and anonymous.

Available 24 hours a day, 365 days a year.

A complex relationship

AIDS model shows HIV doesn't kill white blood cells, they self-destruct

By Alana Mikkelsen

Several years ago, a popular metaphor used to describe how the human immunodeficiency virus, or HIV, causes AIDS went like this: The virus aggressively attacks the body's disease-fighting immune cells, known as CD4 cells, killing and depleting them the way a large open drain sucks water from a kitchen sink.



Cloyd

New evidence from UTMB and the University of Michigan Medical School in Ann Arbor supports a more subtle analogy: That immune cells in HIV-positive people are lost bit by tiny bit, like fluid dripping from a radiator system with a minute pinprick in the hose. What's more, those cells don't disappear because the AIDS virus kills them directly. Instead, they kill themselves.

That theory, proposed in 1997 by UTMB virologist Miles Cloyd and supported by mounting evidence ever since, is one of perhaps a dozen that propose to explain how HIV causes AIDS. While most AIDS theories suggest that HIV kills immune cells directly, Cloyd thinks that the virus interferes with immune cells' normal circulatory patterns, driving the cells to commit suicide.

Increased understanding of the complex relationship between HIV and the immune system is important, because it will help scientists develop more effective treatments for AIDS and suggest new targets for therapeutic drugs. There is no scientific consensus about which AIDS theory is correct, but a recent paper, published in the August 1 issue of the *Journal of AIDS*, contains new computer modeling data that supports and refines Cloyd's theory.

The new data, compiled by University of Michigan scientist Denise Kirschner—a specialist in the mathematical modelling of biological systems—shows how HIV slowly destroys its victims' immune systems by accelerating a normal process called homing, which diverts the CD4 white blood cells from the bloodstream to the lymph system.

"This model indicates that the key to extending survival time for people with AIDS is to minimize the number of CD4 cells exposed to signals in the lymph system which lead to apoptosis, or cell suicide," says Cloyd, a UTMB professor of microbiology and immunology.

Many scientists believe HIV destroys the immune system by attacking white blood cells called CD4 or helper T-cells in the bloodstream. But Kirschner and Cloyd

maintain that HIV's lethal action is much more subtle and indirect.

Their model shows that CD4 cells actually self-destruct in the lymph system. Death comes as a result of exposure to biochemical signals involved in the homing process, which trigger apoptosis or cell suicide.

"Previous HIV models have focused on what happens in the bloodstream, but the real action is in the lymph system," says Kirschner, an assistant professor of microbiology and immunology in the University of Michigan Medical School. "A very small percentage of cells dies from apoptosis on a daily basis, but over a seven-year period, it adds up to almost 100 percent."

Results from the computer model are consistent with what happens in people, according to Cloyd. Data from clinical studies with HIV-infected patients show that the population of uninfected CD4 cells in their blood falls to 15 percent of normal during a seven-year period.

"When the HIV virus binds to a CD4 cell, the process activates a receptor molecule called L-selectin on the cell membrane, which signals the CD4 cell to home to the lymph system," Kirschner explains. "If we could block that signal, we could preserve healthy CD4 cells."

The implication of Cloyd's theory is profound: If he is right, instead of only creating more drugs that stop the virus from reproducing and spreading, scientists may also want to focus their efforts on finding pharmaceuticals that block the signals HIV sends to the cells.

"Miles Cloyd's work has brought the concept of lymphocyte circulation, which was a hot topic in the 1970s, back into the scientific limelight," she says. "There could be applications to many other diseases."

In future research, Kirschner plans to model the role of co-receptors involved in HIV binding to CD4 cells. The virulence of infection varies depending on the co-receptor chosen by the virus. She also plans to explore the immune response to HIV, and how different types of immune responses, known as TH1 or TH2 responses, determine disease progression.

When HIV binds to a CD4 cell, one of three things can happen, according to Kirschner. First, the cell can be actively infected and turn into a cellular factory that produces more virus. Second, the immune cell can be latently infected; the virus gets inside the cell nucleus, but remains dormant. Third, and most common, the CD4 cell can be abortively infected. In this case, the virus enters the cell cytoplasm, but doesn't enter the nucleus.



John and Willie Mae Parker work with agent Linda Bassett to subscribe to the new program.

UTMB HealthCare Systems offers Medicare supplemental insurance plan

The lack of accessible and affordable health care coverage for senior citizens in Galveston County has become a major issue. On Nov. 1, UTMB HealthCare Systems gave residents another option—Medicare supplemental insurance coverage.

On Nov. 1, the first day of enrollment, 23 residents subscribed to the new program. More than half of the new enrollees came from a Medicare HMO.

ChoiceONE Select is open to all seniors in Galveston County, regardless of medical history or current condition. Plan A subscribers receive basic benefits coverage. Plan H subscribers receive basic coverage and such extended benefits as skilled nursing coinsurance, Medicare part A deductible, foreign travel emergency and basic prescription drug coverage. Monthly premiums run \$65 for plan A and \$95 for plan H.

Call UTMB HealthCare Systems at (409) 797-8064.

Researchers discuss research, theories about brain injuries

By Christian Messa

Leading researchers, physicians and rehabilitation experts from across the country converged on the Moody Gardens Hotel and Conference Center Oct. 20-22 to discuss new research and theories related to brain injury as part of the inaugural Galveston Brain Injury Conference.

Co-sponsored by the UTMB and the Transitional Learning Center (TLC), the invitational conference served as a forum for brain injury experts to identify priorities for traumatic brain injury research, develop strategies for conducting the research and determine if there are any obstacles for achieving recommendations from the 1998 National Institutes of Health (NIH) Consensus Conference.

Dr. Charles Christiansen, dean of the UTMB School of Allied Health Sciences and one of the event organizers, said experts at the Galveston conference concluded that brain injury outcome studies should use measures that are more appropriately related to quality of life issues. They deter-

See BRAIN INJURY on page 4

UTMB names pediatrics chairman, vaccine center director

By John Tyler

Dr. Lawrence R. Stanberry, renowned pediatrician and researcher, joined UTMB in October as the fifth chairman of its Department of Pediatrics, as well as the director of the new Sealy Center for Vaccine Development.



Stanberry

Stanberry comes to UTMB from the University of Cincinnati, where he served as a full professor since 1991 and director of the Division of Infectious Diseases at Children's Hospital Medical Center since 1995.

"Dr. Stanberry brings well-proven leadership skills as well as considerable experience in both basic and clinical research to the Department of Pediatrics," said Dr. Stanley M. Lemon, dean of UTMB's School of Medicine. "I look forward to working with him in the continuing development of the department."

Under his watch, Stanberry plans to make the training of new pediatricians the first priority. "The number one mission of the department will be education," he said. "This is a medical school, and it's our job, first and foremost, to teach. We also plan to attract the best students into our program.

"The way we are going to do it is to identify and recruit those physician educators who will help us accentuate the strong programs we have here now," he said. "I'm very pleased by the quality of the faculty here and look forward

to building upon our many strengths at UTMB."

President John D. Stobo said, "Dr. Stanberry not only brings leadership to pediatrics but also strengths in infectious diseases and vaccine development which complement existing programs. His appointment is consistent with our commitment to build on our strengths."

According to Stanberry, UTMB's Department of Pediatrics has a "litany of assets." He called its neonatology program "a jewel" and lauded the department for its strong presence in outpatient pediatrics. He said its strengths include a unique community-based pediatrics program, considerable talent in subspecialty areas and hospital-based pediatrics, and cutting-edge efforts in numerous areas, including telemedicine.

One of his highest priorities will be the modernization and renovation of the Children's Hospital. "I think for both patient care and teaching purposes we need as modern a facility as we can have," he said. Stanberry said plans are to size the building for the number of patients expected to visit the hospital as the pediatrics program grows, as well as building rooms for family members wanting to spend the night with loved ones.

As head of the university's Sealy Center for Vaccine Development, Stanberry will capitalize on the areas UTMB has become known for around the world, such as immunology, infectious and tropical diseases, and microbiology. "UTMB has an international reputation for work in those areas," he said. "When people around the world talk about where cutting-edge research is being done in those

fields, UTMB is one of the places they name.

"We will take that talent and knowledge here to develop products that are going to be important in preventing diseases in children and adults," said Stanberry, who is widely recognized for his research on sexually transmitted diseases. "And, we will develop therapeutic vaccines for the treatment of chronic illnesses, whether it's herpes, hepatitis or HIV."

The author of more than 70 peer-reviewed journal articles and 30 chapters in books, Stanberry comes to UTMB as a well-respected authority in the areas of vaccines and infections. He recently led the lead study of SmithKline Beecham PLC in developing a vaccine to lower the risk of genital herpes.

Having grown up in Dallas, Stanberry said he is excited to once again be back in the Lone Star State, but specifically, at UTMB. "It has such a wonderful history," he said. "The heritage of this place is terrific, and it goes way back. That is something else we can build upon. We have a grass roots of alumni out there that is very proud of what this school has accomplished.

"You can just look at them and see we all have many reasons to be proud," he said. "There are a lot of outstanding physicians who went to school here."

Stanberry is joined in Galveston by his wife, Elizabeth, and Martin, his 14-year-old son. Lindsey, Stanberry's 19-year-old daughter, is studying journalism at Boston University.

Brain injury, from page 3

mined that doctors and scientists need to improve the collection and dissemination of patient data among one another. Those at the conference also pointed out the need for better strategies to educate health care professionals about epidemiology, treatment and consequences of brain injury. These recommendations will be distributed to the research and practice communities.

Each year, approximately 750,000 Americans suffer strokes, and traumatic brain injuries occur every 15 seconds.

Christiansen said he was impressed by the results of the conference. "We were proud to assemble such a distinguished group and feel that the conference provided an excellent beginning to future conferences. Over the years, Galveston has been the home of several scientists and practitioners who have made significant contributions to brain injury research, and we believe the conference will help us build on that tradition."

Allan Bergman, executive director of the Brain Injury Association, based in Arlington, Va., said the Galveston con-

ference, currently the only U.S. conference devoted exclusively to brain injury, will serve as an important building block for furthering brain injury research and treatment.

"It (the NIH Consensus Conference) gave us a map of where the field is now and posed many questions," Bergman said. "What we're doing now is to seriously add to that road map and begin answering the questions and, of course, add a few more questions of our own."

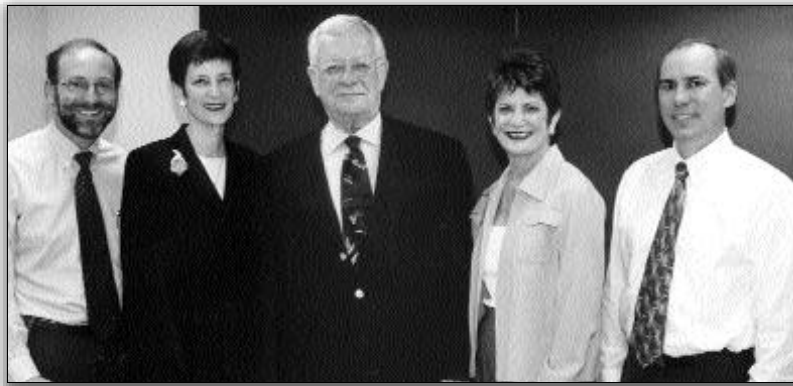
During the conference, UTMB officials and brain injury experts also recognized Galveston philanthropist Robert L. Moody for his personal crusade to advance brain injury research by naming a prize after him. Candidates for the Robert L. Moody Prize for Distinguished Initiatives in Brain Injury Research and Rehabilitation will be selected based on their contributions toward advancing clinical research or practice in the fields of traumatic brain and spinal cord injury, stroke or disabilities of the nervous system. Future recipients of the award, which will be granted annually at the conference beginning in 2001, will receive a \$10,000 prize.

Moody has actively supported brain injury research since his son, Russell, was seriously injured in a car accident 20

years ago. Upon learning there were no post-acute rehabilitation programs in Texas, Moody encouraged the establishment of the TLC in Galveston in 1982. A clinical partner with UTMB faculty, TLC is internationally known for innovative rehabilitation and community re-entry programs that enable patients to relearn daily living skills. Moody encourages scientific investigation through his own financial contributions and those of The Moody Endowment and The Moody Foundation. Moody and the endowment also established a distinguished chair in cognitive rehabilitation at UTMB in the younger Moody's name.

Nominations for the Moody Prize will be solicited through professional journals and organization bulletins and reviewed by a jury of internationally renowned scientists and practitioners in the fields of neuroscience and brain injury rehabilitation. Nominees may include anyone who has made distinguished contributions to brain injury awareness, rehabilitation or clinical research—whether lay person or professional. After reviewing the nominations, jurors will submit their recommendations to a board of governors for final approval.

PHILANTHROPY



Blocker scholars contribution

The first contribution to the UTMB Blocker Scholars Initiative came from UTMB's second president, William C. Levin, and his daughters, Lynn Cantini and Gerry Hornstein, and their husbands, Armin Cantini and Gene Hornstein (who comprise the Levin Family Foundation). The initiative is UTMB's effort to raise \$5 million in support of the integrated M.D./Ph.D. program, named in honor of Dr. Truman Graves Blocker Jr., UTMB's first president. A conference room in the Truman Graves Blocker, Jr. Medical Research Building, redesignated on Oct. 13 was named in recognition of their gift. Photographed in the renamed William C. and Edna S. Levin Conference Room are, from left, Steven A. Weinman, M.D./Ph.D., director of the combined degree program, Gerry Hornstein, Dr. Levin, Lynn Cantini and Alan P. Fields, Ph.D., director of the Sealy Center for Cancer Cell Biology, where the conference room is located.

Professorship established at graduate school

By Christian Messa

Exemplary biomedical sciences faculty members at UTMB will be rewarded for their teaching excellence, dedication and hard work with a new professorship recently established by the Dr. Leon Bromberg Charitable Trust Fund.

The endowed position, the Dr. Leon Bromberg Professorship for Excellence in Teaching, will be presented each academic year in honor of Dr. Truman G. Blocker Jr., and granted to an outstanding faculty member of the Graduate School of Biomedical Sciences. A review board composed of fellow faculty members will announce the first recipient during the 2001 academic year.

The Dr. Leon Bromberg Charitable Trust Fund will provide \$100,000 to establish the professorship in recognition of Bromberg and to honor Blocker, the first man to hold the title of president at UTMB. The professorship is the second endowed position created by the Galveston foundation at UTMB, the first being a professorship in internal medicine.

In addition, the Bromberg Charitable Trust Fund has funded the Bromberg Scholars Program, which offers Ball High School students full science credit for independent biomedical research while allowing UTMB graduate students the opportunity to mentor and instruct them.

UTMB officials will further recognize the trust's commitment to the professorship by naming a laboratory after Bromberg in the Medical Research Building, which was rededicated the Truman Graves Blocker Jr. Medical Research Building on Oct. 13.

"On behalf of the Graduate School of Biomedical Sciences,

I am deeply grateful to the Dr. Leon Bromberg Charitable Trust Fund for establishing the Dr. Leon Bromberg Professorship for Excellence in Teaching," said Dr. Cary Cooper, dean of the graduate school. "This endowed professorship, given in honor of Truman Graves Blocker Jr., M.D., recognizes a remarkable UTMB leader who greatly valued teaching. This gift by the trust allows us to recognize formally our excellent teachers. It represents great vision and a wonderful investment in our ongoing effort to train the next generation of biomedical scientists."

Charles G. Dibrell Jr., chairman and trustee of the Bromberg Charitable Trust Fund, said he felt honored to recognize Blocker through the professorship. Dibrell recalled his long-time friend's dedication to the community.

"While I was serving as president of the board of directors of Galveston Junior College, a vacancy occurred on the board. I suggested that Dr. Blocker be asked to fill that vacancy. He had just completed his tenure as UTMB president, and a few of my fellow board members doubted he would agree to serving on such a small board.

"I approached Dr. Blocker regarding the board vacancy, and he wholeheartedly accepted. He agreed to serve on that board with the same enthusiasm he had demonstrated while serving as president of UTMB. He continued to serve on the Galveston Junior College board until his death in 1984."

Blocker played a leading role in the history of UTMB for almost 50 years. During his tenure as president from 1964 to 1974, UTMB experienced enormous growth, both in building construction and new programs that included the Institute for the Medical Humanities, the School of Allied Health Sciences and the Marine Biomedical Institute. A

1933 UTMB graduate, he was an internationally known authority in the field of burn therapy and plastic surgery. He served as a brigadier general in the U.S. Army as well as chairman of the Galveston College Board of Regents and a trustee of Austin College in Sherman.

Born in 1909 in West Point, Miss., Blocker served as a military surgeon in the U.S. Army during and after World War II. When he returned to UTMB as a professor at the end of the war, Blocker established the Special Surgical Unit to help treat a large number of World War II military casualties and the Division of Plastic and Reconstructive Surgery, of which he was named chief.

The Dr. Leon Bromberg Charitable Trust Fund, with its primary mission of supporting medical and educational institutions, was created by Bromberg's will. It has been a significant contributor to UTMB and the Galveston College Foundation Universal Access program.

Bromberg served as assistant professor of clinical medicine at UTMB from 1955 until 1969. Born on the island in 1899, he graduated from Ball High School with honors in 1916 and received his bachelor's degree with honors from the Rice Institute in Houston in 1920. Bromberg attended Vanderbilt University's College of Medicine in Nashville, Tenn., where he earned his Doctor of Medicine degree in 1924. He developed a distinguished career as a teacher and physician in St. Louis, Mo., and as a captain in the medical corps of the U.S. Navy during World War II. After the war, he returned to St. Louis to continue his practice and teaching before moving back to Galveston in 1955. Bromberg died in 1985.

SUPPORT GROUPS

ALZHEIMER'S SUPPORT GROUPS

- **When:** Second Tuesday. Noon–1 p.m. (Nov. 14).
- **Where:** Trinity Episcopal Church, 22nd and Winnie.
- **Contact:** Ramona B. Mason, (409) 948-0368 or (409) 948-8862.
- **When:** Fourth Monday. 7:30–9 p.m. (Nov. 27).
- **Where:** St. John West Classroom at St. John Hospital in the Nassau Bay area.
- **Contact:** Nancy Malley, (218) 212-5894 or St. John Hospital, (218) 333-5503.

BEREAVEMENT SUPPORT GROUP

- **Purpose:** For family and friends who are coping with the death of a loved one. The group offers emotional support and an opportunity to talk about the dying process.
- **When:** Second and fourth Thursdays. 5:30–6:30 p.m. (Nov. 14, Nov. 28).
- **Where:** Primary Care Pavilion, Entrance B, Suite 124.
- **Contact:** Sandra Linton, ext. 20054, or Ramona B. Mason, (409) 948-0368 or (409) 948-8862.

CARING FOR THE OLDER ADULT SUPPORT GROUP

- **Purpose:** To maintain emotional and physical well-being through support and access to resources.
- **When:** Second Tuesday. 5:30–6:30 p.m. (Nov. 14).
- **Where:** Primary Care Pavilion, Entrance B, Suite 124.
- **Contact:** Sandra Linton, ext. 20054, or Lisa Bellard, ext. 23412.

DIALOGUE CANCER SUPPORT GROUP

- **Purpose:** Support for cancer patients, their families and friends.
- **When:** First Tuesday. 9–10:30 a.m., (Dec. 5). Third Thursday. 2–3:30 p.m. (Nov. 16).
- **Where:** 1.300 McCullough. (Radiation Oncology)
- **Contact:** Chaplain Karen Alcott, ext. 73910.

EATING DISORDER SUPPORT GROUP

- **Purpose:** A weekly confidential support group for people who have eating disorders.
- **When:** Tuesdays for 12 weeks. Began Oct. 3. Noon–1 p.m.
- **Where:** Bethel Hall Conference Room.
- **Contact:** Employee Assistance Program, ext. 22485, or fax ext. 74289. E-mail: Annette Martinez at ahmartin@utmb.edu.

Task force zaps energy use


Cathy C. Nall

On Sept. 1, 1999, a small band of environmentally conscious individuals known as the Energy Conservation Task Force (ECTF) began its 365-day mission—reduce campus energy consumption 12 percent by Aug. 31, 2000.

Throughout the year, this group of dedicated employees fought record-breaking heat, rising gas prices and a steady increase in water and sewer prices to save energy. Despite these obstacles, the crew came through in the end with a 10 percent energy reduction, formation of a 96-member Power Team and a campus full of changing attitudes.

"Every day I see evidence of people on campus conserving energy and changing their behavior," said Dean Mary Fenton of the

BY THE NUMBERS



The overall savings of more than 9 million kilowatts of electricity resulted in 13.6 million pounds of carbon dioxide from being released into the air, a feat equal to planting 1,861 acres of trees, or removing 1,358 cars from the road.

School of Nursing and one of the task force co-chairs. "I don't think that any of us realized when we began this process how far we could go." Fenton's co-chair is Michael Shriner, steward of facilities operations and maintenance (FOAM) for UTMB.

The project started with the basics: save energy, save money and save the environment. The philosophy was also elementary: "Do things more efficiently and use energy only when it is needed." Once the ECTF was created, it launched three initiatives: Power Teams, Strategic Energy Partners and Utilities Upgrade Projects.

Power Teams were formed representing seven of the 100 campus buildings. This number eventually grew to the current 19 buildings and 96 people. Team members are building occupants who act as local champions for energy conservation. They work tirelessly to gather and share energy-saving information with staff and students, look for opportunities to reduce energy consumption, and keep the notion of energy conservation alive and well within the buildings where we work.

"The improvement in our building is outstanding. The faculty, staff and students are all involved in the project," said Martha Minter, Power Team member for the Allied Health and Nursing Building. "The momentum is building, and the potential is there," Minter said of the move to decrease the campus' energy usage. "It can happen."

The Strategic Energy Partners are a group of representatives from departments with campus-wide opportunities for energy

reduction. The Campus Police are a good example. In the last six months, as officers made normal rounds, they turned off lights in spaces with unlocked doors. Overall, the officers extinguished more than 2,600 lights and saved approximately 91,000 kilowatt-hours of electricity in the process. Environmental Services also helps save significant energy dollars by turning off the lights in empty offices after cleaning the rooms.

Lighting retrofits, power factor corrections (adding components to the electrical systems to "clean up" the power used), and motion and moisture sensors are just some of the tools being used throughout campus for the Utilities Upgrade Projects, the third ECTF initiative. Buildings included in the upgrade projects were selected based on the level of impact the improvements would make on overall energy consumption. More than half of the 100 buildings on campus have been or will be involved in the projects.

Although somewhat short of the 12 percent target, the actual energy reduction was high for the ECTF's first year. "The best unit of energy is the one we never purchase," said Gene Curry, ECTF committee member. "The concentration should be on the reduction in energy consumption, not a dollar amount. Our goal this year is an additional five percent reduction in usage," he said. "We will do this by creating more Power Teams and by continuing our efforts to reinforce behavioral changes."

You, too, can help. "If you just treat this place like you do your own home, it will make a difference," said Charles Hayden, Power Team member for the Allied Health and Nursing Building. "Just turn the lights out. In the long run, it's going to benefit everyone."

In addition to lights, turn off computers, copy machines and other equipment when you leave for the day or when it's not in use. Keep exterior doors shut, so cooled or heated air stays in. Dress for comfort to avoid the need for space heaters or fans. Conserve water by reporting leaky faucets and use deionized water sparingly. If you have questions, contact FOAM at ext. 21586.

Remember, you have the power to make a difference. Call POWER (76937) to offer energy-saving suggestions or to volunteer for a Power Team in your building. You can also get the latest information from the web site accessed through an icon on the UTMB home page.

Operating via remote control

By Tom Curtis

Surgeons at Texas' oldest academic medical center are the first in the Southwest to use a revolutionary new technology that is expected to transform the way many surgical operations are performed in the 21st century.

As of October 17, five operations employing the new computer-enhanced robotic technology, called the da Vinci Surgical System, have been performed at UTMB, according to Dr. Courtney M. Townsend Jr., professor and chair of surgery.

To date, two operations for gallbladder disease and three operations for stomach disease have been completed at UTMB using this form of "minimally invasive surgery," in which a surgeon seated at a console looks down at a three-dimensional view of the organs on which he or she is working. From the console, the surgeon controls a patient-side cart with three robotic arms that position and maneuver endoscopic instruments encased in tubes called cannulas that the surgeon inserts into the patient through small incisions. Via a foot pedal, the surgeon also controls the tiny camera that shows the site of the operation. The console from which the surgeon works is in the operating room but is located perhaps 16 feet away from the operating table. Others in the room, including nurses, surgical technicians and a bedside surgeon, observe the procedure on a video monitor and assist the surgeon at the console with instrument changes.

The \$1 million-per-unit da Vinci Surgical System now being used at UTMB and a second system arriving in mid-November for training purposes both were bought with grants from the Sealy and Smith Foundation of Galveston. "The foundation's generosity is priceless," Townsend said of the contribution. "It's just another example among many of its commitment to excellence at UTMB."

The U.S. Food and Drug Administration (FDA) cleared the new da Vinci Surgical System for laparoscopic procedures on July 11, 2000. Intuitive Surgical Inc. in Mountain View, Calif., manufactures the system. Townsend and fellow surgeon Dr. Guillermo Gomez says it offers substantial advantages in improved accuracy and precision over conventional laparoscopic surgery, currently the "gold standard" for minimally invasive surgery. Laparoscopy also uses instruments encased in long, narrow cannulas that are inserted into patients through small incisions. It "really took off in the 1990s because it permitted much smaller incisions causing less inflammatory reaction, shorter recovery times and less pain to the patients," Townsend says.

But the new system offers two substantial advantages, notes Gomez, who performed the first two operations using it by successfully removing a diseased gall bladder and a non-cancerous tumor inside a patient's stomach wall.

The first major advance, Gomez says, is that the new system allows the surgeon much greater manual dexterity. The surgeon's hands are linked by motion sensors to wrist-like tips of surgical instruments held in the robotic arms. The system allows surgeons manipulating the instruments—scissors, forceps, needle holders, cauterizing tools and the like—to experience a full range of motion, allowing their instruments to mimic the natural movement of the hands and wrists—while eliminating tremors. "It's much easier to suture," or sew up, the internal wound, Gomez says. "It's like using your hands." Townsend says conventional laparoscopic systems, in contrast, offer a more awkward and limited range of motion—merely allowing the surgeon to move the instruments up and down, side to side and in and out.

The second major advantage of the new system, Gomez says, is that surgeons "can work using real, magnified three-dimensional optical systems." One of the major limitations of laparoscopic surgery, he points out, "is that the camera offers only a two-dimensional view on a TV screen." In a further advance over traditional laparoscopy, Townsend points out, the new da Vinci optical system allows "the surgeon to look down at the operating field," thus giving "a much more natural feel for the surgeon" than looking up or over at a TV screen.

The new system uses technology developed with financial help from the same low-profile federal agency that subsidized development of the Internet—the Defense Advanced Research Projects Agency, or DARPA, Townsend says. DARPA was interested in promoting the technology, he continues, because it saw it as a way for surgeons at a distant MASH unit (Mobile Advance Surgical Hospital) to operate in wartime on patients at or near the battlefield. That remote application hasn't yet been realized, however, because currently there are time delays in transmitting directions from the surgeons' hands to remote sites.

Prior to using the system at UTMB, a six-person team including Townsend, Gomez and fellow surgeon Dr. Kristene Gugliuzza, as well as registered nurses Christy Bezaia and Jennifer Askew and surgical technician Eduardo Hinojosa, flew to Intuitive Surgical's California headquarters for intensive training.

UTMB is one of five designated training sites in the United States for the da Vinci System and one of just two sites in the country teaching surgeons from more than one surgical discipline. In addition to training general surgeons, others to be trained on the computer-enhanced robotic system will include surgeons from obstetrics and gynecology, urology and, ultimately, cardiothoracic surgery. (However, the FDA has not yet cleared the system for heart and chest surgery.)

UTMB surgeons are the first in the Southwest to practice computer-enhanced robotic surgery; this revolutionary, minimally invasive technique promises less pain and swifter recovery



Just as Scientific American featured the hottest new innovation in surgery on the cover of its October 2000 issue, UTMB took delivery of the first of two of the very same computer-enhanced robotic surgery systems the magazine discussed. Although the writer focused on the system's advantages for operating on a beating heart, the U.S. Food and Drug Administration has yet to clear the device for that purpose in this country.

UTMB IN THE NEWS

Newspaper

Dr. Claire Hulsebosch, a UTMB professor of anatomy and neurosciences, was featured in the Sept. 7 **Houston Chronicle** about her research to find a cure for spinal cord injury.

Clinical trials will begin in October at UTMB to test a pocket-size nerve stimulator being developed that could save more than 25,000 American diabetics from amputations each year (**Houston Chronicle, Galveston County Daily News, Galveston Fax, KIKK-FM Houston**, all on Sept. 26).

More than 200 professional and amateur historians of medicine from 30 countries are expected to attend the upcoming 37th International Conference on the History of Medicine in Galveston. It will be the first time the distinguished organization has held its meeting in the United States. **Dr. Chester Burns**, a professor at UTMB's Institute for the Medical Humanities, is the conference organizer (**Galveston County Daily News**, Sept. 10).

UTMB surgeons **Dr. Eric Walser, Dr. Glenn Hunter, Dr. Lois Killewich** and **Dr. Barry**

Uretsky discuss a new method of repairing abdominal aortic aneurysms now available at UTMB that can have patients out of the hospital the day after surgery and back to work in less than a week (**Houston Chronicle**, Sept. 20).

Television

Dr. William Zinser, a UTMB pediatric neurologist, was interviewed on **KTRK-Houston** (Channel 13) about how television shows, computers and video games can trigger epileptic seizures in susceptible children (Sept. 12).

Association magazines

An article on the \$6.5 million National Institute on Aging grant to UTMB to create a Claude D. Pepper Older Americans Independence Center, one of only 10 in the United States, appeared in the September edition of **Orthopedics Today**. **Dr. James Goodwin**, co-director of the new center and director of UTMB's existing Sealy Center on Aging, said, "We know people lose muscle mass as they age, and we've always known that's a problem. But there's been very little research into what causes muscle wasting or how to fix it. We plan to fill that knowledge gap."

The University of Texas at Brownsville and Texas Southmost College

The Fall 2000 edition of the UT-Brownsville/TSC newsletter noted that five high school students from the Rio Grande Valley selected for the Early Medical School Acceptance Program spent the summer at UTMB. The students attended UTMB for six weeks, attending classes and followed mentor

students on clinical rounds. By encouraging students from the Rio Grande Valley, the program helps UTMB fulfill its goal of training doctors for historically underserved areas.

Program Motivates Future UTB/TSC Medical Students

A writing assignment to medical school through UTMB's Early Medical School Acceptance Program is a great incentive for students. "It's the ability to accept the challenge," says Dr. James Goodwin, UTMB's director of the program.

Through the Early Medical School Acceptance Program, selected students spend six weeks at The University of Texas Medical Branch at Galveston, attending classes and following mentor students on clinical rounds. The goal is to help the students fully grasp the scope of their medical education.

Students who are selected for the program spend the summer at UTMB for six weeks, attending classes and following mentor

students on clinical rounds. By encouraging students from the Rio Grande Valley, the program helps UTMB fulfill its goal of training doctors for historically underserved areas.



On the campus of The University of Texas Medical Branch at Galveston are (right to left) students of the Early Medical School Acceptance Program.

IMPACT

The University of Texas Medical Branch
Office of University Advancement
301 University Boulevard
Galveston, Texas 77555-0802
Telephone (409) 772-2618

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