# Alumni Association of the College of Medicine State University of New York Downstate Medical Center



## Make A Difference



Leaving a legacy to the Alumni Association speaks to your belief in providing an affordable, excellent medical education for Downstate students. Bequest gifts have been a significant source of support for many student programs such as research fellowships and tuition scholarships. Alumni make planned gifts as a way of "giving back" and to allow others to have the same opportunities that they were afforded.

Legacies can be provided in many ways:

- Including the Alumni Association-College of Medicine in your will;
- Making a life income gift naming the Alumni Association-College of Medicine, SUNY Downstate as the remainderman;
- Name the Alumni Association-College of Medicine, SUNY Downstate as the beneficiary of a bank account; insurance policy or retirement account.

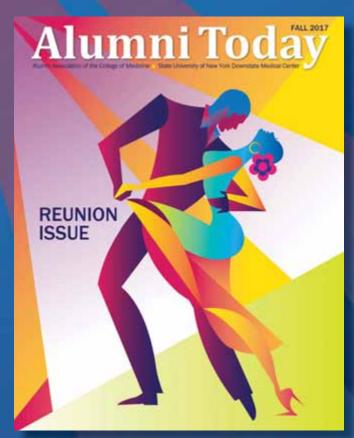
We have the opportunity to show our gratitude to those who came before us and help build a legacy for the future. The need has never been greater and the opportunity more fulfilling. We encourage you to support the Alumni Association as we grow in the upcoming millennium.

We recommend that you consult with your tax advisor when making these kind of provisions to discuss which program is most meaningful for you.

Please contact Eric Shoen Executive Director Phone: 718-270-2075

E-mail: alumni@downstate.edu

# CONTENTS Reunion Issue 2017



- 4 Alumni Association President Greeting
- 5 Editor's Greeting
- 6 Appointment of President Wayne J. Riley
- 8 Presidential Address to Alumni

#### **Scientific Presentations**

- From NFL to the Battlefield by Daniel Perl, MD '67
- 13 Immunity to Lyme Arthritis by Martin Kafina, MD '82
- 16 The Epidemic of Non-Medical Use of Prescription Opioids by Byron Yaster, MD '77
- 19 Alumni Fund
- **20** Award Recipients
- 22 Alumni Reunion



#### **Welcome Alumni**

- 26 The World Within Us by Constance Shames, MD '63 - Editor
- 27 Intermittent Fasting Marla Block Mendelson, MBA, CFA
- 29 Grain Free...No More Wheat Belly Patricia Ryan, MD '79
- 30 Mediterranean Diet
- 31 Nutrition Jack Forrest, MD '66
- 32 AOA Alpha Omega Alpha Ralph Snyderman, MD '65
- 35 Letters of Thanks from Students
- **37** Class Notes
- 48 In Memoriam and Remembrances
- **57** Lifetime Membership Society



#### ALUMNI PRESIDENT'S GREETING

ear Fellow Alumni,

This past May marked the 50th anniversary of my graduation from Downstate! (How did 50 years go by so quickly?). My classmates and I celebrated at Alumni Reunion weekend last May where the highlights included a spirited scientific session, a warm welcome by Wayne J Riley, our new SUNY Downstate Medical Center President, and a lively dinner/dance. Throughout, I was impressed by the affection and gratitude

expressed by our alumni for Downstate. Many had directly benefitted from the Alumni Association; I myself had received financial support as a student.

At Downstate's graduation ceremony at Carnegie Hall a few days later, I welcomed our newest alumni, the Class of 2017. I reminded them that the Alumni Association had been active behind the scenes on their behalf, providing support for scholarships, research projects, electives, white coat ceremony, the Brooklyn Free Clinic, and much more. I told them that my own appreciation of Downstate has only intensified with time.

You too, can show your appreciation to Downstate. Pay your annual dues or become a lifetime member of the Alumni Association. When you are able, make contributions that will help us do even more for our students and that may have special meaning to you (I found a meaningful way of giving by creating a student fund in memory of my closest friend and classmate.)

Stay in touch. Tell us about your special achievements and honors. Be sure we have your email address so we can send you our newsletter. Contact us on Facebook or Twitter. Come to our annual reunions in May; the next one will be held May 4-6th, 2018. Mark your calendars! I look forward to greeting you there.

Suzanne S Mirra, MD '67

President, Alumni Association

#### EDITOR'S GREETING

elcome to the reunion issue. We had an outstanding lecture series at the morning session and it was a pleasure to hear our colleagues present their research. We should be proud of our fellow alumni and of our school. The evening dinner dance was a time of meet and greet and renewal of friendships. The enthusiasm of the 50 year class was evident as they hugged one another and danced and exhibited overall excitement.



Historically our mission as alumni of Downstate is to follow 3 mandates: these include providing scholarship aid to our medical students, fostering education and hosting reunions. As one reviews the day we did a great job of all three this year!

It is so important that we continue these traditions and to fund these vital functions and so many more. Please review the grant listing on page 19 and note the activities listed. We also receive a great many thank you notes from our students for providing them with scholarships and assistance to many student activities such as The White Coat Ceremony, travel to present their research, Health Care in Developing nations, AOA lecture, match day and graduation activities and many more.

I hope you will be inspired to join us by sending in dues, donations and attendance at our events. Please be with us as we strive to continue to be successful in our missions.

I wish you a healthy and happy year ahead,

Constance Shames, MD '63

Editor, Alumni Today

# SUNY Board of Trustees Appoints Dr. Wayne J. Riley as President of Downstate Medical Center

Reprinted from SUNY Press Release on www.suny.edu on January 24, 2017

Albany – The State University of New York Board of Trustees today appointed Dr. Wayne J. Riley as president of SUNY Downstate Medical Center. Dr. Riley is currently a clinical professor of Medicine and adjunct professor of Health Policy at the Vanderbilt University School of Medicine.

In addition to serving as the president of SUNY Downstate, Dr. Riley will hold two faculty appointments – professor of Internal Medicine in the College of Medicine and professor of Health Policy and Management in the School of Public Health – both with tenure. His appointment is effective April 3, 2017, at an annual State salary of \$500,000 and a campus foundation salary of \$175,000.

"Dr. Riley's impressive credentials in medicine and academia make him ideally suited to serve the needs of Downstate Medical Center, one of the largest employers in Brooklyn and a world-class academic medical center for our future practitioners," said SUNY Board of Trustees Chairman H. Carl McCall. "We couldn't be more pleased to welcome him to SUNY, and we look forward to our work together."

"Dr. Riley's impressive credentials in medicine and academia make him ideally suited to serve the needs of Downstate Medical Center."

"Dr. Riley is a respected leader well-versed in healthcare management and policy; he is an experienced educator; and he has vast private and public sector experience – all qualities that will benefit the students, faculty, and staff of Downstate Medical Center," said SUNY Chancellor Nancy L. Zimpher. "I have every confidence that Dr. Riley is the right person to lead the campus forward."

"I am humbled, honored, and thrilled to have been appointed to serve the students, faculty, staff, and alumni of SUNY Downstate Medical Center and the greater Brooklyn and New York City communities," said Dr. Riley. "I look forward with great anticipation to working with the Chancellor, the SUNY Board of Trustees, and the Downstate campus community to grow, enhance and build upon its many successes while also positioning it strategically to meet the many challenges of this unprecedented time of change in healthcare and health professions education. I am most grateful for this opportunity to serve."

#### **About Dr. Riley**

Dr. Riley is immediate past president and president emeritus of the American College of Physicians. An academic primary care general internist, he has 25 years of progressively increasing senior level management, policy, and leadership experiences in academic medicine, patient care, research administration, academic health center administration, health care management, health policy, biotechnology, the corporate sector, government service, advocacy, and organized medicine.

Prior to joining Vanderbilt University, he was the 10th president, chief executive officer, and professor of Medicine at Meharry Medical College. He began his career at Baylor College of Medicine, where he completed residency training in internal medicine and rose from instructor of medicine to a corporate officer and member of Baylor's senior management team as the vice president and vice dean for Health Affairs and Governmental Relations, and associate professor of Internal Medicine. Prior to pursuing a career in medicine, he served in three capacities in the Office of the Mayor, City of New Orleans, rising to executive assistant to the mayor for Intergovernmental Relations.

He is an elected member of the prestigious National Academy of Medicine of the National Academy of Sciences where he serves as chair, Administration of Health Services, Educa-





Standing left to right are Luther Clark, new Downstate Medical Center president Dr. Wayne Riley, SUNY Board Chairman H. Carl McCall, and Dr. Kirkpatrick Cohall.

tion and Research, master of the American College of Physicians, and as a member and secretary treasurer of the Society of Medical Administrators, the American Clinical and Climatological Association, and the Sullivan Alliance to Diversify the Health Professions. He is the recipient of numerous awards and honors including: election to Alpha Omega Alpha Honor Medical Society, the Arnold P. Gold Medical Humanism Honor Society, the Delta Omega Public Health Honor Society and the SUNY Downstate Ailanthous Award for Outstanding Public Health Leadership. He is the recipient of two honorary degrees from SUNY Downstate Medical Center (D.H.L.) and the Tuskegee University (D.Sc).

Dr. Riley earned a Bachelor of Arts degree in anthropology with a concentration in Medical Anthropology from Yale University, a Master of Public Health degree in health systems management from the Tulane University School of Public Health and Tropical Medicine, a Master's in Business Administration from Rice University, and a Doctor of Medicine degree from the Morehouse School of Medicine.

#### **About The State University of New York**

The State University of New York is the largest comprehensive system of higher education in the United States, with 64 college and university campuses located within 30 miles of every home, school and business in the state. In 2015-16, SUNY served nearly 1.3 million students, including nearly 600,000 in credit bearing courses and programs and more than 700,000 through continuing education and community outreach programs. SUNY students and faculty across the state make significant contributions to research and discovery, resulting in nearly \$1 billion of externally-sponsored activity each year. There are 3 million SUNY alumni worldwide and one in three New Yorkers with a college degree are SUNY alumni. To learn more about how SUNY creates opportunity, visit www.suny. edu.

#### Dr. Wayne J. Riley, MD, MPH, MBA, MACP Presidential Address to Alumni at Reunion



am eternally grateful for the honor to be able to lead your alma mater. This is a great time to be back for your reunion. There are a large number of people here who have gotten their medical education here and residency as well and have remained on the faculty. This speaks volumes about how folks feel about their institution.

I have been getting email messages from all over the country from Downstate grads who know me through my various capacities in my professional life. To me that is a clear manifestation of the greatness of this institution. We are quintessential Brooklyn and we embrace that. I was in Albany recently and was telling members of the Governor's staff that this institution is responsible for supplying a large cohort of physicians, PAs, nurses etc. to this great state.

Another observation is that some of you report that you never hear from the school and that there has to be a better way to communicate with graduates. I will be talking with the Alumni leadership as to how we can better connect with all alumni. It may be me sending out a yearly President's report to the alumni.

A concern I have about the campus, separate from the alumni is that Downstate does not tell its story effectively. We have been a little too bashful about telling the world what is going on at Downstate. It is amazing what our students and our faculty are doing and the progress we are making in a

number of areas. I did tell the Chancellor that we need money but she said that we need to better coordinate our communications and marketing efforts.

It is true that external information provided is essential but it is just as important to tell within the organization the great things that are going on.

We are in some uncharted areas when we see the developments in Washington. These could well have an adverse effect on Downstate. In my experience medicine is going to be in chaos the rest of our careers. We will be heavily involved in debates and conversations. Downstate takes care of a lot of Medicaid patients. They are very important to us. Protecting Medicaid is going to be a challenge as health care "reform" may take significant money out of the medicaid budget.

What we need to do is to raise money more effectively. I think Downstate has had resistance about asking for money because no one thinks to give gifts to State institutions. But the state of NY does not provide 100% of funding to educate our students and residents. We know there are grateful individuals out there and we need to ask them for assistance. We will be working with the Alumni Association on some of these initiatives.

Another item which needs attention is the physical plant. We do not have a conference facility. We need to do some facility upgrades to the campus. We are going to do a major renovation to the alumni auditorium. It is heavily used for lectures, for orientation and it honors the alumni. We will spend \$750,000 to one million dollars for this renovation.

One thing I do see about Downstate is that it has "Manhattanitus". We should never aspire to be a Cornell or a Columbia. We are Downstate and when I hear a student say "I just go to Downstate", I am going to say, "We don't have to be across the water to be great."

We can strive for excellence. I promise you we can make it better. That is the spirit in which I enter this very challenging job and during a very challenging time in healthcare. I need your help. I need the alumni to become part of a great team in this national treasure which is Downstate Medical Center.

#### DR. DANIEL PERL'67



Dr. Daniel Perl, '67 is a neuropathologist par excellence who has made major contributions to our understanding of neurodegenerative diseases such as Alzheimer's disease. In his illustrious career he has focused on the environmental factors such as aluminum on neurodegenerative diseases and the intriguing complex of amyotrophic lateral sclerosis and Parkinsonism dementia complex among the natives of Guam. Hundreds of publications later Dr. Perl has turned his attention to the effects of repeated head trauma first working with colleagues and Boston to study chronic traumatic encephalopathy seen in former NFL football players and other athletes. After 24 years as director of Mount Sinai in New York Dr. Perl joined the faculty of the Uniformed Services University of the Health Sciences in Bethesda to study the effects of yet another traumatic brain injury, that of military personnel who have experienced shellshock blast injuries.

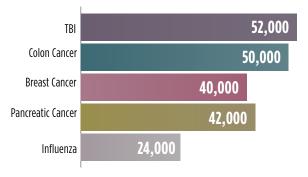
Today we are going to talk about the effects of traumatic brain injury in the setting of contact sports and then talk about what's going on in the military in terms of on the battlefield. I have to inform you that these are my own opinions and not those of the federal government or the Department of Defense, etc.

We are talking about traumatic brain injury (TBI) and I want let you know that this is a major public health issue to

#### From the NFL to the Battlefield

a degree. We're talking about at least two point two million emergency department visits annually 280,000 admissions to hospital and 52,000 deaths. When we compare the 52,000 from TBI to colon cancer 50,000, breast cancer 40,000 a year, pancreatic 42,000 and influenza 24,000. It is estimated that 5.3 million Americans are living with long term disability related to TDI 5.3 million Americans is equal to the current number of cases with Alzheimer's disease. There has been an explosion in the last 10 years of coverage of the effects of repeated head injury in the setting of contact sports.

**DEATHS PER YEAR**TBI vs. Other Public Health Issues



It is a long story. Harrison Markland, a medical examiner in New Jersey became interested in fights. It was his hobby to attend them. He learned that there is a term in boxing called Punch Drunk. This was in the early 1920s. Some boxers would retire and would exhibit a neurologic syndrome similar to Parkinsonism. They would become demented and he wrote a paper in the Journal of the AMA in 1928 describing it and commented this should be studied to see if it is really a disease.

In the early seventies, a trainee in neuropathology in Pittsburgh described a single case of a syndrome in a professional football player Mike Webster who played for the Pittsburgh Steelers. He called it Chronic traumatic encephalopathy or CTE and that's the name that stuck in medical literature. This was followed by the group at Boston University under Dr.

#### DR. DANIEL PERL '67

McKee who was also a neurologist. She started to collect a number of these cases and really set up a brain bank for former contact sport athletes and now she has over a hundred cases among professional sports athletes who primarily were in contact sports.

The nature of the disease is a progressive degenerative disease related to the accumulation of a protein in the brain. It's a very unique pattern of distribution that can be recognized when you see the brain on the microscope. Virtually all of the cases with this pathology have been seen in individuals who had experience with repeated head trauma. You don't see it by and large with single head trauma. It is repeated head trauma typically in the setting of contacts sports.



There are no currently available clinical diagnostics of the disease and so although you'll hear stories about so and so has got CTE but we don't know until the person dies and the brain is examined. There's no scientific data available on the overall prevalence of CTE in the general population. Almost all of the cases have been seen in professional football players professional hockey players and professional wrestlers.

There's no amount of head trauma you need in order to trigger this type of accumulation. There is no correlation between the numbers of concussions a player had in his career and whether they will develop CTE. Importance of sub concussive blows is becoming increasingly important and increasingly discussed. Those are blows to the head that don't develop into a true concussion but they're still blows to the head.

"There is no correlation between the numbers of concussions a player had in his career and whether they will develop CTE."

Second important thing is the dose reached in recreational sporting activities. This is the soccer mom question: If my kid wants to try out for football or soccer is he at risk for getting a concussion, is he at risk for developing this disease? We don't know the answer to that. No one knows the answer to that and it's it's an open question as to have a sports concussion you wait a week asymptomatically before you come back and play. Rest the brain and every coach knows this every Sports doc knows this. There is no effective therapy for this disease and again we don't know the biologic mechanism by which a Blow To The Head would trigger the onset of a degenerative process. We just don't understand it.

I'd like to switch gears now and talk a bit about TBI in the military. About 50% of military recruits have experienced one instance of TBI by the time they have started their military career. And then once they're in their career about 80% of all TBI's that active-duty service members experience occur off the battlefield, not in warfare. It's civilian TBI, contact with motor vehicle accidents, they fall out of trees, they get into fights. I'll point out that currently at West Point and the Naval Academy boxing is a required sport they must take it and it's not a lecture course. So here's the official figures on number of TBIs in the 16 years we've been involved in the war on terror since 2002. They counted 361000 TBIs among military personnel. One notes that 82% of them, almost 300,000.

Loss of consciousness up to 30 minutes is a mild TBI to the military. The other interesting thing is that there are individuals who have a TBI and then you get a second TBI you don't get an additional number. This is lack of reporting of these in the same way there was lack of a reporting in the NFL.

Military experience with TBI being very much like civilian

TBI but this one aspect of it this very unique and that's our interaction with this weapon of choice of the enemy and that's the revised explosive device or IED. It's the weapon of choice of the enemy, it's inexpensive to build it, doesn't need sophisticated technology, little training to build one. Basically you take artillery shells and you typically strap them together you get a detonator and you bury it in the roadway and you wait for the enemy to come by and then you push the button. It's very powerful, very effective especially with a remote. In 2006 remote detonators came into being so that you didn't have to have to direct connection between you You could build really big ones and it's responsible for at least 60% or probably closer to 70% of all battlefield casualties.



What are the effects of being in an incident with an IED and surviving.? High type of explosive is very powerful and in particular they give off their energy in a very short interval and because of that they produce what's called a blast wave. The blast wave is a shock of high-pressure in 10 milliseconds that goes out in all directions at greater than the speed of sound. And when it interacts with the head you can measure the blastwave entering the skull and passing through the brain. So we have a high pressure going through one of the most delicate and exquisite objects in the world namely the human brain. It wouldn't surprise you that it might cause some damage.

A significant percentage of individuals who have experienced these high explosives end up with persistent symptoms

"A significant percentage of individuals who have experienced these high explosives end up with persistent symptoms related to their blast exposure."

related to their blast exposure. And here are some of them: they get headaches, nausea, vomiting, dizziness, blurred vision, sleep disturbance, sensitivity to noise, balance problems, hearing loss, tinnitus, problems of impaired attention, problems with concentration and recent memory. They have a slowing of the processing of thoughts, poor judgment, many behavioral problems including depression, anxiety, agitation, irritability, impulsivity and aggression. These continue and they come on almost instantaneously within a few days of the last exposure. You will realize many of these features overlap with CTE but many of them overlap as well with another condition, post-traumatic stress disorder PTSD.

If you take such a patient with these persistent symptoms after blasting you put him in an MRI imaging instrument and you don't see anything. The brain looks normal and because of this it became known as The Invisible Wound. The brain perhaps had been wounded by the blast but there was nothing to see on an imaging study.

Dr. Frederick Mott who was a neuropathology in 1916 he published a series of papers in which he examined three cases of immediate death following being next to high explosives. He described focal hemorrhages in the brain and later on hypothesized a condition called shell shock which was a poorly described clinical syndrome of persistent neurologic and behavioral symptoms scene in World War I and might be due to physical damage in the brain caused by blast exposure.

Particularly because of the overlap in the symptoms between CTE and what we were seeing in our service members, some studies were done more recently to look for CTE in the

#### DR. DANIEL PERL'67

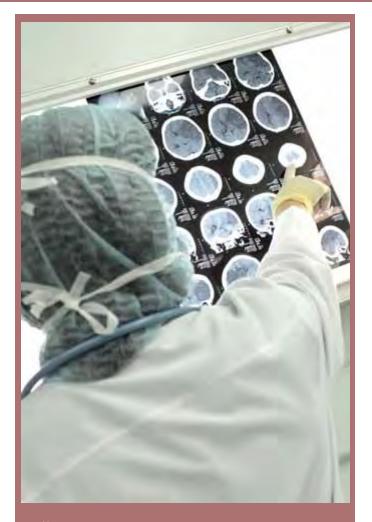
military. I was at Uniformed Services University and built up a facility in partnership with the Joint Pathology Center and what used to be the Armed Forces Institute of Pathology and the Maryland Brain Bank. We put together a series of brains to look at this issue of blasts at close proximity.

"We think that there's a latency that takes place in brains exposed to blasts, maybe a second process that's taking place long after they are military experience."

We think that there's a latency that takes place in brains exposed to blasts, maybe a second process that's taking place long after the military experience. Once in the military they get this civilian type of TBI, the fights, the falls and things like that but then somewhere along they get hit with a blast of significance producing some PTSD like symptoms and the immediate astroglial scarring which is the brain just trying to heal what the blast passing through it has done.

100 years ago Major Frederick Mott raised the possibility of damage to the brain by high explosives which could possibly cause organic disease namely Shellshock. This we've referred to in the world as the Mott hypothesis and many of the issues Blast exposure service members are currently struggling with may not strictly be related to their mental health problems.

The long-term effects of Blast TBI are no longer strictly a military issue - increasing numbers of civilians are also being exposed to these terrible weapons.



"The long-term effects of Blast TBI are no longer strictly a military issue - increasing numbers of civilians are also being exposed to these terrible weapons"



#### DR. MARTIN KAFINA '82



**Dr. Martin Kafina, '82** grew up in Brooklyn and completed his BA in chemistry at Lake Forest College in Illinois, and then did graduate work at the University of Wisconsin. He then returned to Brooklyn to attend SUNY Downstate and graduated from Medical School in 1982. He stayed at King's County Hospital of Brooklyn for internship, and then did residency in internal medicine at St. Vincent's, followed by fellowship in rheumatology and immunology at Yale.

After moving to the Boston area approximately 25 years ago, Dr. Kafina has been affiliated with Beth Israel Deaconess, New England Baptist Hospital and Harvard Medical School. He is an active teacher of rheumatology and of doctoring to Harvard medical students.

So, Lyme Disease, I'm almost not sure where to start, it's become a complete epidemic; I live 10 miles outside of Boston and Concord, and they had said there's 30,000 new cases a year, but the CDC has just changed that, that there are 300,000 new cases a year. It has just become the number one vector born disease in the world. And it's all prevalent all over the world, Russia, China, Greece, California to name a few. They actually discovered berylliosis DNA in that 5,000-year-old Iceman found in the Eastern Alps. Otzi is his name and he had

#### Immunity to Lyme Arthritis

Lyme Disease rash, called the bullseye rash. Often times you will miss this in about 50-60% of cases. Although, we often hear it to be a polyarthritis or oligo arthritis, one of the most common presentations is when some kid gets referred to our office from orthopedics with a large swollen knee and in fact, this is what is known as late stage Lyme. So, these little kids playing soccer have had the Lyme for years and developed a huge effusion in their knee, and the feeling is maybe they tore their meniscus, or something like that, but it is Lyme Disease. If you biopsy it, it looks exactly like Rheumatoid Arthritis but it is known as Tertiary Lyme Arthritis. Synovial thickening is present and the white count is often 20-60 thousands and test positive for Lyme.

#### "It [Lyme Disease] has just become the number one vector born disease in the world."

Lyme Disease is incredibly fascinating because we know the etiology of the microbe that's causing inflammation. The tricky thing about the Lyme is that the spirochete is known as the stealth pathogen. It is similar to the microbe that causes syphilis and if you recall syphilis was a stage one stage two and stage three and Lyme is something like that. It doesn't really release any Verlaine factors or toxins but it takes the immune system host to cause the inflammation. Winston Churchill had said that the Soviet Union is an enigma wrapped in a puzzle inside a mystery. The same holds true for the spirochete; it's a very tricky microbe. After the Yale Group discovered Lyme it took a long time to actually delineate the microbe. They thought it was a virus of some form. So, they got a bunch of ticks, about 200 from Shelter Island and they put it on 20 rabbits from University of Wisconsin and they analyzed at the Rocky Mountain Spotted Labs and it had the proper immu-

#### DR. MARTIN KAFINA '82



nofluorescence and they did DNA, DNA-hybridization studies, and it turned out to be a spirochete. So, the stages and the organs affected are here: it goes through the skin, that is called early localized disease, then it becomes early disseminated and then later disease where it goes to the brain, joint tissue and the skin. It latches onto plasminogen and it will use this proteinase to help it burrow through extra cellular tissue. When it leaves the bloodstream it can actually tether through the endothelial cells and it will go outside of the bloodstream. And once it's outside of the bloodstream it's much more difficult for the host to detect it.

The tick gets laid through eggs and when it becomes a larvae it has a blood meal then it molds into a nymph and those are very very small. That's the most dangerous stage because you can't see the nymph and later it gets a little larger and it goes onto a deer where it can mate. There's been all kinds of wonderful research on these different vectors and hosts and how we can determine if perhaps we can treat it from an eco-



logical point of view. It has these little organs which allows the tick to crawl up a blade of grass, waiting to see something that's moist and then it will latch on and get blood and then the spirochete changes. When it starts to move towards the salivary glands, it changes to an outer surface protein C, and that's when it will be released into the human dermis. It's interesting to know that the saliva (this is called a spit pit) actually will protect the spirochete from the human host, so it covers the spirochete from certain inflammatory mediators: it molts, it becomes a nymph and during these times the spirochete will traverse through the gut and wind up in the salivary glands. It's important to know that the Lyme disease also has other serious effects because it can kill you quickly. It can give you a

"It's important to know that the Lyme disease also has other serious effects because it can kill you quickly."

severe hepatitis, a severe thrombocytopenia, high fevers, and more recently they've isolated the possum flatly virus, which the tick can release in 15 minutes and it can cause a severe encephalitis. The Lyme has to be on you for two whole days, for it to regurgitate the spirochete into the dermis.

The spirochete can hide and when it goes extracellular, sometimes it can hide in certain niches. There's a dramatic B cell response in this infection. There's a lot of antibody production. Interestingly you may remember we did have a good vaccine for the Lyme disease. This was developed both at Yale as well as in Germany at the Max Planck institute. It was a very nice vaccine in that it used the outer surface protein A to develop an antibody response. The problem with it is that there was a multitude of advocacy groups that were claiming that outer surface protein A was causing the Lyme disease. There was many lawsuits but to come back with that vaccine, it was

very efficacious: there was 3 doses and 80% of people would no longer get Lyme disease. The spirochete has these flagella which is a periplasmic motility flagellum. It is different than other type of flagella in that it is periplasmic and it actually allows the spirochete to move in a corkscrew fashion, and by moving in a corkscrew fashion, it can burrow and there is continual antigenic shift and that allows the spirochete to hide from the human host. They're also trying to make this new vaccine with this VLSE surface protein. There is also a good blood test that is available. There has been some controversy with the blood test.



Interesting, over time one's own immune system seems to decrease the number of attacks. This is over a number of years and with time they seem to slowly get better, unless it goes to the nervous system. Also, of interest, during episodes of severe arthritis the outer surface protein A seems to be expressed. It is in the tick's mid gut, then when it goes into the human, you see outer surface protein C. And then it kind of morphs during episodes of arthritis and you have this outer surface protein A. That is why we were so pleased when we developed the vaccine, because it does react from an immune point of view. We use western blotting, which is fairly good, it is not perfect. We have spirochete proteins and we also look at these on the western blot and try to make a diagnosis. There are significant false positives and false negatives.

The big thing is to discern what is Lyme and what is not. So, we hear a lot about thing called chronic Lyme Vs. post Lyme syndrome. Most rheumatologists and immunologists like to call it post Lyme syndrome. These patients get objectifying things like swollen joints, they kind of get a lupus like

syndrome, but some patients don't have any of this. They just come in with fatigue. "I don't feel well doc, I have Lyme disease, I need long term antibiotics."

So, we have a whole bunch of patients, who even though we soak them in antibiotics, they don't seem to get better. This is called antibiotic refractory Vs. antibiotic responsive arthritis, so the different theories of this are that either it's a persistent infection, that there's still spirochetes in the patient, retained spirochete hiatal antigens, infection induced autoimmunity, or there's bystander activation. This is important. How do you determine if there's persistent infection because the patients are saying they want more antibiotics. The new way that we are doing this is with xenodiagnoses. We put laboratory bred ticks on our patients that are sterile and we let them get a blood meal for several days, then we take off the ticks and examine them and see if there are spirochete in the ticks. How many of you think this is a good idea? I mean this is a way to finalize the question of whether the patient has chronic Lyme disease. Put a sterile tick on the patient, let it get a blood meal, then dissect the tick to see if there are any spirochetes. The spirochetes can survive in a niche in the joint or CNS that is protected by antibiotics. You could have retained spirochete antigens, which might perpetuate synovial inflammation after eradication of the live spirochete or membrane-bound webs may be attached from the parent organism. And then there's a concern for autoimmunity in since there's a section of the antibodies that react without a surface protein A, that seems to cross-react with certain amino acids on human leukocyte antigen. Lastly there seems to be a certain degree of autoimmunity which can perpetuate inflammation. Treatment is with doxycycline and the patients who are really sick get Rocephin. Those patients that don't do well, we are put on methotrexate or steroids. Sometimes we actually shave the synovium to get rid of any of the antigen. The other way to treat these patients is to cull the deer, to get rid of the deer, but there's a lot of laws that don't allow that. We are also trying to vaccinate the mice with oral bait, so that the mice don't get infected with the spirochetes. That is another way to try to fix the problem from an ecological point of view.

#### DR. MYRON YASTER '77



Dr. Myron Yaster, '77 provided an eye-opening talk on an important aspect of opioid abuse, a major public health epidemic in the United States. Dr. Yaster is an international authority on pain management in children and adolescents. Currently Professor of Anesthesiology at the University of Colorado-Anschutz Medical Campus, Children's Hospital in Denver, he graduated summa cum laude from Brooklyn College and was a cum laude graduate of Downstate in 1977. His training included two years in Pediatrics at the Children's Hospital of Pittsburgh, residency in Anesthesiology at the University of Pennsylvania, and fellowship in Pediatric Anesthesiology and Critical Care Medicine at the Children's Hospital of Philadelphia. He joined the faculty at The Johns Hopkins Hospital in Baltimore where he rose through the ranks and in 2003 was appointed the Richard J Traystman Distinguished Professor of Pediatric Anesthesia, Critical Care Medicine, and Pain Management. In 2016, he left to take his current position in Denver, Colorado.

Dr. Yaster has authored over 100 journal publications and 64 book chapters. He has served as editor of important textbooks in his field, including <u>The Golden Hour:</u> <u>The Handbook of Pediatric Life Support</u>, and others. For all his many contributions, Dr. Yaster was given the Lifetime Achievement Award of the Society for Pediatric Anesthesia, an award that now bears his name.

## The Epidemic of Non-Medical Use of Prescription Opioids

The increased emphasis on pain assessment and management in the 1990s resulted in a dramatic increase in opioid ("narcotic" or "controlled substance") prescription writing and dispensing. Although opioids were once considered essential for improving the functioning and quality of life of patients with moderate to severe acute or chronic pain, the risks associated with these drugs were downplayed by pain management experts and others. As a result, the quantities of opioids prescribed and dispensed became enormous. Moreover, a high proportion of patients failed to use all of their prescribed opioids. These unused prescription opioids serve as a reservoir of drugs that have fueled an epidemic of non-medical use of prescription opioids (NMUPO). Indeed, their abuse, misuse, and addiction have led to one of the most serious public health problems in the United States, resulting in unprecedented numbers of accidental deaths and opioid-related treatment admissions.



"Multiple studies have documented a strong linear relationship between opioid sales volume and morbidity and mortality associated with these products."



Multiple studies have documented a strong linear relationship between opioid sales volume and morbidity and mortality associated with these products. Most regulatory, medical, and research activity devoted to non-medical use of prescription opioids, however, have focused on the appropriateness and quantity of opioids prescribed for chronic, non-cancer pain. Although opioids are often dispensed in large quantities after pediatric surgery (almost 5 million American children undergo surgery every year), relatively little attention was paid to the amount and disposition of opioids prescribed for acute pain, particularly in children.

"On average, 65% of prescribed opioids are not consumed and virtually none is discarded."

Dr. Yaster and colleagues have worked to address this shortfall. They found that the amount of dispensed opioid actually used is procedure-, age-, and gender-specific. Their preliminary results revealed that, on average, 65% of prescribed opioids are not consumed and virtually none is discarded. Invariably, some of this leftover unused opioid becomes a reservoir available to the general population or to family members for opioid sharing, selling, and diversion.

In a recent study, Dr. Yaster and coworkers examined opioid-prescribing patterns, analyzing errors, discrepancies and variation in opioid prescriptions for adult outpatients (*J Opioid Manag* 2017;13:51-57). They found common inconsistencies in prescriptions and an inordinately high error rate. They also analyzed over 34,000 prescriptions of controlled substances in pediatric outpatients (*Anesth Analg* 2016;122:807-13). In both studies, the most commonly prescribed opioid was oxycodone, usually not in combination with acetaminophen. One key finding was that use of a computerized prescription writer eliminated most but not all of the errors common to handwritten prescriptions

In summary, as a pediatric anesthesiologist, intensivist, and pain management practitioner, Dr. Yaster has found himself in the eye of this public health storm. His talk was a timely reminder that health care professionals must work to reduce unnecessary prescriptions of opioids for surgical patients, chronic pain patients, and others, reduce prescription errors, and facilitate the safe storage and disposal of opioids.



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# **Report of the Board of Trustees of The Alumni Fund** Grants for the 2016–2017 Academic Year

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\$10,550	2017 White Coat Ceremony (+ Embroidery for \$800)*
	Research Scholarhip (2 Runner Ups)**
\$10,000	Mentoring Programs (Quarterly reports required)****
\$8,000	Senior Class Activities/Gifts**
\$8,000	Brooklyn Free Clinic**
\$6,400	Dr. Libien Summer Program*
\$5,500	Bristol Project (2017-2018)***
\$5,500	Bristol Project (2016-2017)**
\$5,000	Other Programs (Malcolm's Research Project)**
\$4,000	AOA Alpha Omega Activities**
\$2,500	2017 Commencement Dinner*
\$2,000	Brooklyn Free Clinic Fundraiser**
\$2,000	Student Yearbook (IATROS)**
\$1,800	Global Health Club Case Competition (Registration and Travel)**
\$720	Medical Educators Pathway Program****
\$225	AOA Alpha Omega Membership Fees**

#### \$647,450 Total

- \* New Grant(s)
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#### 2017 ALUMNI REUNION

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Anna Maria Massaro-Dunn, MD '92

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Myron Yaster, MD '77

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**Award in Surgical Oncology** 

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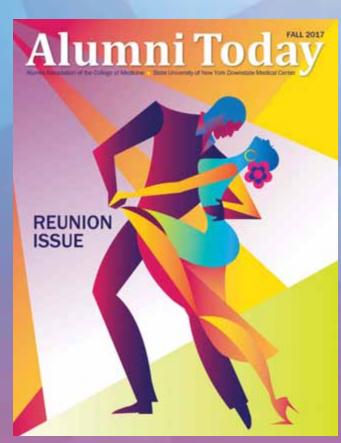
Michael Whyte, MD '72

### 2017 ALUMNI REUNION





# CONTENTS Reunion Issue 2017



#### **Feature Articles**

- 26 The World Within Us Constance Shames, MD '63
- 27 Intermittent Fasting Marla Block Mendelson, MBA, CFA
- 29 Grain Free...No More Wheat Belly Patricia Ryan, MD '79
- 30 Mediterranean Diet
- 31 Nutrition Jack Forrest, MD '66
- 32 AOA Lecture Ralph Snyderman, MD '65
- 35 Letters of Thanks from Students
- **37** Class Notes
- 48 In Memoriam

  Marvin Kochman MD '53

  Gerald M, Greenberg MD '59

  Carl Needles MD and the Needles Foundation

  Alumni In Memoriam
- 57 Lifetime Membership Society

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# umni Today Alumni Association of the College of Medicine State University of New York Downstate Medical Center SUPPLEMENTAL ISSUE WELCOME **ALL ALUMNI**

#### THE WORLD WITHIN US

#### By Constance Shames, MD '63

Neil Degrasse Tyson, an astrophysicist and the Director of the Hayden Planetarium in NYC was being interviewed on PBS. He spoke about the cosmic universe but then indicated that there is a world within us. He stated that there are more bacteria in our gut than the number of all the people who have lived on earth since the beginning of time.

In the past few years there has been a flurry of research activity into the microbiome within us and how it protects our brain, supports immunity, prevents disease and takes responsibility for our health from birth to death. These bacteria comprise the BIOME.

The human biome is the ecosystem of microorganisms that inhabit the human body. As of 2014 it was noted in the media and in the scientific literature that the human biome has about 100 trillion bacterial cells. Many of these have not been identified. In 2008 a human microbiome project was an initiative at the National Institutes of Health. It had a goal to identify microorganisms in both healthy and diseased individuals. Many of the organisms of the human microbiome have not been characterized.

"... there has been a flurry of research activity into the microbiome within us and how it protects our brain, supports immunity, prevents disease and takes responsibility for our health from birth to death."

David Perlmutter, M.D., in his recent book, "Brainmaker", notes that the "bugs" in our gut are fundamental to life. He even notes that Hippocrates said, "all disease begins in the gut." Dr. Permutter further explains that these intestinal organisms oversee our immune systems, inflammation, vitamins, neurotransmitters, nutrient absorption, and many other functions in our bodies. The microbiome therefore affects

everything about our health. It is crucial that we harbor only "friendly bacteria" and not "unfriendly ones". If they are not treated "well" they could be directing our systems toward MS or asthma, food allergies, chronic fatigue, IBS or any of many other health challenges.



Dr. Perlmutter also notes that the most important factor in treating and changing the biome is food. Dietary choices are said to be paramount in maintaining a healthy status. He cites many studies which reveal that proper food, exercise, sleep, probiotics and decrease of stress determine which bacteria in the biome are activated or deactivated. He stresses that probiotics, and nutrients in fermented cabbage, Kimchi (from Korea), yogurt, sauerkraut and pickles help activate the biome.

He also recommends low carbs, low sugar, eggs, wild fish, herbs, seasonings and condiments, wine, tea, coffee and chocolate. The best probiotics that he prefers are artichokes, garlic, onion, raw asparagus, and chicory. But eating is not everything. He believes that intermittent fasting leads to a healthier biome.

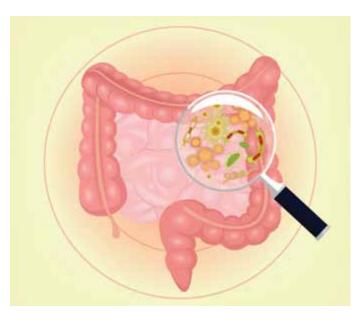
#### INTERMITTENT FASTING

#### By Marla Block Mendelson, MBA, CFA

(Daughter of Dr. Shames)

You are what you eat, and so are the bacteria that live in your gut. Different diets can create different gut flora which is deeply tied to our health. Intermittent fasting improves your microbiome and can make you healthier and even happier.

There are several methods to accomplish intermittent fasting. The first is called Leangains which divides your day into an eating and non-eating period. The non-eating period is typically 16 consecutive hours of the day and can include sleep time. The second common method is call the 5:2 diet where you eat normally for 5 days and drastically reduce calo-



ries for the other 2 days of the week. The third is called Eat, Stop, Eat and incorporates 1-2 days of complete fasting each week.

According to a study published in the Proceedings of the National Academy of Sciences<sup>1</sup>, fasting improves gut bacteria which can boost your immune system, protecting you from illness and helping you recover faster when you do get sick. This new research shows that fasting flips a genetic switch

"The beneficial bacteria in our gut help with everything from regulating our immune system and optimizing our digestion to balancing our moods and boosting our memory."

that activates an anti-inflammatory response in your gut, protecting both you and your bacteria.

Intermittent fasting consists of regular cycles of eating and fasting that you can incorporate into your daily routines. Giving your body significant breaks from eating can optimize your hormone function, facilitating weight loss and improving your metabolism. In a study published in Cell Metabolism <sup>2</sup>, mice who fasted for 16 hours each day lost 12% of their body weight. Fasting also increases levels of human growth hormone (HGH), a hormone that increases muscle mass and ramps up your metabolism. In a research trial, fasting increased HGH levels in women by 1,300% and 2,000% in men.<sup>3</sup> Fasting also reduces insulin levels and increases insulin sensitivity, which can keep your metabolism in check. What's more, as your body runs through its primary source of energy (glycogen) after several hours of fasting, it switches to burning fat for fuel.

Studies show that intermittent fasting increases production of brain-derived neurotrophic factor (BDNF), a protein that fertilizes brain cells, encourages neuron growth, and builds and maintains brain circuits.<sup>4</sup> This can help with memory, brain function, and even a happier mood. Besides its beneficial effects on everything from blood sugar balance and metabolism to heart health and cholesterol levels, intermittent fasting induces a sort of mild "stress" that encourages cells to ramp up their defenses, while also enhancing their stress-coping abilities. During fasting, our cells initiate a process of waste removal and cellular repair that rids the body of molecules that are damaged or not functioning properly. This increased

#### INTERMITTENT FASTING

detoxification can keep you healthier, longer.

The beneficial bacteria in our gut help with everything from regulating our immune system and optimizing our digestion to balancing our moods and boosting our memory. Intermittent fasting gives your gut microbes a break from their digestion duties, so they can focus on cleaning house and keeping their populations intact. Fasting can also increase the diversity of your gut bacteria—important for your immune and overall health—and boost your body's resistance to bad bacteria.

Further, researchers are discovering that daily fasting activates a gene that strengthens the gut barrier, which protects us from harmful microbes, toxins, and other substances that can leak into the bloodstream and trigger immune reactions.<sup>5</sup>



Much of the theory as to why this works is evolutionary and tied to our circadian rhythms. Research has suggested that knowing when you eat, when you exercise, and how well you sleep can improve your health.

Most everyone is aware of the light/dark cycle and show their sleep is coupled to the sun. Not as many people are aware that eating also triggers a set of molecular and cellular responses that are closely tied to circadian timing. Recent work has implicated misalignments in circadian rhythms as clear bright lines for long-term health risk. For example, it has been recognized for some time that late night heavy-meals right before sleep or interrupting sleep is not a healthy behavior pattern. This is because, from a purely physiological

standpoint, the timings for sleep and for digestion are not evolutionarily designed to operate at the same time. A new research concept connects establishing long-term health and decreasing these health risks. Being aware of your eating, sleeping, and exercise timing and eating within a defined window of time in each day is likely to be healthier. In a similar way, there is increasing evidence that the timing of medications, and not only their type and dosage, makes a difference in their efficiency.

An easy to use comprehensive tool to use to track intermittent fasting and its affect on your biometric data is Metabolic Compass, (www.metaboliccompass.com) an app available for your smartphone. With the right tools, you can play an active role in managing your own health.

- Run Shen, Biao Wang, Maria G. Giribaldi, Janelle Ayres, John B. Thomas, and Marc Montminy. Neuronal energysensing pathway promotes energy. Proceedings of the National Academy of Sciences, 2016
- Amandine Chaix, Amir Zarrinpar, Phuong Miu, and Satchidananda Panda. Time-restricted feeding is a preventative and therapeutic intervention against diverse nutritional challenges. Cell Metabolism, July 23, 2014
- Intermountain Medical Center. Routine periodic fasting is good for your health, and your heart. ScienceDaily. May 2011.
- 4. Mattson, MP. Energy intake, meal frequency, and health: a neurobiological perspective. *Annual Review of Nutrition*, March 7, 2005
- 5. Salk Institute. **Genetic switch turned on during fasting helps stop inflammation**. *ScienceDaily*. May 17, 2016.

There are many types of diets which have been proposed to satisfy the biome and to make us healthier. A few of these will be listed in the following pages.

#### Grain Free...No More Wheat Belly

#### by Patricia Ryan, MD '79

It's my medical opinion that folks should be grain free. I am sharing this with you because it helps me and my patients. Wheat, corn and rice are destructive and addictive foods that rob us of essential nutrients. Even multivitamins cannot keep up. It is a good idea to take multivitamins since wheat, corn and rice are hidden in our food.

My own personal experience brought me to grain-free living. I was troubled by elbow rashes that were painful. Cortisone did not help. My dermatologist argued with me when I told him that when I stop having whole wheat and all wheat the rash goes away completely. I rarely ate rice or corn so it was easier for me to hone in on wheat as the culprit.

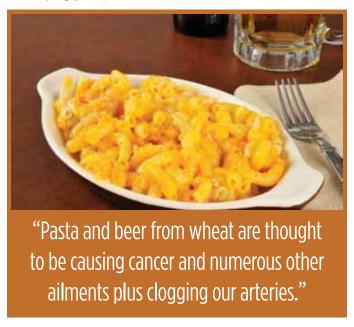
Animal owners are even going grain free so their pets have fewer illnesses and live much longer. My friend moved from NYU to UCLA. His dog was sick from the move. The veterinarian told him to go feed the dog only cooked hamburger and broccoli. The dog recovered.

Perhaps we would have learned the grain-free lesson sooner but sadly we focused on the wrong issue. A colleague recently sent me a copy of a book by Nina Teicholz "The Big Fat Surprise", a widely praised study on the effects of fat consumption. According to this work we sadly went in the wrong direction focusing on the fallacy that it is critical to avoid fats in our diets. It is truly devastating to think that people died because we did not realize that fat is not bad – it is the grains that are to blame. You have to enlighten yourself and make your own decisions - so you can pay it forward for others.

I cannot fully explain in this short space why wheat, corn and rice are so destructive. But it is not difficult to understand at all and there are resources readily available and accessible. The cardiologist, William Davis M.D., has written on the topic extensively including his books "Wheat Belly" and "Wheat Belly Total Health" – each international best sellers. The second book was followed by a one hour presentation on PBS which is aired periodically. "We Love Paleo" is another video presentation contributed to by four doctors from different

places around the world.

Most recently Dr. Davis has published his latest book "Undoctored." He explains why health care has failed and how you can become smarter than your doctor. For instance, if my thyroid was not normal, eliminating wheat would not completely treat my illness. In Undoctored you learn what the TSH should be. Unfortunately, I find many patients suffering from the wrong TSH. They are developing diabetes and heart disease and obesity. Since we are medical doctors, we should read all of this as we can convert ourselves to grain free living and feel energized to teach your patients. Otherwise, you are not helping your patients.



This is a serious topic as statistics will show how many folks are dead or being treated for cancer. Pasta and beer from wheat are thought to be causing cancer and numerous other ailments plus clogging our arteries. I tell folks to drink apple beer and wine to avoid wheat. The bonus is once you convert to grain-free you are no longer hungry and you do not feel anxious so you do not drink alcohol very much. You have to look into all this yourself and make sense of it. Autoimmune diseases are also on the rise. Whole wheat is thought to be interfering with medication like thyroxine. Downstate medical doctors should enlighten their lives and save yourselves, your loved ones and your patients.

#### **Mediterranean Diet**

The term 'Mediterranean Diet' describes a specific mix of food ingredients shown to promote health and longer life in people from many countries. The word "Mediterranean" refers to the origins of the diet, rather than to specific foods such as Greek or Italian foods.

The core element of the diet is to avoid processed foods, refined sugars and simple carbohydrates. Instead, it focuses on adding a wide range of fruits and vegetables to give the body maximum access to sources of vitamins, minerals and other trace nutrients. The Mediterranean Diet is rich in vegetables, fruit, peas and beans (legumes) and grains. It also contains moderate amounts of chicken and fish. There is little red meat and most fat is unsaturated and comes from olive oil and nuts. Having a small amount of red wine has been shown to increase the health benefits. It is the combination of foods within a healthy lifestyle which is linked to improved health.

The overuse of salt in flavoring Western-style meals and fast foods has been linked with increased blood pressure. The healthy alternative is to replace the excess salt with herbs and also garlic, as Mediterranean people have done for many years.

"The Harvard School of Public Health suggests that over 80% of coronary heart disease, 70% of stroke, and 90% of type 2 diabetes can be avoided by healthy food choices that are consistent with the traditional Mediterranean diet."

The typical Western diet is high in animal fats, sugar and preservatives but low in fruit and vegetables. Scientific research has shown that this food combination is partially responsible for triggering many chronic diseases and cancers.

Research has also shown that following a Mediterranean diet can reduce the chance of developing conditions such as heart disease, type 2 diabetes, high blood pressure, obesity, some cancers, Parkinson's disease and Alzheimer's disease. It can also be useful for people wishing to lose weight as it is

rich in fruit and vegetables and lower in sugars and saturated fats than a typical Western diet.

The Harvard School of Public Health suggests that over 80% of coronary heart disease, 70% of stroke, and 90% of



type 2 diabetes can be avoided by healthy food choices that are consistent with the traditional Mediterranean diet, when done in conjunction with regular physical activity and not smoking.

According to a study published in the *Annals of Internal Medicine* (November 5, 2013), researchers looked at the dietary habits of more than 10,000 women in their 50s and 60s and compared them to how the women fared health-wise 15 years later. Women who followed a healthy diet during middle age were about 40% more likely to live past the age of 70 without chronic illness and without physical or mental problems than those with less-healthy diets. The healthiest women were those who ate more plant foods, whole grains, and fish; ate less red and processed meats; and had limited alcohol intake. That's typical of a Mediterranean-type diet, which is also rich in olive oil and nuts.

A diet of minimally processed foods close to nature, predominantly plants, is decisively associated with health promotion and disease prevention.

#### Nutrition

By Jack Forrest, MD '66

Excerpts from "Jack, What Really Matters" a blog by Dr. Forrest: Blog may be reached at http://jackwhatreallymatters.blogspot.com/

In 2004, Dan Buettner wrote a NATIONAL GEOGRAPHIC cover story about the "Secrets of Long Life." which led to their issu e becoming one of the best sellers of all time. He expanded this into a best seller called "The Blue Zone" which examined lifestyles in four areas of the world... Sardinia, Okinawa, Costa Rica and California. Scholars looked at possible factors for longevity. He identified commonalities in these areas:

- A whole food plant based diet with little dairy, meat or seafood
- An active lifestyle with daily physical activity
- Strong family and community support
- Having a life purpose and spirituality
- Man is a social animal who responds to family and community. Health and quality of life and longevity are exciting goals which can be achieved

Luigi Fontana's research in longevity and health examines diet composition. Although timing of eating can improve longevity, what is eaten is much more important. "The China Study" by Campbell and Campbell emphasizes the harmful health effects of animal protein. In China, those who ate the least animal products lived the longest. They also avoided most chronic illnesses including cancer and heart disease. When minimally processed plant foods form the bulk of the diet, all humans live longer and enjoy better health.

#### NOW BACK TO THE BIOME

No doubt there is still controversy about what is best to eat. It is clear that no one diet fits one and fits all. Current and ongoing studies of our biome confirm this. What we need are happy bacteria and what we eat determines their state of health and their control of many factors of our lives. It now appears that our immunity, our tendency to chronic diseases, our longevity, and the quality of our existence heavily depends on our biome. Research is just beginning on looking at ways to determine the biome of each individual and will then create the ideal diet for each one.

In the meantime there seems to be general consensus that eating a diet with plentiful fruits and vegetables, decreased intake of some carbs and sugar, decreased use of antibiotics and foods containing preservatives and antibiotics as well as intake of healthy fats and spices is recommended. In addition, our biome needs us to get adequate sleep, minimal stress, physical exercise, a robust social life and engagement in new and mentally stimulating activities. Given these ingredients, your biome will be actively engaged in fighting for your healthy and happy long life.



"What we need are happy bacteria and what we eat determines their state of health and their control of many factors of our lives."

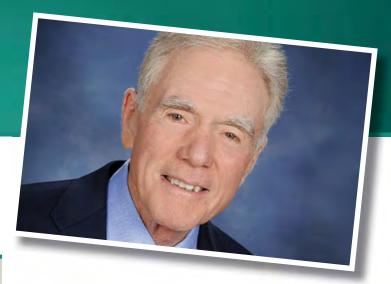


#### Dr. Ralph Snyderman '65 AOA SPEECH

Delivered on March 22, 2017 Alumni Hall SUNY DOWNSTATE

Dr. Snyderman was born in Brooklyn, raised in Benson-hurst and graduated Magna Cum Laude from this institution in 1965. He went on to post graduate training at Duke University and the NIH. He pursued specialty training in Rheumatology and Immunology and for many years was the chief of the Rheumatology division at Duke. He subsequently went on the be the Dean and the Chancellor for Health Affairs at Duke University. His career has been marked by many accomplished and awards too numerous for me to list here. He has been vocal and effective proponent of medicine and healthcare that is patient centered rather than disease centered. In this regard, he has been a pioneer. He has returned now to share his insights gleamed along the way from Clarkson Avenue to North Carolina and other places in between.

As a physician, it is your obligation to serve those in need of the help of a physician. That's a beautiful, lofty thing. As Dean of the School of Medicine of Duke for almost 16 years. and for virtually all that time, part of my function was to deliver the Hippocratic oath ceremony to all the new graduates of Duke School of Medicine. And it struck me that the practice of medicine is a heroic profession. This is what I'd like you to think about a little bit today, because it's so easily overlooked. So, for each year at Duke Chapel, which is a magnificent place. I mean coming from Bensonhurst Brooklyn, standing up the pulpit at Duke Chapel, looking out at these hundreds of pews with these beautiful glass windows, it was an honor beyond belief. So, I ended up finding an article in the New England Journal of Medicine, called Healing and Heroism. It describes the myth of the hero who was a surgeon at the



University of Massachusetts. The hero's path is often beset by difficult trials, there are many dragons to kill, rivers to swim, or mountains to scale. There may also be seductive temptations. Ultimately, some great goal is attained, usually enabling the hero to benefit others. The hero's return journey is also apt to be rigorous and full of danger and not all heroes survive. But, though surrendering their personal desires to a greater goal, heroes find their own fulfillment. What does this have to do with medicine?

The practice of medicine by its own nature is a heroic profession. Those of us who enter do so because we are called upon to help others. The path to becoming a skilled physician is long and arduous, I don't need to tell you this. Those who persevere and become successful doctors are not home safely. In many ways, they are then most in danger of succumbing to the temptations of affluence and pride. But those who hold steadfastly to the original goal of helping the sick and injured as best they can, undistracted by selfish goals, have

**66** As a physician, it is your obligation to serve those in need of the help of a physician.

That's a beautiful, lofty thing. **99** 

their hearts warmed daily by the help they bring to others. Society richly rewards the true heroes, the greatest reward to the true physician comes from simply the service itself. and what I could tell you as having practiced for over 50 years, is that of all the joys I have experienced there was no greater joy



## **66** The practice of medicine, by its own nature, is a heroic profession. Those of us who enter do so because we are called upon to help others. **99**

than the joy of feeling that you have made your patients life better. That you've developed a partnership with them and you have made their life better. Regardless if you choose to go into internal medicine, family medicine, pediatrics, pathology, whatever, you should always understand that your function is to serve that patient.

But when I went to Downstate, it was serious business. I mean no doubt about it, starting with anatomy, it was serious business. I jumped right into with both feet. For the first time in my life I was around with other students who were working their butts off, and within a short period of time- for reasons I never understood- everybody was coming to me to explain things to them, when I didn't think I understood anything, but in teaching them it was very good for me. I ended up graduating from Downstate, Cum Laude. It was a great experience, I loved it. I truly believed that Downstate was the equal to any medical school in the world. We thought it was a great place to learn medicine, and it was.

I decided like many of you, to go into internal medicine. I wanted to be a doctor to be able to help people. By the time I graduated high school, I know this is true because I looked at my high school year book years ago, and it said Ralph Snyderman wants to become a Research Physician. So, even by that time I had this idea being a doctor was a great thing. If you could discover things that help people are even better. So, you could be a doctor, but being a research doctor is even better.

When I was a resident, I felt now I was really responsible because I had twice as many patients and two interns that barely knew anything. I was even more responsible. One of the things I learned along the way is that there is nothing other than complete responsibility. For those things that you do, you are responsible. Another thing that I learned is there are no excuses. It really did change me in very significant ways, that degree of commitment, excellence and discipline.

This kind of opened up the concepts of the field of integrated medicine. How do you start dealing with patients more holistically into their needs. For the first time we could predict, anticipate, and start preventing diseases to which people are most susceptible. This was an amazing concept. Rather than medicine being reactive to disease, which it still is today, it could start being proactive.



Being a physician is one of the most important professions anyone could take on in their life. You've already validated yourself to be highly competent. What you need to decide for yourself, is are you going to be worthy of serving the suffering. Medicine could be a job, a profession, or a way of life. You need to make a decision. By way of life I do not mean to be a physician is too exclude everything else. To embed it within you. When somebody says: what are you? What I would generally think, I am a physician. That's the best thing I could say about myself in my own mind. So, I ask you to think about the profession of medicine and your commitment to it. I hope that you choose, whatever, if it is a job, a profession, or way of life that no matter what you do, you are always doing it with the context of a physician that you choose to totally embrace your profession.

# WHAT'S NEW?

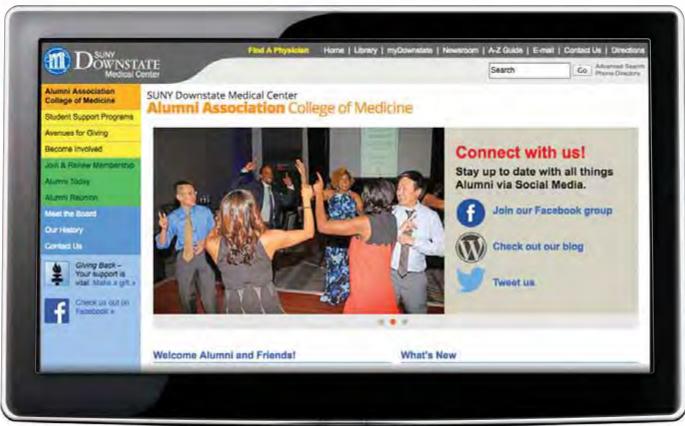
Visit the

**Updated Web Site** 

of the

Alumni Association-College of Medicine, Downstate

- Join us for the Alumni Reunion festivities
   May 4 May 6, 2018
- See the Alumni Reunion Weekend schedule
- Read the latest Alumni Today magazine
- Learn about the activities and programs we sponsor for our medical students and alumni
- Support our activities- pay your dues or make a gift on-line
- Update your contact information and help locate alumni
- See who serves on our Boards
- Provide us with your feedback







#### Thank you notes from student graduates of the College of Medicine

Included are some examples of the many thank you notes and letters from students and faculty to the Alumni Association for research assistance, tuition scholarship aid, Medical Education Pathway, support of student programs, Senior week activities, graduation and match day support and many other student oriented programs.

Dear Alumni Association,

On behalf of the class of 2017 I wanted to thank you for your generous support of our Senior Week activities. We had a great week and cannot believe that commencement is already past and that we are hurtling towards the next step in our lives.

Our time at Downstate has flown by, and it has been a remarkable growing and learning experience. We cannot overstate our appreciation for all you have done for us culminating in the last few weeks.

Thanks again for everything. We will surely keep in touch.

Sincerely,

Benjamin Johnson M.D. President (the now graduated Class of 2017)

To the Alumni Association Board of Trustees

Becoming a medical doctor has been a dream of mine since I was a young girl. This journey has been the largest undertaking in my life. I required me to learn, mature and improve all aspects of my life. I was honored to have been granted the Alumni Association scholarship for tuition assistance. I learned that you are among the members of the Alumni Association who have graciously donated your time and resources to make my scholarship possible.

I hope that through my hard work, dedication and quest for improvement I can make you proud of the help you are bestowing on the medical students at SUNY Downstate. Thank you one thousand times.

Sincerely,
Amanda Alvarado, COM 2018

Dear Board of Trustees:

My name is Jessica Magarinos and I am currently an MS3 at Downstate. I wanted to thank all of you for selecting me to receive an Alumni scholarship. The money was a huge help and allowed me to dedicate myself to studying. I am truly thankful for the scholarship and hope to be able to contribute to future scholarship funds when I become an alumnus. Thank you again.

Sincerely, Jessica Magarinos





#### Dear Board of Trustees:

I would like to thank you for your generous donation. It greatly improved my ability to attend this wonderful medical school. I am forever grateful and will certainly contribute to the Alumni Association so that I may help other students in the future.

Sincerely, Vaugh Hodges

#### Dear Board of Trustees:

It is with immense gratitude that I thank you for the wonderful scholarship I was awarded this year. I feel very fortunate to have your support in my pursuit of an MD and a career in medicine. I intend to apply for an OB/GYN residency program this fall and will keep you posted on the outcome. I would not have been able to complete this journey without your kindness.

With enormous thanks.

Patrick Eucalitto, COM 2018

#### To the Board of Trustees:

I would like to sincerely thank you for your generosity in supporting my education. I cannot believe I am just a little over a month away from graduating from SUNY Downstate. The journey has taken a village and I am so grateful for the help you offered me in reaching my goals.

Sincerely, Keriann Shalroy

#### Dear Board of Trustees:

Thank you for your generous support of my medical education at SUNY Downstate. I am forever grateful.

Sincerely, Shira Saperstein

#### 1940s

Norman M. Mann, MD '45 wrote in April, 2017, "As a member of the 1945 graduating class, I feel my class should be represented in notes about us in our alumni magazine. Medicine has undergone so many changes since I entered practice in 1949, in the field of Internal Medicine. Initially, I took part in making many house calls during the day, and many during the night. Early hospital

visits to see patients were necessary. Attendance at lectures in medicine was

part of daily medical life. Now, patients must see their physician in the office, or run to the emergency room. If a patient has to go to the hospital, his or her doctor does not follow. A local hospitalist takes over. Unfortunately, the relationship between the patient and his doctor is severed. Many patients and some doctors have therefore resorted to hiring 'consierge doctors' who, for a yearly fee (\$1,500 to \$2,000), act as 'backup care.' They will take calls, make house calls, help in the transfer of the patient to the hospital. All of the above, I am sure my fellow physicians know very well. I must say my own experience in medicine was very satisfying. I am fortunate to continue to be active. I am on the staff at U. Conn. Health Center at Farmington, CT. I hope to hear from my classmates."

#### 1950s

Martin Kaplan, MD '53 writes in April,

2016, "Phil Warren and I get together during my winter stays in Sarasota, Florida."

**Murray Kofkin, MD '53** writes in April 2017 that he has retired from his Child Psychiatric practice to be closer to his three New York-raised daughters, now all living west of the Mississippi.

**David Schneider, MD '53** wrote in October 2016 that he's "still okay, working four days a week."

**Harold Chafkin, MD '54** wrote in October 2016 that he has "finally retired after 51 years."

Glenn Lubash, MD '54 writes, "Enough is enough. I retired from medical work on Dec 31, 2016. I have had a rewarding career with faculty positions at Cornell, University of Maryland, and the University of New Mexico. My last position in NM was as Head of Renal and Hypertension Division and Professor of Medicine. I was fortunate to be part of the earlier days of dialysis and kidney transplantation and later was involved in basic research in hypertension. I left

academic medicine in 1973 and thereafter was in the private practice of nephrology in Albuquer-

que for many years. In later years I alternated between nephrology and primary care. My wife of 45 years, Jean, died in 1997, and I have been married to Geri for over 18 years. I have been extremely lucky with marriages to two wonderful

women. I plan now to try to write something about medical experiences, but am not sure I have the talent for that."

Raymond Scalettar, MD '54 states "On May 21, 2017 I was promoted to Clinical Professor of Medicine at George Washington University Medical Center. I closed my DC office for the practice of Rheumatology December 31,2016 As a Medical Expert Consultant for the Social Security Administration, I review



cases appealing the ruling on disability. I continue as a Medical Consultant to the Charles E Smith Lifec-

are Center which is the fifth largest senior center in the USA. I am a healthcare consultant to the American College of Rheumatology."

**Gerald I. Shugoll, MD '54**, in North Bethesda, MD, became a great-grand-father in June 2016.

**Seymour Glick, MD '55** writes that he's still active in Be'er Sheva, Israel. He wrote, as of August 2016, that he also has 46 grandchildren, and 66 greatgrandchildren.

**Leonard Levine, MD '55** writes in October 2016 that he is "retired, but volunteering."

**Donna Younger, MD '55**, an internal medicine physician and Harvard Medical School professor, retired in 2016.

**Sidney Winawer, MD '56** is Professor Emeritus at Memorial Sloan Kettering, but lectures and continues with an active research program. He was recently recognized by the ACG for outstanding service, and by the National Colorectal Cancer Roundtable for national leadership. He writes in January 2017, "I enjoy life with my wife and our four kids, and six grandchildren in Manhattan and East Hampton."

**Selig Eisenberg, MD '57** wrote in August 2016, that he's "still vertical and practicing dermatology in the Bronx for the past 53 years."

**Michael Sulman, MD '57** wrote in October, 2016, from Rancho Palos Verdes, CA, "My wife and I continue to enjoy our retirement. Fortunately, our health



remains good and we're able to indulge our love to travel. Our children and grand-

children are close enough for weekend visits."

**Stanley Gulotta, MD '58** writes in October, 2016, from Greenwich, Connecticut, "I'm still standing! Enjoying retirement!"

**Stratos G. Kantounis, MD '58** wrote in March, 2017, that he "finally retired from surgery, but still teaching medical students and surgical residents. Joan is still painting."

Mervyn Katz, MD '58 wrote in August

2016 that he is working at a clinic for the uninsured and underserved in California at age 84.

#### Eugene Galen, MD '59

developed the Galen Capsule used for intestinal biopsy. He also published the first world report documenting the reversal of the abnormal intestinal mucosa to normal in Celiac-Sprue, utilizing-therapy of a gluten free diet. This was substantiated, and is now common medical knowledge.

Joseph Hartog, MD '59 writes that he "retired from a half-century of work as a psychiatrist, including community psychiatry, office practice, administrative (directorship) positions, research and teaching via University of California, San Francisco, with a cross-cultural focus, and as the editor of "The Anatomy of Loneliness" (International University Press)." He is also former clinical professor, UCSF Department of Epidemiology and International Health.

Harold Moskowitz, MD '59 writes that he is "still working at University CT Health Center, not doing clinical work anymore but teaching radiology to residents and medical students."

#### 1960s

**Lionel G. Deutsch, MD '60** states "retired finally (last years of practice was as the Psychiatrist of Woodstock, NY in

November 2016. He has recently moved to Ohio to be grandpa to his youngest son's first child.

**Stan Fischman, MD '60** writes in March, "Still alive and kickin'!" from Woodside, California.

**Philip R. Liebson, MD '60** writes monthly essays on the philosophy of science and medicine for an online medical/humanities journal, Hektoen International Journal.

Harvey M. Cohen, MD '61 is retired from Kaiser Permanente and the Army, Mid-Atlantic Region. I work part time as orthopedist, at the Baltimore VA Hospital and teach anatomy at the University Services, University of Health Science.

**Herbert Diamond, MD '62** wrote in October, 2016, that he is a volunteer for Volunteers in Medicine Berkshires in Massachusetts.

**Stanley J. Goldsmith, MD '62** was named a Fellow of the SNMMI by The Society of Nuclear Medicine and Molecular Imaging. The designation is awarded to members who have made significant contributions to the science, clinical practice and field of Nuclear Medicine.

As a Past-President of the SNMMI, past Editorin-Chief of the Journal of Nuclear Medicine, author

of 5 textbooks and over 300 scientific articles, member of the American Board

of Nuclear Medicine, Dr. Goldsmith was awarded the designation at a ceremony at the Annual Meeting of the SNMMI in San Diego in June 2016. In 2013, after serving as Director for 18 years,

Dr. Goldsmith stepped aside but continues to serve as a Professor of Radiology and Medicine



at the Weill Cornell Medical College and Director Emeritus of Nuclear Medicine and Attending Nuclear Physician at the NY-Presbyterian Hospital.

**Joel M. Ingegno, MD '62** wrote in October, 2016, that he recently moved to Florida (the Tampa area), but still misses NYC.

**Allen Silberstein, MD '62** writes that he has been retired for 10 years now, and spends his time sculpting, playing tennis and traveling with his wife, Irene.

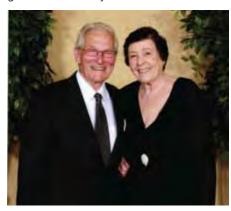
Richard Allen Williams, MD '62 was named 117th President of the National Medical Association in August, 2016. He is currently Clinical Professor of Medicine at the UCLA School of Medicineand President/CEO of the Minority Health Institute, Inc. in Los Angeles, California. https://downstatemedicala-lumni.wordpress.com/2016/10/07/richard-allen-williams-national-medical-association/

**Gerald W. Deas, MD '62** is being featured on Health Center talk show featured on networks like Bronxnet and

Brooklyn Community Access Television (BCAT). His feature will air on June 25th 11:30 a.m. – 12:00 p.m. and July 2nd 11:30 a.m. – 12:00 p.m.

**Stanley Feld, MD '63** has spent several years writing the blog, "Repairing the Healthcare System," located online at www.stanfeld.com.

Constance Shames, MD '63 celebrated her 50th wedding anniversary on September 17, 2017 She is married to Rabbi A. Allen Block. Joining them for the celebration at Oheka Castle on Long Island were many doctors, clergy, family and friends as well as their 5 year old grandson Zachary.



**Allan Naarden, MD '64**'s son, Gregory, and daughter-in-law, Ann, had a child, Dr. Naarden's fourth grandchild.

Harvey Jay Cohen, MD '65 is continuing as Walter Kempner Professor of Medicine, and Director for the Study of Aging and Human Development. He is completing a three-year term as President of the American Federation for Aging Research, and recently received

a Lifetime Achievement Award from Brooklyn College.

Harvey Joel Penziner, MD '65 wrote in April, 2017, that he had retired after 47 years as a dermatologist.

Andy Schwartz, MD '65 wrote in November 2016, "We have evolved from Internal Medicine to professor (Infectious Diseases, Internal Medicine, Microbiology) to practicing IM and ID, and now primarily Geriatrics/senior care at institutions ALs, ILs, rehabs and longterm care facilities. Working for VIRTUA Medical Group in Camden and Burlington Counties in New Jersey. Three grown children with diverse professions -- law, therapy, and options trading) and six grandchildren from ages 3 to 23. Of course, they're all the greatest folks! One older one has migrated back to NYC, and is in graduate school at Columbia. Two are in New Orleans at Tulane. Where has the time gone? We only graduated a couple yesterdays ago."

Ralph Snyderman, MD '65. Argos Therapeutics Inc. (Nasdaq: ARGS) today announced the appointment of Ralph Snyderman, M.D., and Irackly Mtibelishvily, LL.M., to the company's board of directors. "It is a privilege to welcome a pair of profoundly accomplished professionals to the Argos board of directors who offer renowned expertise in each of their respective fields," said Jeff Abbey, president and CEO of Argos. Dr. Sny-

derman is chancellor emeritus at Duke University, James B. Duke professor of medicine, and director of the Center for Research on Personalized Health Care. He served as chancellor for health affairs and dean of the Duke University School of Medicine from 1989 to 2004. During this time, he oversaw the development of the Duke University Health System and served as its first

president and chief executive officer.

Dr. Snyderman has

played a leading role in the conception and development of Personalized Health Care, an evolving model of national health care delivery. Previously, Dr. Snyderman served as senior vice president for medical research and development at Genentech, Inc., the pioneering biomedical technology firm. He has played a leadership role in important national organizations such as the Association of American Physicians, the National Academy of Medicine, and Association of American Medical Colleges.

**Sanford "Sandy" Avner, MD '66** retired Dec. 31, 2016 from Allergy & Asthma Care and Prevention Center, Lone Tree, Colorado, where he specialized in allergy, asthma and immunology. His retirement follows 44 years of "wonderful



experiences, whether it has been writing chapters published in textbooks, clinical research,

creating a foundation for the poor to educate those especially with asthma,

serving on national committee boards" or interacting with patients and fellow practitioners one on one.

Frank "Burt" Dibble, MD '66 wrote in October 2016 that he's "almost retired – doing a little long-term care. Living on the New Hampshire seacoast and loving it." His partner is still happily practicing law, and they're active in non-profits, civic affairs and travel in their light plane.

Jack V. Forrest, MD '66. With much help (as always) from my wife, Deb Pate, I now have a blog which includes an archive of many health related emails

I have sent over the last few years. The title "Jack's What Really Matters" was inspired by my



frustration with the reams of professional medical and popular press articles which emphasize trivial issues and often spread incomplete, or even false, information about diet, drugs, medical testing and procedures. Huge amounts of money are made by the food, drug and medical businesses promoting poor diet and medical care choices. We joke about used car salesmen, but food, drug and medical promoters are the worst. They are killing people to increase their companies' profits. Poor lifestyle, especially food choices; inappropriate medical tests and procedures; unnecessary drugs and supplements are the major cause of death, disability and physical suffering in western countries. We have glamorized this approach to diet and medical care

with frightening results in developing countries. Some, like China and Mexico, now have a greater problem with diabetes than we in the United States do. New topics "Diet, Longevity and Quality of Life" and "Modern Medical Care and Diet" are included. A reading list and links to other relevant material will soon be added. This blog may be shared with anyone you know who might be interested. To do this choose the "more" tab and select "share by email." At top right of blog page there is a tab "follow by email." If you want to be notified of future postings select this, type in your email address, and follow instructions to confirm. Anyone you share this site with can sign up to receive future posts in the same way. Link to blog- http://jackswhatreallymatters.blogspot.com/

**Samuel Packer, MD '66**. Promoted in March 2017 to Professor of Medicine and Professor of Ophthalmology, Hofstra Northwell School of Medicine.

John Michael Aversa, MD '67 wrote in November, 2016, "The year 2016 will be not only the 50th anniversary of my medical school graduation, but also my and Ellen's 50th wedding anniversary. This year, we welcomed our eighth grandchild, and there is another on the way. I have been blessed with four wonderful children, John Jr., a colorectal surgeon, Kristen, an OB/GYN, David, a psychiatrist, and Monica, with an MBA. God is good."

Rica G. Arnon-Rabinowitz, MD '67

wrote in October 2016 that she's "still enjoying being a full-time pediatric cardiologist."



Roger Kallhovd, MD '67 was Chief of Psychiatry & Director of the Phelps Memorial Medical Center in Sleepy Hollow, New York, from 1980-1993, and Chief Medical Officer of the Pederson-Krag Mental Health Center on Long Island from 1993-2014. He is currently in private practice in Northport, and his wife, Beverly Hoffman, is a psychotherapist in New York City. Dr. Kallhovd's daughter Christy lives in Los Angeles with their granddaughter Tess, 7. His son Erik will be living in Westchester County with their 20-month-old twin grandchildren, Emma & Conor. Pursuits include mountain biking, scuba diving, skiing and travel. I still love old movies, and Beverly is a passionate Master Gardener.

Michael Stillman, MD '67 had a solo Dermatology practice in Westchester County for 30 years, and then joined a 500-doctor multi-specialty group where he worked until mandatory retirement at age 70, three years ago. "Since then I babysit three grandchildren, play golf, and drive my wife crazy," he writes.



"She works in real estate and runs marathons. She says she will keep on working and

running as long as I'm retired."

Dr. Stillman's 36-year-old son Jeremy is

an Orthopedic PA at George Washington University Hospital, and does Ironmen Triathlons and helicopter skiing. His 40-year-old daughter Julie was an executive at Columbia/Sony Music and now is a stay at home mom who plays competitive tennis and runs. Her husband is a Urologist in Connecticut. "I have been blessed with good health thanks to good genes and modern medicine," Dr. Stillman writes, "and no thanks to poor eating habits."

**Irwin Grossman, MD '68** practices radiology and has six grandchildren, one in college. He plans to "travel and play golf, if my back holds out."

John J. O'Brien, MD '68 retired from

private practice of orthopedic surgery in 2013, and has worked part-time as Director of Orthopedic Clinics at Hartford Hospital in Hartford, CT, since 2014.



**Robert Rudnicki, MD '68** writes in April that he has retired from his Rheumatology practice. "I'm enjoying winters in Florida, visiting grandchildren (8) and traveling (Hawaii, Australia ...) See you in Spring 2018 for our 50th!!"

**Arnold Wald, MD '68**'s wife Ellen is completing her tenth year as Chair of the Department of Pediatrics, Wisconsin School of Medicine and Public Health. Arnold is working three days a week in the Division of Gastroenterology and

Hepatology where he is Professor of Medicine, and recent recipient of the Graham-Meyer Teaching Award.

**Robert D. Argand, MD '69** writes in November, 2016, that he has retired after 44 years as an ED physician.

**Edward Kersh, MD '69** writes - I have retired from clinical practice and am now medical Director of Telehealth for Sutter Care at Home. This is a part time position which allows me to call myself semi-retired. I also volunteer at the Chabot Spuce + Science Center in Oakland.

#### 1970s

**David A. Abraham, MD '70** retired back to Long Island in June 30, 2016, after nearly 14 years of ENT practice in northern Minnesota.

Philip Greenberg, MD '71. FLX Bio, Inc., a biopharmaceutical company focused on the discovery and development of oral small-molecule drugs to activate the immune system, today announced the appointment of SUNY Downstate alumnus Philip Greenberg, M.D'71, to its scientific advisory board

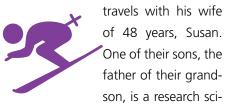


(SAB). Dr. Greenberg serves as the head of the Program in Immunology at the Fred Hutchinson Cancer Research Center as well as professor

in both the Oncology and Immunology divisions of the University of Washington, Department of Medicine. He re-

ceived his B.S. degree in Biology from Washington University and his M.D. summa cum laude from the State University of New York, Downstate Medical Center. Read more about Dr. Greenberg here: http://www.tmcnet.com/usubmit/2017/05/31/8555190.htm

**David Kauder, MD '71** retired from his role as managing partner of a urology practice in Massachusetts, and now



entist for a biotech startup in California. Their other son handles IT for an East Coast law firm. Dr. Kauder writes, "I enjoy skiing still, plus it is great to have time to read for pleasure."

**Steven Polansky, MD '71** is Chief of Staff, Mercy San Juan Medical Center, from January 1, 2016 to December 31, 2017.

**Neil J. Principe, MD '71** writes in October, 2016, that he's now "mostly retired." However, he doesn't have to move to Florida, because he's already there (Fort Lauderdale).

**Paul S. Quentzel, MD '71** has retired from active gastroenterology practice. He now volunteers at a clinic in south Florida, taking care of indigent patients. Dr. Quentzel writes, "I look forward to the 50th reunion in 2021."

Irwin Berkowitz, MD '72 writes - After 41+ years at Chestnut Ridge Pediatrics, I have called it quits. I have hung up my proverbial cleats. Among my accomplishments, aside from providing attentive, excellent patient care, I have been chosen by Castle-Connelly as a "Top Doc", elected as chairman of the Department of Pediatrics at the Valley Hospital, Ridgewood, N.J. and published a terrific book "Instructions Not Included", a pediatrician prescription for raising the best kid on the block (available at Amazon). I am living with my wife of 43 years, Kathleen, and plan to do more of the things I enjoy but didn't have the time or energy to pursue.

**Anthony Policastro, MD '72**s tenth grandchild celebrated his first birthday in July 2016.

**Chris Zazakos Jr., MD '72** retired from clinical heme/onc practice in 2011. He writes in August 2016, "enjoying

our grandchildren, and 16-year-old adopted daughter (from Guatemala). We're touring the

world, and involved in equine community with our daughter, who rides in the IEA."

Kaaren Zvonik, MD '72 writes in



March, 2017, "retired and enjoying travel and bird watching," from Green Valley, Arizona.

Peter Verril, MD '73 wrote in Octo-

ber, 2016, from Winter Haven, FL, that he is "happily retiring from my Florida OB-GYN practice in January."



#### Wilsa Ryder, MD '73 & Brian O'Malley,

MD' 74. In an article by Wellfleet.wick-edlocal.com, "Brian O'Malley and Wilsa Ryder talk about the bittersweet decision to close the doors of Provincetown Medical Group, which the couple has run since the early 1980s." To read more about their story go to the following link: http://bit.ly/2siiQrC

**David Benn Crawford, MD '74** writes that he retired in 2012, and is "living with my bride of 45 2/3 years, Kathleen. We welcomed a granddaughter, Tamsen Crawford, into our family in 2015."

Mary Didie, MD '74. As of December 2016, Dr. Didie continues to work at Blythedale Children's Hospital in Valhalla, New York.

**Uri Vaisman, MD '74** wrote in October 2016, "Still alive and still practicing radiology full time" in Appleton, WI.

**David Klein, MD '75** has been awarded the Harold S. Strasser, M.D., Good Samaritan Award. "The 1983 House of Delegates established this award to be given annually from nominations submitted by county medical societies, FMA recognized specialty groups and

hospital medical staff. Individual physicians and/or groups of physicians qualify for the Harold S. Strasser, M.D., Good Samaritan Award. The recipient of this award demonstrates love and compassion for their fellow man, and displays outstanding leadership." He will be recognized at the 2017 Annual Meeting, held August 4-6, 2017 at the Loew Sapphire Halls Resort in Orlando, FL.

**Ronald Hellman, MD '75** was appointed Associate Professor of Psychiatry in the Center for Transgender Medicine & Surgery, Institute for Advanced Medicine, Icahn School of Medicine at Mount Sinai, NY in June 2016.

Henry W. Lim, MD '75 was honored in September 2016 with the Whitehouse Distinguished Career Award, Henry Ford Medical Group, Detroit Michigan. He also received the Asian Pacific American Chamber of Commerce Salute to Excel-



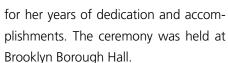
lence Award, Detroit. In March, 2017, Dr. Lim was also elected as an honorary member of the Baltic Association of Dermato-

venerology, and an honorary member of the French Society of Dermatology. On March 7, he started his one-year term as the President of the American Academy of Dermatology, the largest dermatological society in the world.

**Linda Susan Marcus, MD '75** is on the Board of Directors of Women's Dermatological Society.

**M. Monica Sweeney, MD '75.** On World AIDS Day, December 2, 2016, Brooklyn Borough President Eric L. Adams presented an award to Dr. Monica

Sweeney, vice dean for global engagement and chair of Health Policy & Management in the School of Public Health,



Gary Witman, MD '75 is executive medical director of Canna Care Docs in seven states. Canna Care Docs evaluate patients for the use of medicinal cannabinoids. In Aug 2010, Dr. Witman was hit in the back of the neck by a wave in Narragansett, Rhode Island, and since has been a complete quadriplegic at the c3 and c4 level. "I was immediately terminated from my position as both the medical director of the Town of Stoughton, Massachusetts, as well as the chief of emergency medicine at the Good Samaritan medical center in



Brockton, Massachusetts. Dr. Witman writes, "I am happy to say that I have been able to make the RI

hospital the first institution in the US to utilize medical marijuana instead of opioids for the treatment of post-operative post-surgical pain."

**Christopher Gostout, MD '76** is retiring from the Mayo Clinic Division of Gastroenterology and Hepatology where

he has held a joint appointment in the Department of Surgery as an interventional endoscopist and founder/director of the developmental endoscopy unit. I will become the chief medical officer for Apollo Endosurgery, Austin, Texas.

John A Walker, MD '76 is a full-time faculty member of the Rutgers Robert Wood Johnson Medical School where he serves as professor and Vice Chair for Education for the Department of Medicine. He is also Clerkship Director, and Associate Dean for Faculty Development.

Cynthia MacKay, MD '77 wrote in November, 2016, that she has "retired from the operating room and research. I am still in private practice in ophthalmology on the upper west side of New York City.

for glaucoma and after-cataract, and for retinal diseases including diabetic retinopathy, macular degeneration, retinal tears and detachments, and sickle cell retinopathy.

I perform laser surgery

Niki Arif Silverstein, MD '77 wrote that she missed the reunion, so she reaching out to the Class of 77. I was at 30th but I guess I have to wait until the 50th now! I am an ophthalmologist in a very busy practice in Chester, NJ; still working very hard doing surgery and seeing many patients every day, but starting to think about smelling the roses a bit more and a new phase in life.

Hope to hear from other of my long lost classmates.

Robert Jay Spatz, MD '77's son, Harrison, is a junior at UCONN Dental School, and his daughter Paula is a junior at Adelphi University. His wife, Bilha Biggeleisen Spatz, is a CHRP 1978 graduate and Occupational Therapist, Registered.

Leland Deane, MD '78 has completed two terms on the Department of Health Board Office of Professional Medical Conduct.

Richard Phillips, MD '78 is happily retired after 27 years as Director of Hepatology at Mount Sinai Medical center,



Miller school of medicine. He hopes all of his friends from class of '78 are well.

Steven E. Rubin, MD '78 shared in August 2016 that he is Vice Chair, Ophthalmology; Chief, Pediatric Ophthalmology; and Assistant Dean, Hofstra Northwell School of Medicine.

Aaron Stein, MD '79 wrote in April, 2017, that he is the "proud father of three married children (no doctors), and grandfather of five – a wonderful club." He also asks, "What happened to our profession? It's been hijacked by EMRs, insurance companies and health care administrators!" He also writes, "Where

are you Liz, Svedlsher, Rebbe and the Cine Prospecter?"

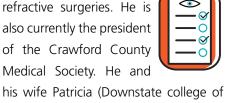
Brent Schillinger, MD '79. An interview with Dr. Schillinger is featured on blogtalkradio.com, titled "A Lesson on Medical Ethics." He has served on the Board of Governors of the Florida Medical Association, where he chaired the Council of Ethical and Judicial Affairs. To read more on Dr. Schillinger's expansive career and listen to his interview on ethics.

#### 1980s

David S. Katz, MD '80, based in Indianapolis, has now practiced occupational medicine for 33 years. His daughter, Abby, is a vice president in commercial banking at PNC Bank, Columbus, OH.

John M Pulito, MD '80 writes is still actively practicing ophthalmology in his single specialty group, Meadville Ophthalmology Associates. The group

specializes in cataract and refractive surgeries. He is also currently the president of the Crawford County



Nursing 1978) have been married for 36 years, and have three children and two grandchildren. Patricia heads the simulation labs at Mercyhurst University School of Nursing. "Not long ago I was on Who Wants to be a Millionaire but as you can see I am still working so it wasn't me," Dr. Pulito writes. "My next goal is Jeopardy."

James W. Ferguson, MD'81 writes just a note to say hi. He recently spoke at Adelphi University about his Medical Missions and why others should volunteer. His talk is available on tedxadelphiuniversity.com, where he is the 4th speaker on the list. You can also view a video of Dr. Ferguson's talk on YouTube via the following link: https://www.youtube.com/watch?v=Mx Z8FI4yIE

Michael Giuliano, MD '81 has been appointed Assistant Dean for Faculty Development at Seton Hall School of Medicine.

Aaron Saul Greenberg, MD '82 writes in October 2016 that he is "proud to have my daughter, Jill Greenberg, a third-year student in the SUNY Downstate Class of 2018.

Ann DiMaio, MD '83 wrote in April 2017, "Moving back to NYC with my husband Bill Ricci, MD. He has been appointed the Head of Orthopedic Trauma Surgery at the Hospital for Special Surgery in New York City, and begins September 2017. Cannot wait. Will visit Downstate soon!"

Scott Fields, MD '84. SUNY Downstate alumnus Scott Fields, M.D., was appointed as senior vice president and



pharmaceutical development head, Oncology at Bayer on June 5th. Scott Fields, M.D., joined from

Vertex Pharmaceuticals, where he was

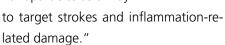
vice president and head of Clinical Oncology and responsible for the global development of all oncology. He did his Internal Medicine and Hematology/ Oncology training at Columbia University Medical Center. For more information go to the following link: http://bit. ly/2qXFNkI

**Carol Kornmehl, '84** was again named a Top Doctor of New Jersey.

Joel H. Selter, MD '84 now offers a new treatment to help patients to safely tolerate highly allergic foods. He is one of only a few private practice allergists in the US to be doing oral immunotherapy (OIT).

**Steven Bernstein, MD '85** writes in April, 2017, "I continue as Vice Chair for Research at the University of Maryland at Baltimore in the Department of Ophthalmology. We are looking at

ways to enhance optic nerve regeneration, and have identified nanoparticles as a way



**Edward Chapnick, MD '85** is Senior Vice Chair of Medicine and Director of Infectious Diseases at Maimonides Medical Center in Brooklyn, and Professor of Clinical Medicine at the Albert Einstein College of Medicine in the Bronx.

Lyn D. Weiss, MD '85, chair of physical

medicine and rehabilitation (PM&R) department at the Nassau University Medical Center (NUMC), has co-authored her ninth medical book, a revised, expanded and updated new edition of the first and only Q & A review for physical medicine and rehabilitation. For more information go to the following link: http://www.publicnow.com/view/3A4AB081FA52AF1AB74FF1133B9ABCAA2C2097D7

**Lisa Merlin, MD '86**, Downstate Distinguished Professor of Neurology, Physiology, and Pharmacology, co-authored an article with Sheryl Smith, PhD, SUNY Downstate's Professor of Physiology and Pharmacology, on their

research suggesting that a novel inhibitory brain a receptor is a mechanism for remission of epilepsy

in adolescence. http://www.downstate. edu/news\_releases/2016/news\_release\_ full28.html

**Donald Sherak, MD '86** lectures at Tufts Medical School, and maintains a clinical and forensic practice. He now also has a son studying medicine at Einstein College of Medicine.

Salvatore Volpe, MD '86 will receive a national Patient-Centered Primary Care Collaborative practice award in November, 2016. https://downstatemedicalalumni.wordpress.com/2016/08/24/salvatore-volpe-md-receives-pcmh-practice-award/

**Giuseppe Del Priori, MD '87** is the Chief Medical Officer at TYME (TYMI-NASDAQ), and professor at the Morehouse School of Medicine. He is launching efforts now to start screening for endometrial cancer.

Claudia K. Donovan, MD '87 has been with Kaiser for 25 years, as of July, 2016, and has been appointed Kaiser Central East Transplant Hub Medical Director. She also has two children attending college at the University of Missouri.

Mark H. Jackson, MD '87. As of April 2015, Dr. Jackson works in the field of Addiction Medicine as Chief of the Medical Unit of START Treatment & Recovery Centers in New York City.

Jonathan Tarrash, MD '87 wrote in October, 2016, from Boca Raton, FL, that he is "proud to report our two sons are pursuing careers in law, and our daughter started medical school."

**Joseph Di Vito, MD '88** has been on the faculty of The Albert Einstein College



of Medicine of Yeshiva University teaching in Preclinical courses and clinical clerkships since 1993. He was recently promoted, in

Fall 2016, to Professor of Clinical Radiology and Professor of Clinical Obstetrics, Gynecology, and Women's Heath.

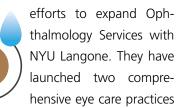
**Thomas McGinn, MD, MPH '89** shared in August 2016 that he is Chair of Medi-

cine for Hofstra-Northwell School of Medicine, and Senior Vice President and Executive Director for Northwell Health Systems.

Daniel W. Wilen, MD '89, an Orthopedic Surgeon at the University Physicians of Brooklyn, has been named a 2017 Top Doctor in Brooklyn, New York. He graduated from SUNY Downstate Medical Center College of Medicine in 1989.

#### 1990s

Douglas Lazzaro, MD '90, a longtime borough physician and resident, leads



in Brooklyn. Dr. Lazzaro is taking a lead role in helping NYU Langone identify opportunities for continued expansion. Chief of ophthalmology at NYU Lutheran Medical Center since 2003, he recently took on additional responsibilities for NYU Langone as vice chair of clinical affairs and business development for the Department of Ophthalmology and physician director for the health system's network development in Brooklyn.

Mark Stewart, MD, PhD '91 was named SUNY Downstate Interim Provost in August. As Interim Provost, he will work closely with the office of Michael Lucchesi, MD, Downstate Officer in Charge, and with Downstate's academic leaders to strategically plan

academic programming, and maintain academic scholarship and research. Dr. Stewart will also serve as campus liaison with SUNY on academic matters. https://downstatemedicalalumni.wordpress.com/2016/08/22/mark-stewartmd-suny-downstate-interim-provost/

Eric Singman, MD '92, PhD is Division Chief of the General Eye Services Clinic of the Wilmer Eye Institute in Baltimore, Maryland.

Alfonso Ciervo, MD '93 shared his daughter Francesca graduated from NYU and his daughter Samantha is now entering NYU. Congratulations to both!

Theodor Kaufman, MD '93 is Program Director for General Surgery in Cooperstown, NY.

William Davis, MD '95 is a cardiologist,

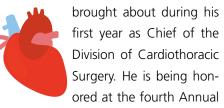
author of the New York Times Bestselling Wheat Belly Books, and health crusader



grain-free lifestyle. Read more about his works, here: http://www.wheatbellyblog.com.

Myles Wolf, MD '96. After serving as Margaret Gray Morton Professor of Medicine and founding director of the Center for Translational Metabolism and Health at Northwestern University's Feinberg School of Medicine in Chicago, Dr. Wolf was appointed Professor of Medicine and Chief of the Division of Nephrology at the Duke University School of Medicine in Durham, North Carolina, in August 2016.

Daniel L. Beckles, MD '97 recently talked about the changes at Downstate



Caribbean American Healthcare Awards Thursday June 22 nd, 2017, for his accomplishments in medicine.

Munish Khaneja, MD '97 joined Altruista Health in October as Chief Medical Officer joins Altruista Health as Chief Medical Officer. He will oversee clinical strategy and regulatory innovation across all products and services, and will work directly with Altruista Health clients to translate those innovations into clinical, operational and financial improvements. https://downstatemedicalalumni.wordpress.com/2016/10/11/ munish-khaneja-md-joins-altruista/

Andrew Moulton, MD '97. HCA honored Sarasota Orthopedic Associates' Andrew Moulton, MD, with the HCA Humanitarian First Award. To read more about Dr. Moulton go to the following link: http://www.beckersspine.com/ spine/item/36919-dr-andrew-moultonreceives-hca-humanitarian-first-award-5-key-notes.html

#### 2000s

Maya Moorley, MD '01 wrote in November 2016 that she is still in private practice in Internal Medicine at Mount Sinai Doctors Long Island-Huntington, since 2004. She's been married 13 years, and has two children, Ajay, 10, and Avani, 4. "Still friends with many classmates," she writes, "including Steven Brunner (pediatrician, '01), Paula Lester (geriatrician, '01) and Izchak Kohen (geriatric psychiatrist, '01)."

Michael A. Secko, MD '04 is a faculty



member of the Department of Emergency Medicine at Stony Brook University Hos-

pital, Stony Brook, New York, as of July 2016.

Kristina Wittig, MD '08. Kyle Jellings, talk show host on KHTS AM 1220, sits down with Dr. Kristina Wittig, a urologic surgeon and an assistant clinical professor of surgery at local City of Hope facilities. Topics both professional, like what signs people should be on the look out for and treatment options, and personal, like her childhood in Russia and her earlier desires to become an environmental scientist are discussed. Listen to Alumna Kristina Wittig, MD' 08, reflecting on her journey to becoming surgeon

she is today." Now a urologic surgeon and assistant clinical professor of surgery at City of Hope Santa

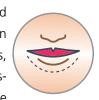


Clarita and Antelope Valley, Wittig noted she loves that her specialty allows her to cultivate personal relationships with her patients while still acting as their surgeon."

Lauren Adams, MD '10, a dermatologist, joined the White Plains, New York, Hospital Group Physician Associates division in January, 2017. Dr. Adams earned her undergraduate degree from Duke University and her medical degree from the SUNY Downstate College of Medicine. She completed her internship at Maimonides Medical Center, and her dermatology residency at the SUNY Downstate Medical Center in Brooklyn.

The White Plains Hospital Group has of-

fices in Mount Kisco and Scarsdale. In addition to offering screenings, laser surgery and cosmetic dermatology, the



group also offers Mohs surgery. http://westfaironline.com/84776/dermatologists-join-white-plains-hospital-group/

**Terrance Bradley, MD '12** is a Heme/ Onc fellow at Jackson Memorial, University of Miami.

**Sara Cohen, MD '13** wrote in December 2016 that she is chief resident third-year at Tufts University.

#### VISIT OUR WEBSITE

## We invite you to keep in touch and become informed

- Learn about the range of programs we support for our Downstate students
- Participate in the Mentoring & Career Mentoring programs with our student body
- Become a Class Chair and/or attend our 2018 Alumni Reunion (5/4/18 - 5/6/18)



Visit us today at: http://www.downstate.edu/alumni

## In Memoriam

Edited by Constance Shames, M.D. '63

#### Marvin Kochman, M.D. '53

Dr. Kochman was born in Brooklyn and spent his entire



medical career in Brooklyn. He was always interested in how things work and especially the human body. He chose ophthalmology as his specialty as it allowed him to study the entire body including neurology. He became a surgeon as it allowed him to use his hand skills as well.

After graduating from Downstate he studied with

Dr. Richard Troutman and then became a captain in the U.S. Air Force. Upon entering private practice he established the first licensed ambulatory facility in New York (in Brooklyn)and the second one in New York State.

As an alumnus of Downstate, Dr. Kochman became interested in the Alumni Association and his early interest in advocacy for scholarships for medical students. He eventually became President of the Alumni Association and Chair of the Board of Trustees.

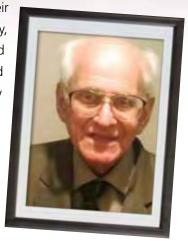
In a career which spanned over 60 years he was a senior partner in The Brooklyn Surgery Eye Center, a Fellow in the American Academy of Ophthalmology, and a Fellow in the American College of Surgeons. He served as an instructor in the Department of Ophthalmology at Downstate and as guest faculty at Mahattan Eye and Ear.

After his retirement in 2000 his major interest was in activities to support the school and the students at Downstate. He initiated the Kochman family fund and started the 1953 class fund. "I owe everything to Downstate" he once stated. He was a scholar, a teacher, an athlete and a world traveler. He distinguished himself further by being a major force for helping our students and our association. He will be greatly missed.

#### Gerald M. Greenberg, M.D. '59

Dr. Greenberg died peacefully on Nov. 21, 2015 at home on hospice care at the age of 83 at his home in Roslyn Heights, New York. He was the beloved husband of Abby Greenberg, M.D. '59.

In 2005, in honor of their 50th wedding anniversary, Dr. Gerald Greenberg and his wife Abby established the Drs. Gerald and Abby Greenberg scholarship fund to be awarded to married medical student couples, as they met at Downstate and graduated together in 1959 with a six month old addition to their family. They



wished to provide help to other couples who were in similar circumstances.

Dr. Gerald Greenberg served as the Chief of Pulmonary Medicine and as Chief of Medicine at the Greenpoint Hospital Affiliation of the Jewish Hospital and Medical Center of Brooklyn. From 1971 to 1980 he was Associate director of the Department of Medicine and Director of the Pulmonary disease at Jamaica Hospital. He served as Chief of the Pulmonary Division and Chief of the Clinical Care Division at Interfaith Medical Center (formerly Brooklyn Jewish Hospital). He then served an attending physician in charge of the tuberculosis OPD until he retired in 2011.

Dr. Greenberg educated multiple generations of physicians and he is remembered as a man of great integrity, character and as a great teacher and physician.

Eight years ago, Jerry was diagnosed with Alzheimer's disease. He jumped at the change to take part in an Alzheimer's study of a new medication. He became part of a group of patients with the same disease. The Long Island Alzheimer's Foundation became part of his life. They gave him happiness, friendship and contentment. He will always be remembered as a great teacher and a great physician.

## Obituary for a Major Donor

#### CARL NEEDLES, M.D.

Dr. Carl Needles, a trustee of the Needles Foundation died recently at the age of 82. He was a graduate of the University of Rochester School of Medicine and Dentistry class of 1960, He was a resident in Pediatrics at Boston University Medical Center and Case Western University Hospital.

Dr. Needles practiced Pediatrics in Merrick, Long Island, New York for most of his professional career. As a trustee he was most interested in the students who received grants from the Alumni Association and often kept in touch with them during their time in medical school and residency. He was also very interested in all kinds of research and read many research journals each week.

The Alumni Association will miss him. His generosity carried on the wishes of his uncle, Abraham Isaac Needles, M.D. 1915.



Dr. Abraham Isaac Needles, M.D. '15

m Galicia, a section of Poland, in 1889. His family, consisting of his parents and 4 siblings, emigrated to the United States in 1900, and settled in New York City, Other relatives had already reached the U.S.A., had settled in Philadelphia, and changed the family name from Nadel to Needles so that their tailoring business could use the slogar. "You can't make a fine shirt without NEEDLES."

Dr. Needles finished high school but never attended college (it was not a requirement). He applied to and was accepted by the Long Island College of Medicine, graduating in 1915. This type of independence remained with him throughout his life and, indeed, permitted him to prosper. After internship, he joined an uncle in private practice on the upper west side. His work included many house calls which were made via horse and buggy and he made many home deliveries as well.

Later, Dr. Needles established his own office in his home and continued to treat his patients there and in their homes. Many of his patients were drug addicts, some were prostitutes and other simply destitute. In addition, he continued to make house calls to those too ill or too feeble to travel to his office. Although usually in good humor, and always a fan of a good joke, he often railed against what he percieved as the world's social, religious and political injus-

more than once. One of his favorite diversions was debating, and more than anything he relished close contact with family members.

His love of medicine and empathy for those less fortunate led him to establish a charitable trust to aid students of Law and Medicine.

## The Needles Fund

by Constance Shames, M.D. '63, Editor

tices. He was able to continue his thriving practice until two days before his sudden death in 1987 at the age of 98.

Although he never married, Dr. Needles had several long-lasting relationships, even up to the time of his demise. Domestic and international travel took him around the world. (The Editor is grateful to the nephews of Dr. Needles, Dr. Carl F. Needles and Dr. Steven M. Green for their assistance in preparing this article. The photo is from their personal collection). ■

## In Memoriam



#### Leonard Bristol, MD '44

Leonard J. Bristol M.D. passed away at home Oct. 22, 2016 at the age of 97. Dr. Bristol was born in New York City on April 28, 1919, and grew up in Peekskill, working in his father's grocery store. He completed his pre-med-

ical education at New York University, and his Doctorate of Medicine from Long Island College of Medicine in 1944. He also married Virginia (Ginny) Gallagher in 1944. In November 2015, they celebrated their 71st anniversary.

Prior to coming to the Adirondacks he was appointed LTJG in the US Navy. Dr. Bristol served as an assistant radiologist at the National Naval Medical Center, USA Navy Hospital at Bethesda, Maryland. He was also a full-time fellow in radiology at The Johns Hopkins University Medical School, Baltimore, Maryland. In 1949, he became the director of the Department of Radiology of the Trudeau Institute. He was appointed special consultant to the Division of Occupational Health, Department of Health, Education and Welfare, Public Health Service, Washington, D.C. in connection with the study of health problems in the asbestos industry and other studies of pulmonary diseases, and was a certified reader of coal workers chest x-rays by the National Institute of Occupational Safety and Health, Public Health Service.

Dr. Bristol was a diplomate of the American Board of Radiology and a Member of the American College of Radiology, American Medical Association, the Radiological Society of America, Eastern Section American Trudeau Society, Franklin County Medical Society (of which he served as president 1965-1966), a life member of the Medical Society of the State of New York, the Saranac Lake Medical Society, associate member of the Baltimore City Medical Society, Baltimore, Maryland (1948-1950), Charter Member of the Northeastern New York Radiological Society and member of the New York State Chapter of American College of Radiology.

#### Charles M. Plotz, MD '44

Dr. Plotz died peacefully at home November 20, 2016, surrounded by his family. He was born December 6, 1921 in New York. He graduated from Columbia College at 19, and received his M.D. degree from Long Island College of Medicine (now SUNY Downstate Medical Center) at 22. After his internship at New Haven (now Yale New Haven) Hospital, he married Lucille Weckstein, who survives him and with whom he shared 71 years of a wonderful marriage. After serving as a Captain in the Army Medical Corps and completing his residency, Charles entered the new field of rheumatology, becoming the first rheumatology fellow at Columbia-Presbyterian Medical Center. He participated in much of the seminal research in the field, and in the 1950s, together with Dr. Jacques Singer, developed the latex fixation test, which quickly became and has remained the standard test for rheumatoid arthritis. Charles's academic achievements made him a much sought-after participant in conferences around the world, allowing him to indulge his love of travel and leading to friendships with colleagues all over the world. In 1965 he was invited to spend a month heading the American medical outreach effort in Kabul, Afghanistan, where he gained firsthand knowledge of that then peaceful part of the world. Charles was for many years a professor at Downstate and was the founding chair of the family practice department there, a position he held until his retirement. He also maintained an active private practice and was beloved by his patients. Above all, Charles lived life to its fullest. He was a vibrant, active, funfilled person, whether playing tennis, traveling the world with Lucille, telling a seemingly limitless supply of jokes (always delivering the right one at the right time) or shopping for food. As part of his lifelong commitment to improving the lives of others, Charles took the older two of his three sons to join the 1965 Selma to Montgomery civil rights march with Dr. King.

#### Thomas Edward Perdue, MD '51

Dr. Perdue, age 99, passed away peacefully January 11, 2017 at NCH Baker Hospital Downtown in Naples, Florida. He was born on July 21, 1917 in Watervliet, New York. He attended the University of Iowa at Iowa City and the University

The Alumni Association recognizes in the "In Memoriam" section, not all alumni listed are recently deceased.

As we become aware of the passing of our alumni we recognize them to provide their classmates with an update.



of Buffalo, and received his medical degree in 1951 from State University of New York Downstate Medical Center in Brooklyn. He interned at University of Buffalo hospitals. He was a much respected and well-loved family physician in Massena,

New York from 1954 until his retirement in 1988, and delivered thousands of Massena-area babies .

He served proudly in World War II as an Army Air Corp Navigator/Bombardier on a B-17 in the China-Burma-India theatre. He flew missions over the Himalayas ("the hump") delivering gasoline to allied forces in China.

#### Robert Rauch, MD '53

Dr. Rauch died September 27, 2016, in Boyton, Florida. He served for two years in the Air Force at Anchorage, Alaska, and went on to practice OB/GYN in The Five Towns for more than 50 years.

#### Harold Bernanke, MD '54

Dr. Bernake died suddenly August 20, 2016 in Rockville, MD at 87. He was a lifelong New Yorker and served as a physician on active medical staff at Montefiore Hospital for decades. He enjoyed medical practice until shortly before his death, and relished travels, conversation, good food, and a long laugh.

#### Franklin Glickman, MD '54

Dr. Franklin of Roslyn Heights, New York, and Boynton Beach, Florida, died March 10, 2017, at 87 years old, leaving his wife, of 64 years, Leatrice (Lea), his sons and adored grandchildren. He was a classic Renaissance man, a graduate of Erasmus Hall High School '47, a Phi Beta Kappa graduate, on a full academic scholarship from Hofstra University, '50. He also became a full professor at SUNY Downstate Medical School. He maintained a private dermatology practice in Brooklyn, and became Chairperson of the Graduate Medical Education Department at Wyckoff Heights Hospital in Brooklyn. He earned a master's degree in health care administration

from New York University in 1990. At Wyckoff Heights Hospital, he was honored with the Humanitarian Award in 1973. He also wrote two textbooks, and 80 peer review articles

#### Martin I. Gold, MD '54

Dr. Gold, '54 died on December 12, 2016, of Alzheimer's. His post graduate training was at the Graduate Hospital in Philadelphia. He was an Associate Professor at the University of Maryland and subsequently worked at the VA Hospital in Miami, Florida, as a Full Professor. He was Board Certified in Anesthesiology, and contributed 33 medical journal articles and abstracts. He is survived by his wife, Betty, and 3 children, Barbara, Cindy and Michael.

#### Frederick William, MD '54

Dr. William of Greenport, NY, formerly of Syosset, NY, died November 14, 2016. He was the husband of Sally Hansen Norcott and the late Margaret Norcott, and father of Linda, Bruce, Jan, Craig, Sandra and Scott. He is survived by six grandchildren and three great grandchildren.

#### Sylvan H. Sarasohn, MD '54

Dr. Sylvan "Sy" Henry Sarasohn, 87, of Doral FL, died Dec 29, 2016. Born in Newark, NJ, Dr. Sarasohn attended We-



equahic High School. He completed his undergrad, Phi Bete Kappa, at Syracuse University and earned his MD at SUNY Downstate. Dr. Sarasohn was an Air Force captain/flight Surgeon in 1956, and then completed his residency at Columbia

Presbyterian in New York. He moved to Florida to co-launch a successful group. He was president of the Florida Radiological Society and a fellow of the American College of Radiology. Maintaining connections with family and friends was his forte during his 45-year radiology career.

#### Stanley Dunkelman, MD '55

Dr. Stanley S. Dunkelman, a 40-year resident of Goshen, New York, died December 21, 2016 at his home in Pompano

## In Memoriam



Beach, Florida. He was 86. Dr. Dunkelman attended the University of Rochester, where he graduated Phi Beta Kappa, and SUNY Downstate Medical School, where he was inducted into the Alpha Omega Alpha National Medical Honor Society. Dr. Dunkelman was an endocrinologist, practic-

ing in Middletown, New York, until his retirement in 1983. The Stanley S. Dunkelman M.D. Diabetes Treatment Center at Orange Regional Medical Center was dedicated in his honor in 1995 in recognition of his pioneering efforts in the field of diabetes care.

He was a veteran of the United States Army, and served in Germany as a physician. He was also an active member of the Goshen, NY community, where he helped establish a Goshen High School soccer team exchange with Fortuna Bonn in Bonn, Germany.

#### Robert Bertero, MD '56

Dr. Bertero died May 19, 2016. He was born in 1931 in Brooklyn and grew up playing on the monkey bars in Prospect Park with his best friend Charlie, browsing the Brooklyn Museum, and enjoying the Brooklyn Botanical Gardens. He attended Stuyvesant High School, Columbia University and SUNY Downstate Medical School, and was a primary care physician specializing in internal medicine for nearly forty-five years serving the Manhattan community affiliated with St. Vincent's Hospital, Greenwich Village. He was one of the last physicians who regularly made house calls to patients too ill to come to his office. George had a great sense of humor and was a wonderful storyteller. He was a brilliant man who could discuss virtually any subject.

#### Frank DiPillo, MD '56

Dr. DiPillo, age 87, a dedicated physician, beloved mentor to medical students and residents, died on Wednesday, Nov. 30, 2016, surrounded by his family. He was born and raised in the Bronx and moved to Brooklyn before living in Warren, New Jersey, since 1987. He graduated summa cum laude

from St. John's University and received his medical degree from SUNY Downstate Medical School. Dr. DiPillo served his



residency and fellowship at Long Island College Hospital. He then became an attending physician and later served as chief of special hematology/ oncology from 1970 to 1998 before being promoted to chairman of medicine from 1998 to 2012. All the while, he trained and mentored thousands of medical

students, residents and fellows. He was beloved by his patients, colleagues, and staff. He loved spending time with his family, reading, watching old movies, and Frank Sinatra. Dr. DiPillo served in the U.S. Navy. Published in Star-Ledger on Dec. 2, 2016.

#### Morton L. Kurland, MD '56

Dr. Kurland passed away in August, 2016, at 83. He retired in 2014 from his psychiatric practice in Rancho Mirage, California, where he practiced for 40 years after leaving his practice in New York City and his teaching position at the New Jersey College of Medicine. He was associated with the Eisenhower Memorial Hospital, The Betty Ford Clinic, and the Barbara Sinatra Children's Center.

#### Charles Rabiner, MD '56

Dr. Rabiner, 84, died on January 2, 2017. He was former Chairman of Psychiatry at L.I.J. Hillside Medical Center. In 1987 he became Medical Director of Mesa Vista Hospital in San Diego, CA.



#### William "Bill" Sciales, MD '56

Dr. Sciales died on September 27, 2016, at 86. He is survived by his wife of 60 years, Dr. Nancy Shevell Sciales, MD.

Maureen K. Molly, MD '57- died on March 18, 2017.

#### Catherine Kane, MD '59

Catherine S. Kane, MD of Stony Brook, NY passed away on December 20, 2015 in her 82nd year. Dr. Kane spent most of her life in Brooklyn, where she was Medical Director of the Angel Guardian Home, providing services to young people in need, including children in need of adoption, foster kids, unwed teen mothers and babies born addicted to drugs.

#### Martin Robert Feller, MD '60



Dr. Feller passed away Aug. 31, 2016, at Good Samaritan Hospital, West Islip, NY, surrounded by his family, from complications of Crohn's Disease. He was born June 19, 1936 in Brooklyn, NY, to Louis and Fay (Cohen) Feller. Dr. Feller

was a Phi Beta Kappa graduate of the University of Wisconsin-Madison, and of SUNY Downstate School of Medicine. He was a captain and physician in the US Air Force. Dr. Feller was a radiologist in West Islip, NY, with South Shore Radiologists PC.

#### John A. Crocco, MD '61



John A. Crocco, MD Prominent member of the academic medical community who left an indelible mark John A. Crocco, M.D., died Sunday Dec. 4, 2016, after a long illness. Dr. Crocco was a prominent member, both regionally and nationally, of the academic

medical community where he left an indelible mark. Dr. Crocco earned his bachelor's degree from Georgetown University and his MD from the State University of New York-Downstate Medical Center. He went on to complete his residency in internal medicine at St. Vincent's Hospital in New York, and pulmonary diseases at Kings County Hospital, SUNY-Downstate Medical Center. His education propelled him into a distinguished medical career. Dr. Crocco rose through the academic ranks, first at SUNY-Downstate and then at New York Medical College. A stint with the military, where he achieved the rank of major in the U.S. Army Reserves, punctuated his career, and he served as chief of professional services for the 1208th

U.S. Army Hospital for four years. Throughout his career, he published numerous articles on pulmonary diseases, including the landmark studies on massive hemoptysis in 1968 and on tuberculous pericarditis in 1970. He held extensive leadership positions in the New York Trudeau Society, the President's Commission on Smoking and Health, the New York Lung Association, and the American College of Physicians. In 1977, he was invited to write the introduction for the classic collector's edition of the iconic medical text, Gray's Anatomy. He served as editor for several prestigious journals and was elected to the American College of Physicians, the American College of Chest Physicians, and the New York Academy of Medicine. In 1983, Cardinal Terrence Cooke installed him as a Knight of the Sovereign & Military Order of Malta of the Roman Catholic Church. He served as chief of the Pulmonary Division and associate director of Medicine at St. Vincent's Hospital for 15 years. He laid the foundation for the transition to University Hospital status in affiliation with Rutgers-Robert Wood Johnson Medical School. After his retirement in 2000 until shortly before his death, he remained exceedingly active as a clinical professor of medicine at Rutgers-Robert Wood Johnson Medical School, where he earned a Certificate of Excellence in teaching every year since 2003. In 2005, he received The Gold Humanism Honor Society Award in recognition of his exemplary service to others, his integrity, clinical excellence, and compassionate and respectful relationships with patients, families, and colleagues. Jersey Shore Medical Center presented him with the Department of Medicine 2007 Lifetime Achievement Award. In early 2016, he received the Alumni Achievement Award in Pulmonology from SUNY-Downstate Medical Center in recognition of significant contributions to the welfare of mankind.

#### Thelma Jones, MD '63

Dr. Jones, 79, of Scarsdale, New York, passed away unexpectedly on March 24, 2017 at White Plains Hospital where she was on staff since 1973. She is survived by her daughters, Amy and Michelle Sack, their father, Joshua Sack, grandson Jack Blasbalg and many close friends. Born and raised in the Bronx, New York, she was a longtime resident of Scarsdale,

## In Memoriam



New York. Dr. Jones graduated in 1955 as Valedictorian of the Bronx High School of Science. She went on to graduate cum laude from both Barnard College ('59) and SUNY Downstate Medical Center, where she was one of only ten females in

her graduating class in 1963. She had a private practice in Internal Medicine and Hematology in Scarsdale for thirty years. She later had a private practice in integrative medicine, also in Scarsdale, and was passionate about a holistic approach to patient care. She had hospital appointments at White Plains Hospital, where she served as Chief of Hematology for eight years, Montefiore Hospital and St. Agnes. She served as the past President of the Central Westchester American Cancer Society and was on the Board of Directors of the American Cancer Society among many other honors.

#### John F. Mullane MD '63, PHD, JD

Dr. Mullane was born in Brooklyn, NY, and died Aug 13, 2016 at 79. He received an MD from SUNY in 1963, a PHD in 1968 and a JD from Fordham University in 1977. Dr. Mullane was an associate medical director at Ayers Labs, a division of American Home Products in Wilmington DE 1973-75, director clinical research from 1975-76, became VP of Clinical research from 1975-76.



cal in 1977, VP Science 1978-82, executive VP 1983-88, and President of Mullane Health Care Cons in 1989. He was also director of drug development at DuPont Med. Products in 1990, and Senior VP from 1991-94. He also served as a Lt. Col. In the US

Army from 1970-73. He received the Upjohn Achievement award in 1970, and was named a NY Heart Assoc. Crawford-Maynard fellow 1966-68. His achievements included the development of major drugs including Inderal, Premarin, Lodine, and Coumadin.

Arthur Young, MD '65 died on May 5, 2017.

#### Elinor Sverdlik Sachs (Dr. Elinor Kron), MD '70

Dr. Kron, age 72, passed away in St. Francis Hospital on July 20, 2016. Born in Washington, DC, she graduated from South High School in Valley Stream. She graduated from Cornell University in 1966, with a major in chemistry. Elinor received her MD Degree from Downstate Medical Center, Brooklyn, New York in 1970, and did her residency in radiology at Montefiore Medical Center in Bronx, New York. Upon moving to Hartford, she joined the Radiology Group at Mount Sinai Hospital. Continuing in that field, Elinor became a partner in Radiology Associates of Hartford, serving the St. Francis Care Group, specializing in mammography, until her retirement in 2013. For much of her career she was the only female radiologist in her practice, and she took pains to extend herself to the many female technicians who worked with her. The female technicians in the Mammography Unit dubbed her "Queenie." From a young age, Elinor enjoyed painting, a pastime she later resumed as she approached retirement. She explained that since her profession required her to analyze images, she wanted to adapt those skills to imagery in painting. In addition to studying with recognized local artists, she came under the tutelage of Sir Roland Richardson, an internationally-exhibited painter from St. Martin, who is known as the "Father of Caribbean Impressionism." Roland recognized her aptitude with color and line, and invited her to study in his Master's Classes on St. Martin. Elinor was invited to display her work at some juried shows in Connecticut, and people purchased her pieces for their collections.

#### Kenneth Kellner, MD '71

Dr. Kellner died January 14, 2017 after a battle with cancer, at Haven Hospice in Gainesville, Florida. He was raised on Long Island, New York and began his career with an interest in embryology at Union College. Attending the State University of New York, Downstate Medical Center in the Combined-Degree Program, Dr. Kellner received both a M.D. and Ph.D. degree in 1973 doing research in embryology. This was followed by a residency in Obstetrics and Gynecology at Jackson Memorial Hospital, Miami and a fellowship in Maternal-Fetal Medicine at the University of Florida. He was board certified in



both fields and had been on the faculty of the University of Florida since 1977.

Dr. Kellner's interests were diabetes and pregnancy and psychosocial aspects of obstetrics. He was the Director of the Perinatal Diabetes Program at the University of Florida and

founder and Director of the Perinatal Mortality Counseling Program. He was an internationally-recognized expert on perinatal bereavement and perinatal loss, and served as President of the North American Society for Psychosocial Obstetrics and Gynecology.

Dr. Kellner was the Director of the Third Year Clinical Clerkship in Obstetrics and Gynecology for 25 years. The Association of Professors in Obstetrics and Gynecology, the specialty's national educational organization, recognized the UF Clerkship as the best in the country. During his tenure, the clerkship was recognized by the graduating medical school class with the Golden Apple Award as the best clinical clerkship nine times, more than any other clerkship. He was recognized by the College of Medicine as an exemplary teacher every year and twice by his department with the J. Lee Dockery Teaching Award and APGO Award for teaching excellence. Dr. Kellner served on numerous educational committees and was instrumental in the development of many pioneering courses, clerkships and curriculum designs. In 2012, he was awarded the Lifetime Achievement Award by the College of Medicine Society of Teaching Scholars.

#### Lynn Beinfield, MD '76

Dr. Beinfield was born in Brooklyn 1967. She graduated from SUNY Downstate College of Medicine, where her father and her grandfathers, Henry Beinfield and Harry Koster, attended before her. She practiced psychiatry in Newtown before moving to Colorado Springs, Colorado. She died Jan. 1, 2017, at Baylor Hospital in Dallas while undergoing treatment for leukemia. She was 67.

#### James Leslie Perry, MD '77

Dr. Perry was born April 21, 1935 in Kansas City, Missouri, and died January 22, 2017, at 81. He his survived by his wife Linda, of almost 59 years, and their extensive family and family of friends. Dr. Perry joined the US Air Force where



he served as a radar technician and was discharged with rank of Staff Sergeant in 1956. He also joined Air Force ROTC and received a 1st Lieutenant Commission and a BS in Electrical Engineering in 1960. Dr. Perry accepted an offer from Sperry Gyroscope Company on Long Island where he worked for three years

and then moved to Grumman Corporation and was assigned to team developing the radar system for the Apollo 11 Lunar Module which landed on the Moon on July 20, 1969. During the 60's he enrolled in night courses at Adelphi University, MS in Physics 1965, and in Columbia University for Pre-Med courses. In 1973, he began four years at the State University of New York School of Medicine in Brooklyn, followed by Internship at VA Hospital and residencies in Nuclear Medicine and Psychiatry at Long Island Jewish Hospital. He accepted a staff position in the Metropolitan Jewish Geriatric Center on Coney Island for several years until hired by the NY State Department of Mental Health and served the next 20 years in state psychiatric hospitals and out-patient clinics treating persons afflicted with schizophrenia.

**Robin Goldman, MD '82** died in January of 2016.

#### Menachem Friedman, MD '86

Dr. Friedman was an internist affiliated with Maimonides for over 25 years, and specialized in Geriatrics. He died suddenly on March 10, 2017.

**Christopher Lopresto, MD '90** passed away earlier this year.



## 2017 ALUMNI REUNION











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MAY 4, 2018

12:45 PM **Welcoming Reception in the Education Building at SUNY Downstate** 

1:00 PM - 3:00 PM **Tour Downstate Medical Center** and Kings County Hospital

5:00 PM - 7:00 PM **Cocktail Reception NY Marriott** at the Brooklyn Bridge (All Classes)

#### **DINNER DANCE**

Price: \$250/person. A special price of \$100/person for Class of 2008 and 2013 Special Diets available - fish, kosher, etc.; Seating requests accommodated.

#### **TRANSPORTATION**

Complimentary transportation will be provided on Friday afternoon taking people to and from the Medical School and Marriott NY at the Brooklyn Bridge.

MAY 5, 2018\*

8:00 AM - 8:45 PM **Annual Alumni Business Meeting** 

8:45 AM - 10:45 AM **Scientific Program** (CME Credit)

11:00 AM - 11:30 AM **Address to Aumni** Wayne Riley, MD, MPH, MBA, **MACP** 

11:30 AM - 1:00 PM **Awards Ceremony** 

1:00 PM - 2:30 PM **Complimentary Luncheon** 

6:30 PM - 7:30 PM **Reception, Grand Ballroom** 

7:30 PM - 11:30 AM **DINNER DANCE, Grand Ballroom** 

8:00 AM - 10:00 AM **Complimentary Breakfast for** guests at the hotel

#### **ACCOMODATIONS**

- 1. Blocks of rooms are reserved until 4/13/18 at the Marriott NY at the Brooklyn Bridge. Call 718.246.7000 or 1-888-436-3759 and mention the "Alumni Association" to get the special low rate.
- 2. Singles and doubles are \$249.00 plus tax per night.
- 3. Valet parking is available for a fee at the hotel.

<sup>\*</sup> All activities on Saturday and Sunday will be held at the Marriott NY at the Brooklyn Bridge, 33 Adams Street, Brooklyn.

**Alumni Association-College of Medicine** 

MSC 1204, SUNY Downstate Medical Center 450 Clarkson Ave. Brooklyn, NY 11203-2098

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