BRING IT ON HOME
PRACTICING WHAT WE TEACH

NEW MEXICO
The Land of Enchantment

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Head to Ethiopia
One of the most rewarding aspects of my job is training the next generation of surgeons.”

- Ashwani Rajput, MD
Chief, Division of Surgical Oncology

The Department of Surgery, Division of Surgical Oncology, takes pride in mentoring the students and residents at the UNM School of Medicine.

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LETTER FROM THE DEAN

For as long as I can remember, our School of Medicine’s guiding vision has been to serve the whole patient. This is based on the realization that a person’s social circumstances directly influence his or her physical well-being.

National health care trends are starting to align with our way of seeing things. There is a growing recognition of the need for a robust system of primary care organized around patient-centered medical homes.

At UNM, we already follow this model in our primary care clinics. Our providers work alongside other specialists to ensure that a broad spectrum of patient needs can be addressed seamlessly at one location. It’s common sense: if we do a better job of preventing serious illness, we’ll help rein in skyrocketing health care costs, especially as our nation’s population is growing older.

Another bit of common sense is acknowledging that unmet behavioral health needs drive many chronic conditions. Our Department of Psychiatry & Behavioral Sciences is pioneering a behavioral health medical home, which flips the usual model by ensuring that patients who present with mental health and substance abuse issues also have access to good primary care.

Our continued commitment to this vision of patient care is attested to by the fact that UNM’s family, primary care and rural medicine programs are regularly ranked among the best in the country by U.S. News & World Report.

We recently received additional validation from a new study published in the journal Family Medicine, which found that a higher percentage of UNM School of Medicine graduates enter family medicine residencies than any other MD degree-granting institution in the nation.

I hope you’re as proud of these findings as I am. I believe they are a clear indication that we are on the right path.

With Warm Regards,

Paul B. Roth, MD, MS
Chancellor for Health Sciences
CEO, UNM Health System
Dean, UNM School of Medicine
Brenda Pereda, MD, has been appointed assistant dean for diversity in the University of New Mexico School of Medicine.

“We are very pleased to have Dr. Pereda joining us,” said Dean Paul B. Roth, MD, MS. “She will work across all of our mission areas and departments to support diversity in our learners, faculty and staff through program development, recruitment and retention and scholarly work.”

Pereda, an assistant professor in the Department of Obstetrics & Gynecology, is a Mexico City native who was raised in San Francisco. She brings long experience in promoting diversity to her new position, said Executive Vice Dean Martha Cole McGrew, MD.

“Dr. Pereda has demonstrated passion, knowledge and skill in her diversity work,” McGrew said. “Her own success story is inspiring and she is a role model for everyone in our institution.”

Pereda is a first-generation college graduate. She earned her medical degree at Michigan State University and completed her residency at Wayne State University in Detroit.

She completed a family planning fellowship and a master’s in clinical research at UNM. She practices in the Division of Family Planning and is the director of the J. Kenneth Ryan Residency Training Program.

Pereda also has worked to develop innovative models for interactive dialogue to improve race-conscious medical decision-making and is devoted to promoting cognitive diversity in educational and workplace settings.

“Dr. Pereda has already made significant contributions to diversity and equity,” said Valerie Romero-Leggott, MD, the UNM Health Sciences Center’s vice chancellor for diversity. “I’m looking forward to working closely with her as we strive to make the School of Medicine a model for inclusion, where everyone is valued, respected and enabled to thrive.”

Laura Wylie, PA, has assumed leadership of the Physician Assistant program in the School of Medicine – the first time a PA has served as program director. She steps into the role previously filled by John Leggott, MD, who remains on as medical director.

Wylie, who graduated from UNM’s PA program in 2007, says PAs have a critical role to play in expanding health care access in New Mexico. Students follow a 27-month training track that has them seeing patients in clinics within their first year.

“They start seeing patients early,” she says. “They see what a rewarding job it can be. They see how much they’re needed. It’s very fulfilling for most students, and I think that’s why they choose what they do.”

Each student also does two rural rotations during his/her clinical year. “They get to do everything,” Wylie says. “They’re out there by themselves. It’s a really awesome opportunity for them.”

The program enrolls 17 students per class. “Our numbers are pretty small,” Wylie says, “but I think it’s part of our success. We’re devoted to them. We can give them a very personal education.”

Many UNM PA program graduates remain in New Mexico to practice – and they’re doing their part to serve critical health care needs. For example, nearly three-quarters of last year’s graduating class opted to go into primary care, and only one graduate chose to move out of state, Wylie says.

Her own path into the profession started out in the UNM Hospital emergency department, where she was a tech. After seven years she enrolled in the PA program. She worked at the UNM senior health clinic and started teaching part-time. She joined the faculty full-time three years ago.

“I’m blessed to be here,” Wylie says. “Giving back to the program that trained me is an amazing thing.”
I was very lucky it had not spread by the time I got it off,” Ellen says. “That’s the only reason I’m still alive.”

The donation will enhance the department’s education, clinical care and research in melanoma and boost skin cancer awareness in local communities.

“We’ll be more successful in recruiting and retaining a dedicated faculty member in melanoma and pigmented lesions,” Smidt says. “We’ll also offer continuity of care to patients with melanoma.

“I hope this can be the beginning of a strong tradition of community involvement and support of our mission.”

Jim and Ellen King with Executive Vice Dean Martha Cole McGrew, MD.

BY FURHANA AFRID

An Albuquerque couple has donated $500,000 to the Department of Dermatology to improve skin cancer care and awareness in the state.

Jim and Ellen King worked with the UNM Foundation to establish The Jim and Ellen King Professor of Dermatology professorship, an endowed position.

“This gift is a tremendous gesture toward the future of our dermatology care in our state,” says Aimee Smidt, MD, chair of the Department of Dermatology.

This year, more than 87,000 Americans will be diagnosed with melanoma and around 9,700 are expected to die from it, according to the American Cancer Society. About 500 New Mexicans will receive a melanoma diagnosis, meanwhile, and 70 will likely die from it.

The Kings, partial owners of Bradbury Stamm Construction, have also supported other UNM programs. But for Ellen, a survivor of melanoma – the deadliest form of skin cancer – advancing skin cancer awareness is a personal cause.

“It felt like a really big pimple,” she says in describing the cancerous mole discovered by her hair stylist Susan Lopez more than 15 years ago. “It didn’t hurt, but it wasn’t going away.”

Her skin cancer was initially misdiagnosed as a stage 4 melanoma, but further tests concluded it was a less-serious stage 2 lesion.

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Dollars for Dermatology
$500,000 GIFT PROMOTES SKIN CANCER EDUCATION, RESEARCH AND PATIENT CARE
UNM microbiologist Vojo Deretic, PhD, received an $11 million National Institutes of Health grant for a new cell research center to probe the secrets of autophagy, as reported on KOB TV (September 14). Autophagy is a mechanism for removing cellular debris. Conditions such as diabetes, obesity, cancer, Parkinson’s and Alzheimer’s disease may occur when autophagy goes awry.

The cooperative extension service housed in each state’s land grant university has a major impact on population health through its many community-based efforts, according to an article in the Annals of Family Medicine (September 12). Can the agricultural and health sectors, which usually operate in parallel, mostly unknown to each other, collaborate to address population health? UNM has created “Health Extension Rural Offices” based on principles of the cooperative extension model.

Last summer, 90 first-year UNM medical students were dispatched around the state to experience medicine in rural and underserved communities for themselves as part of the Practical Immersion Experience (PIE) program. The Santa Fe New Mexican (August 5) shadowed medical student Chrys Djatche de Kamgaing, who spent six weeks of his summer at a hospital in Las Vegas, N.M.

CNN (July 27) spotlighted Imagery Rehearsal Therapy (IRT) for a better night’s sleep – a treatment developed in the 1990s by Barry Krakow, MD, at the UNM School of Medicine. The therapy has shown some impressive results in studies. Besides limiting chronic nightmares and improving sleep quality in more than 70 percent of the subjects, IRT has been shown to decrease symptoms of Post-Traumatic Stress Disorder.

An initiative between the Albuquerque Police Department and UNM psychiatrists has caught the attention of law enforcement agencies around the country. The American Journal of Psychiatry (June 11) described how APD’s Crisis Intervention Team and the UNM Department of Psychiatry & Behavioral Sciences are collaborating to help police officers better understand how to work with people with mental illness.

UNM’s Combined BA/MD Program is helping to address the physician shortage in New Mexico, according to a story on KOAT TV (June 26). Leah Lucero, who grew up in Las Vegas, N.M, and wants to serve rural towns, is in her final year of the degree program. She was recruited in high school, given a full undergraduate scholarship at UNM, and was accepted into the UNM School of Medicine.

If you have a stroke or brain injury, you’ll need help fast, but that’s a challenge if you’re living in rural New Mexico. Now, a $15 million federal grant is enabling hospitals to help patients using telemedicine, reported KOB TV (June 9). The initiative is called Project Access. “You think about transporting patients, you think about the expense, and you think about the risk,” said Howard Yonas, MD, chair of the Department of Neurosurgery.

The Albuquerque Journal (May 31) reported on the opening of Lovelace UNM Rehabilitation Hospital, a joint venture that includes sharing patients, doctors and financial resources. Under the new agreement, both entities make contributions to run the hospital – including equipment purchases – and share revenues from patients. As part of the deal, the UNM School of Medicine will also open a new residency program there in Physical Medicine and Rehabilitation.

Some minds are so exceptional they change the world, according to a feature in National Geographic (April 24). Scientific breakthroughs like Darwin’s theory of evolution by natural selection would have been impossible without creativity. UNM neuroscientist Rex Jung, PhD, says creativity relies on the dynamic interplay of neural networks drawing from different parts of the brain at once.

The causes of many U.S. health problems seem apparent, according to an article in Insight into Diversity (April 18). But a deeper look reveals that many diseases and ailments have complex origins that are often rooted in social and economic inequities. UNM medical student Isaac Edwards says social justice means examining the inequalities that “exist throughout everyday life” that relate to race, gender or human rights.
It’s no secret that New Mexico suffers from health provider shortages, especially in rural areas, where it’s hard to attract and retain physicians.

The full extent of the crisis attracted national attention last October when the New Mexico Health Care Workforce Committee reported to the Legislature that provider shortages – affecting every county in the state except Bernalillo – would likely worsen as doctors begin to retire. New Mexico has the nation’s highest percentage of physicians age 60 and older, nearly 36 percent.

The good news, hidden within the recommended solutions, is that a number of strategies for recruitment and retention advocated in past years have begun to show success: New Mexico increased its number of physicians overall from 2014 to 2015. Whether this is a trend that will help address the state’s gap (relative to national benchmarks) remains a challenge for the state’s lawmakers and the University of New Mexico, which educates much of the state’s health provider workforce.

Recent School of Medicine graduates who have decided to return to New Mexico to practice offer some clues to the motivations at work. Key among these is being attracted to the idea of serving the underserved.

“For most physicians, that’s why they get into medicine,” says Chris Hawthorn, MD ’14, an emergency medicine doctor who just returned from a residency in Arkansas to practice at Presbyterian Healthcare Services. “It’s actually rewarding, because you’re doing a lot of people good.”

Hawthorn graduated from the School of Medicine in 2014. Barbara Cadena, MD ’08, a family medicine physician in Doña Ana County, graduated in 2008 and cites “a sense of social justice” among her reasons for choosing to work with a mostly migrant population near the Mexican border.

“The gratitude they give me is very rewarding,” she says of her patients, echoing Hawthorn’s observation that “We don’t do it for the thanks, but it feels good that people feel gratitude for the care they’ve received.”

Contrast this with the experience of Donald Rogers, MD ’68, whose medical school class was among the first to graduate from UNM in the late 1960s. An ophthalmologist, he returned to Albuquerque after nearly a decade of practicing in San Diego because he got an offer to join an existing practice – and California was feeling the impacts of a lingering malpractice crisis.

Rogers has no regrets about his four-decade career in Albuquerque and Rio Rancho, but feels the state is a hard sell for physicians in general and ophthalmologists in particular, because of the unfriendly business environment – especially the gross receipts tax.

“Some people like this environment and climate, but I’ll tell you most people don’t,” he says. “It’s a turnoff.”

What brought him back regardless (besides the job offer) was family ties – as with so many physicians who return. Both Rogers and his wife had family roots here that helped offset the negatives.

But it is primary care providers who are most needed in New Mexico, especially in rural areas, where a third of the population lives. In areas that have the hardest time meeting benchmark standards for staffing – Lea, Luna, Otero, Torrance and Valencia counties – family ties might make the crucial difference.

That was the rationale behind developing the UNM Combined BA/MD Program, which fast-tracks New Mexico high school graduates into medical school with the explicit goal of preparing them to practice in the state. Students who come from rural areas are more likely to end up practicing in one, as are physicians who have been exposed to the experience during their residency.

The BA/MD program was funded by the Legislature 10 years ago, and its first graduates are just beginning their medical careers in New Mexico. Recently graduated students like David Hernandez, MD ’17.
When School of Medicine graduates return to practice

of Loving, often mention the desire to give back to family, friends and teachers who helped them succeed in school, and to do their community proud. The first doctor to come out of his high school, Hernandez says he would definitely go home to practice pediatrics.

Likewise, Hawthorn never questioned whether he would return to New Mexico after his residency in Little Rock, Ark.

“My whole family, all my siblings are here,” he says. Having trained as a licensed practical nurse in high school and worked as a nurse while studying at UNM, “I knew this was a good place to practice health care.”

The patient population is similar to Little Rock, he adds, where “people will only take care of things when it gets to the tipping point of needing emergency care.” The difference for him was that, “with all my family here, I could do a lot of good and still be close to where I grew up.”

Cadena also cites “a sense of belonging” in Mesilla, where she was raised and her parents still live, for bringing her back to practice at La Clinica de Familia in San Miguel.

“We don’t do it for the thanks, but it feels good that people feel gratitude for the care they’ve received.”

– Barbara Cadena, MD

“The population is 80 to 90 percent monolingual (and) some may not be documented, so there’s a fear component of even going into Las Cruces,” she says.

“That was part of it, because there’s such a need on the border. Seeing migrant people in the field working, and knowing that I’m the person there for them makes me happy. Just being witness to their despair helps them out.”

A decisive factor was receiving student loan forgiveness for practicing in a rural area, Cadena says.
That helps make up for the lower pay of working in Doña Ana County compared to Albuquerque or Santa Fe. Cadena, who did her residency at the University of California, Davis, says she certainly doesn’t earn as much as her colleagues back in Modesto, but the loan forgiveness made a crucial difference, and “comparatively, the cost of living here is lower.”

Still, she acknowledges some of the considerable challenges of working in a federally funded clinic. When she arrived in 2011, a new clinic had yet to be built. The old building had rooms that were either extremely hot or cold and stray Chihuahuas crowding the front door. “I thought, ‘Whoa, I asked for this,’” she laughs.

Like Hawthorn, she often sees patients who do not seek care until gravely ill. One, “a real ranchero” who had experienced rectal bleeding for several years, had refused a recommended colonoscopy because he didn’t have insurance. “I admitted him to the hospital, and he was full of cancer everywhere. The hospital was required to treat him, as a patient with malignant cancer, and he went through rounds of chemo that probably cost several millions of dollars.”

Meanwhile, funding for her clinic is sometimes based on metrics like the number of patients who get colonoscopies. “They want us to do the screening, but people don’t have the resources to carry through.”

Helping doctors handle the stresses of working in such environments is part of the retention mission behind such programs as UNM Locum Tenens, UNM Physician Access Line and Project ECHO telemedicine clinics, which help ease rural physician workloads.

The Health Care Workforce Committee also recommended that the Legislature fund loan-for-service programs in a way that puts physicians in areas of greatest need. Exposure to rural practice is another priority, by funding the creation of residency programs in rural areas. Studies show two-thirds of students stay in the area where they do their medical residency.

The most important factor for physicians, however, seems to be what happens outside of work, in the way of stress relief and reward.

Rogers, the ophthalmologist, mentions the pleasure his family has taken in skiing, hiking and hunting – activities he grew up with here that he shared with his children growing up. “Real strong ties to family,” he says, are the one factor that could counterbalance the state’s “hindrances to practice.”

UNM itself plays a role in that. “It’s nice to have an interface with your old school,” says Rogers, who has given talks at the School of Medicine and might like to teach there someday. And, he participates in social and professional opportunities offered through the School of Medicine’s Alumni Association.

“And it’s close by for reunions,” he adds with a laugh. ✨

David Hernandez, MD ’17
MED SCHOOL MEMORIES
CARE PACKAGES REMIND RECENT GRADS TO COME HOME TO NEW MEXICO

BY LAURA J. HALL

Home means different things to different people. Some say it’s “where the heart is,” or “a place where you can feel comfortable and safe.” Others believe it’s where you put down your roots. Whatever the definition, in New Mexico, our roots run deep.

Our state has a rich history, with its Native American and Spanish heritage, and it’s home to some of the nation’s oldest continuously inhabited settlements. Most of us can relate to what celebrated author Rudolfo Anaya had to say:

“When people ask me where my roots are, I look down at my feet, and I see the roots of my soul grasping the earth. They are here... in New Mexico.”

Now, as New Mexico faces a serious shortage of health care providers, the UNM School of Medicine Alumni Association wants to remind its graduates of their roots.

Alumni Association president Robert Melendez, MD, got the idea to invite graduates to return to New Mexico to practice. This past summer, the Association kicked off its Come Home to New Mexico campaign by sending care packages containing piñon coffee and a specially made mug to recent graduates.

“We wanted to plant the seed,” Melendez said. “It’s not just where you practice – it’s also about quality of life.”

The physician shortage is real – and because providers are unevenly distributed around the state, it severely limits access for many patients.

The New Mexico Health Care Workforce Committee reported in 2016, “Thirty-four percent of the state’s 2.1 million residents live in rural and frontier areas, which are much more affected by a health care workforce below national benchmark values.”

Compounding this issue, many New Mexico physicians will retire in the next 10 to 15 years. Forty-seven percent of the state’s physicians are 55 or older, and nationally, New Mexico has the highest percentage of physicians age 60 or older.

According to Amanda Bassett, director of Advancement and Alumni Relations, “we are calling it a campaign, but it is really an ongoing effort to reach out.” Bassett works closely with alumni and community faculty, and sees the campaign as part of a continuum of service to New Mexico.

“It’s about building relationships with providers in our rural communities and making opportunities for our graduates,” she said. “This is how we can work together.”

New Mexico has an allure all its own. New Mexicans enjoy more than 300 days of sunshine, big blue skies, mountains, river valleys, vast open range and breathtaking vistas. Maybe it’s time to come home to New Mexico. ✈
Growing up in Gallup as a small-town minister’s daughter, Heidi Overton regularly accompanied her father on trips to the hospital to visit sick parishioners. “I liked that,” she recalls. “But I didn’t like hospitals then.”

These days, in the third year of her surgical residency at Johns Hopkins Medicine, she’s spending a lot of time in the hospital – 80 hours a week, on average. It’s the latest chapter in an educational odyssey that has brought Overton (MD ’15) from rural New Mexico to the East Coast.

Sitting in coffee shop near downtown Baltimore – a short drive from The Johns Hopkins Hospital – Overton tells how, during the early days of her residency, family members flew in with vacuum-sealed frozen meals and a steady supply of green chile. “If you’re a New Mexican and you have chile in your freezer, you’re home,” Overton explains. “You cannot be homesick.”

As a teen, Overton thought maybe someday she’d become a soccer coach and resisted when her mother, Natalie, urged her to consider sports medicine or physical therapy. In fact, she persuaded her mother to pursue a health care career instead.

Natalie Overton went on to become a registered nurse and while Heidi was in high school, urged her to shadow their family doctor. This time Heidi was hooked.

As co-valedictorian, Overton decided on the University of New Mexico’s Combined BA/MD Program, then in its second year. Students who were admitted to UNM’s College of Arts and Sciences and maintained good grades were guaranteed admission into the School of Medicine.

What sold her on the program was a reception where she and her parents were seated next to Paul B. Roth, MD, MS, Chancellor for Health Sciences and Dean of the School of Medicine. Roth explained his vision for the BA/MD program was to address New Mexico’s physician shortage by training more doctors in state and building the medical workforce.

Overton went home and signed her acceptance paperwork that evening. “I was like, ‘Man, I have to be a part of this,’” she says.

She didn’t set out to become a surgeon, but her second rotation in medical school was surgery and surgical oncology – and she knew she was home. “I fell in love with the operating room,” Overton says. Even when she was on other rotations, after working a full day she went straight to the O.R. to scrub in. “There’s something about the operating room that you don’t get anywhere else,” she says. “You’re very focused. There’s one problem and you’re trying to fix it.”

She became close with surgeons like Bridget Fahy, MD, an associate professor in the Department of Surgery. “These great clinicians, great surgeons took me under their wing,” she says.

Overton was the first student Fahy met when she came to UNM in July 2013. “I thought, ‘Holy smokes, this
is a total rock star!” Fahy says. “She’s a special person, not just because she’s very bright – because there’s lots of very bright medical students here – she has this amazing heart for medicine and for patients.”

While Overton was in medical school Gov. Susana Martínez nominated her to become the student member of the UNM Board of Regents.

“I had a little window into the world of high-level governance and decision-making,” she says. “It was a pretty overwhelming time. That’s when surgery and the O.R. became my place of solitude.”

Overton can’t forget the families she worked with as a medical student – people who drove hours from their home on the Navajo reservation to meet with her. “They’re burned in my memory,” she says. “For those patients, that drive to Albuquerque is their only opportunity. I want to get the best medical training and bring that back.”

Graduating near the top of her medical school class, she applied to 15 residency programs. But when she was offered an interview at Johns Hopkins, consistently ranked as the best surgical residency program in the country, she knew she had to go.

For the first two years of her clinical training she woke every day at 3 a.m., started rounds at 6:30 a.m. to meet her patients and was in the operating room by 7:30 a.m. Most days, she operated on one to three patients. She performed rounds in the evening between 5 and 6, and usually left around 7 p.m. After work, she went home to eat, exercise and study for the next day.

In Baltimore, she bought a one-bedroom concrete loft in Locust Point, a neighborhood about 12 minutes away from the hospital. “I never imagined my first home would be a condo in the city,” she says.

She wakes up every morning with a view of the boats in the harbor, train tracks and giant stacks of what she thinks is the city’s salt supply. “I can see the horizon,” Overton says. “I can see the sunrise. It helps my desert soul.”

She loves to go for five-mile runs along Baltimore’s Inner Harbor and plays co-ed soccer. She also attends events hosted by the School of Medicine Alumni Association’s Washington, D.C., chapter. But New Mexico is never far from her thoughts.

“People know that if they invite me to a dinner party, I’m probably going to bring something with green chile, like green chile enchiladas, or green chile chicken, or green chile cheeseburgers,” she says. “I’m trying to teach them that you can put green chile on everything.”

This fall, Overton is also starting a PhD program at Johns Hopkins, studying clinical investigation in public health. She has years of training on the East Coast ahead of her before she can return home to work with the Native American patients she met in medical school.

“I fully expect that some point she’ll run a university or a health care system, or maybe she’ll be a governor,” Fahy says. “Her possibilities are unlimited. She’s really the very best that the university and the state has to offer.”

Even though Overton is 1,900 miles from home, she’s still trying to help the people she grew up with. She applied for a National Institutes of Health grant to study racial and ethnic disparities in genomic medicine. She proposed focusing on African Americans in Baltimore and Native Americans and Hispanics in Albuquerque.

“New Mexico is always on my mind,” she says. “I want to find ways to take the time and skills I’m learning here to address problems back home – even from a distance.”
EXTENDING OUR REACH
UNM PHYSICAL THERAPY STUDENTS TO VISIT ETHIOPIA

BY BURKE GURNEY, PT, PHD

There was no getting around it: the UNM Physical Therapy Division’s Study Abroad Program had become a victim of its own success. Our annual service-learning trip to Guatemala was so popular that there were more students interested than slots available (and, the language barrier intimidated some students).

I started looking for an English-speaking country that could use our help and soon came up with the perfect fit: Ethiopia. So off I went on a three-week exploratory trip in March and April of this year.

My perception of Ethiopia had been shaped by the country’s terrible famine in the 1980s, but in truth I really didn’t know what to expect. As my plane approached Addis Ababa, Ethiopia’s capital and largest city, I was struck by the green and mountainous landscape.

Sitting at 8,300 feet above sea level, Addis is a contrast in urban development and abject poverty. You can drive by sleek, modern high rises, take a couple of turns and suddenly find yourself lurching down a pot-holed road lined with ramshackle corrugated aluminum huts.

People were friendly and gregarious. They greeted me not with skepticism – as I have encountered in so many other countries – but with curiosity and acceptance.

Ethiopians are proud of their country, and are quick to share that it is the only African nation never colonized by Europeans. More than a bit of trivia, it helps explain the uniqueness of the culture and languages – more than 80 of them (fortunately for me, most educated Ethiopians speak English well).

The cuisine is also unique. I was there during Easter, when many Ethiopians avoid eating meat, and various versions of their national dish, injera, were served for both lunch and dinner. Injera consists of a spongy fermented pancake made of teff, the local grain, covered by wot, a stew of seasoned potatoes, chickpeas, lentils and beans. One of the local seasonings, shira, is like no other taste I have ever encountered.

Ethiopia is not entirely free of European influence, however. The Italians occupied Ethiopia during World War II, and a few still reside in Addis. I must admit that
after days of dining on injera, I sought out some of the many local Italian restaurants.

Ethiopians practice several different religions. Orthodox Christianity is the most common, followed by Islam. I was struck by the peaceful coexistence between the religious groups. When I asked locals about this, I got puzzled looks. “Everyone here is religious, therefore we all get along,” one responded, as the others nodded in agreement.

Ethiopia is a country of contrasts, from the relatively modern medical center and teaching hospital where I taught, to rural villages made up of clusters of small mud- and grass-thatched huts.

Teaching classes in the transitional doctoral PT program at Addis Ababa University, I was impressed by my students, all of whom were completing their final year of their transitional DPTs. They were eager to learn and took great care in preparing the differential diagnosis and evidence-based case studies they were assigned.

Soon, many of these 17 students will become instructors in the university’s newly developed PT program. Ethiopians learn English from an early age, and all of their university classes are taught in English.

In addition to teaching, I wanted to create a learning experience for UNM PT students that includes clinical work, humanitarian service and shared classwork with their Ethiopian counterparts.

I encountered various stakeholders in Addis, starting with the PT program director at Addis University. Then I visited with clinical supervisors at several local hospitals, including Black Lion Hospital, the 900-bed teaching hospital in Addis, and Yekatit 12 Hospital, the local burn center.

I also met with the folks at the Mother and Child Rehabilitation Center, which offers pediatric PT services, and worked at Missionaries of Charity, a Catholic orphanage founded by Mother Teresa that includes some “PT” performed by well-meaning volunteers with informal PT training.

On trips to the countryside, I visited a small town to the southeast called Bishoftu, which is surrounded by a series of crater lakes. I also toured the Oromia region in the northwest, which is famous for its biodiversity, including an impressive showing of birds and the gelada monkey, an endemic species that has the distinction of being the only grass-eating primate in the world.

I plan to return to Ethiopia with four students next spring. They will divide their time between the clinic and classroom and practice PT in various settings. They’ll also participate in journal clubs and develop case studies with Ethiopian PT students.

UNM’s PT program has made a strong commitment to service learning in the U.S. and abroad.

Burke Gurney, PT, PhD, is director of the Division of Physical Therapy in the UNM School of Medicine.
The Alumni Association brought together faculty, alumni and students at a reception during this year’s Association of American Medical Colleges conference in Boston.

Our first White Coat Donor Reception connected generous alumni with the 2017 incoming medical class.

Drs. Everett Campbell (left) and Randall Sword attended Brunch with the Dean at the 2017 Alumni Reunion.
FROM COAST TO COAST

Alumni take a moment to snap a quick picture in the photo booth at the 2017 Alumni Dinner.

Dr. Loretta Cordova de Ortega hosted the 30th reunion celebration for her classmates from the class of 1987.

Drs. Melendez, Gallant and Mitchell at the mixer hosted in July to recognize School of Medicine alumni and community faculty who practice at Presbyterian Healthcare Services.

WELCOME HOME

Each year, the Alumni Association hosts receptions and reunion events on campus, throughout New Mexico and around the nation. These events afford an opportunity for alumni to reconnect with old friends and fondly remembered faculty members. They also offer a chance to learn about new ways of staying connected with the School of Medicine, such as the community faculty mentoring and preceptorship program. And, they’re our way of thanking you for giving back. We hope to see you in the coming year.
Imagine yourself two days before Christmas, vacationing with family in Florida. You head to a local gym for a workout. Setting a weight down, you receive a sudden head rush; your left wrist, arm and eye begin to twitch and you pass out.

You wake up, drenched in sweat, to see exhausted-looking paramedics. Tests reveal that you have a brain tumor.

This is what happened to Devin Maynes, a 20-year-old University of New Mexico student. “I was confused,” Maynes says. “It was the healthiest I had ever been, and it made me feel not so invincible.”

Returning to New Mexico following the diagnosis in January 2015, Maynes and his family met with Muhammad Chohan, MD, assistant professor in the UNM Department of Neurosurgery and director of neurosurgical oncology. Chohan had completed an elite neuro-oncology fellowship at Memorial Sloan-Kettering Cancer Center to study tumors in the brain and spine.

“I’ve always been impressed with how little we actually know about the brain,” Chohan says. But cutting a tumor out is not as simple as it sounds – for Chohan, functional preservation is key.

Maynes had been diagnosed with a low-grade glioma, a slow-growing tumor. Chohan decided his patient would be an appropriate candidate for an awake craniotomy, which meant that Maynes would be fully conscious while the tumor was removed.

It’s possible to perform awake craniotomies because the brain has no pain receptors of its own – doctors can cut into brain tissue without the patient feeling anything. Upon learning of Chohan’s proposed approach, “It shook my world!” Maynes says. “I got really scared, but it was the best option.”

Open craniotomies involve more players than just the neurosurgeon, however.
After meeting with Maynes and his family, Chohan sent them to neuropsychologist Rex Jung, PhD. Jung, who studies brain function and how it interconnects with behavior, received special training at the Baylor College of Medicine in Texas to perform awake craniotomies.

“I listened to Maynes’ thoughts on the procedure and I assessed whether he was able to manage anxiety and express that verbally or non-verbally,” Jung says. Candidates for the surgery learn that “they are a part of the team,” he adds. “They are the center of their own care, which can be empowering.”

The prospect of an awake craniotomy can be daunting to patients, but the surgery turns out to have multiple benefits. The recovery time is shorter and it allows the surgeon to take more of the tumor without harming the patient compared to traditional brain surgery.

But everyone’s brain is different. First, Chohan had to map the topography of Maynes’ brain.

“The surface of the brain is as different as fingerprints between people,” Chohan says. In order to be within millimeters of accuracy, surgeons assess brain function through several tests.

A functional MRI records how signals travel from localized areas of the brain to specific parts of the body. A functional angiogram enables the team to put one hemisphere of the brain to sleep at a time, helping them to isolate and assess function on the awake side. Then, sleep mapping is performed to assess brain activity in response to surface stimulation of the body.

Jung also had Maynes complete cognitive tests and measures of grip strength beforehand so that he could assess his responses during the procedure.

Chohan describes the setting in the operating room as a triangle – Maynes was at one corner while Jung, Chohan and the rest of the surgical team occupied the other corners. Chohan and Jung relied heavily on one another to support their patient.

Jung’s job was to communicate to Chohan how the patient was doing, second by second. If a function were to deteriorate, Jung would tell Chohan, who would then stop cutting in that particular location of the brain.

As Chohan operated on Maynes, he asked Jung to have the patient perform an activity, such as demonstrate his grip strength or name images on an electronic device.

“Dr. Jung scrolled through a tablet, he had me name pictures,” Maynes recalls. “He also had me squeeze fingers together. I didn’t get to see much since there was a blue tarp over my head.”

Because Maynes is so physically active, Chohan and Jung wanted to preserve his physical skills as much as possible. “Motor function was tested, such as grip strength, lip and tongue movement,” Jung says. “Foot, hand and arm motions were also tested.”

After the 4- to 5-centimeter tumor was removed, Maynes received some anesthesia so that Chohan could close the incision. As he recovered in the ICU, Chohan paid him a visit.

“The first questions he asks me is, ‘How does the scar look? Do I look cool?’” Chohan says, smiling at the memory.

The first several days of healing were difficult, Maynes says. He couldn’t move the left side of his body due to swelling from the surgery. However, the discomfort subsided as staples were removed.

Maynes was back playing basketball with his friends two weeks afterward. Reflecting on it all, Maynes says, “I’m at a loss for words to explain the experience. Otherworldly – that is a good word to describe it.”
Many scientists only dream of being on the cutting edge of a new field in biology, but for more than 15 years, Vojo Deretic, PhD, has been at the forefront of research focused on autophagy – a cellular process first identified in the 1990s.

The journey has been full of professional risks, fascination and legacy for Deretic, professor and chair in the Department of Molecular Genetics and Microbiology. Born in Croatia, Deretic attended the University of Belgrade and the University of Paris for his bachelor’s and graduate degrees. He eventually traveled to the University of Illinois at Chicago for post-doctoral work and received faculty appointments at the University of Texas at San Antonio and the University of Michigan.

He remembers visiting New Mexico while living in Texas – even dreaming of owning a home in Santa Fe, despite having little income at the time.

“We loved New Mexico,” Deretic says, “so there was always a big attraction.” His move to UNM led to high-profile work in the rapidly evolving and controversial field of autophagy.

If a cell has damaged parts or has been invaded by bacteria, it can either remove these harmful substances or die. This is autophagy’s function: it is the cell’s dynamic recycling mechanism. Cells can also use autophagy to feed on themselves during starvation.

Deretic finds it intriguing. “You have a metabolic aspect and you have a quality control aspect,” he says, “and very few things have both of those.”

Delving into a novel cellular function is perilous, especially when most biologists have yet to realize its significance. When he started looking into autophagy, Deretic had already received grants with different research objectives. His early forays into the new field eventually pioneered the application of autophagy as an antimicrobial tool by manipulating the process to kill tuberculosis bacteria in immune cells.

Deretic remembers those days fondly. “Because it was such a rapidly developing field,” he says, “you could really do spectacular science and make breakthroughs on a yearly basis, and that’s what I got accustomed to.”

Becoming accustomed to breakthroughs meant multiple publications in prominent journals like Science and Nature, bringing more recognition to UNM. Deretic realizes the benefits that his research brings to New Mexico.

“I’m not in science to work for money or anything like that,” he says, laughing. “I’m here for interest, and it’s funny enough that in New Mexico I could pursue those.”

That interest recently garnered an $11 million National Institutes of Health grant to establish the Autophagy, Inflammation and Metabolism in Disease Center at the UNM Health Sciences Center, the first NIH-funded autophagy center of its kind.

Deretic is proud that, with the help of HSC leadership, he has attained valuable funding for the university and the state. He also hopes it will aid future autophagy researchers.

“I am particularly happy that it’s actually not for me,” he says. “It’s for the environment, the junior faculty, their students. This should give a boost to a lot of different things. It’s really not personal, not my career – it’s about multiple careers.”
Marcia Moriarta, PsyD, associate professor in the Department of Pediatrics and executive director of the Center for Development & Disability, was awarded a $2.8 million grant from the New Mexico Department of Health for CDD autism programs. She also received a $1.9 million grant from the New Mexico Children, Youth and Families Department for the Nurse Family Partnership. She also received a $1.9 million grant from the Department of Health for the Early Childhood Evaluation Program.

Bridget Wilson, PhD, Maralyn S. Budke Endowed Professor in Cancer Signaling and professor in the Department of Pathology, received a $2.5 million grant from the National Institute of General Medical Sciences for the Center for Spatiotemporal Modeling of Cell Signaling.

Vojo Deretic, PhD, professor and chair of the Department of Molecular Genetics & Microbiology, received a $2.5 million award from the National Institute of General Medical Sciences for the Center for Autophagy, Inflammation and Metabolism in Disease Center.

Cheryl Willman, MD, distinguished professor in the Departments of Pathology and Internal Medicine, the Maurice and Marguerite Liberman Distinguished Endowed Chair in Cancer Research and director and CEO of the UNM Comprehensive Cancer Center, received a $2.3 million support grant from the National Cancer Institute.

Bill Shuttleworth, PhD, Regents’ Professor in the Department of Neurosciences, received a $2.2 million continuation grant from the National Institute of General Medical Sciences for UNM Center for Brain Recovery and Repair.

Denis Bragin, PhD, a research associate professor in the Department of Neurosurgery, received a $1.4 million grant from the U.S. Army Medical Research Acquisition Activity for a Novel Advanced Resuscitation Fluid for Traumatic Brain Injury with Hemorrhagic Shock.

Jennifer Ann Vickers, MD, an associate professor in the Department of Neurology, received a $1.4 million grant from the New Mexico Department of Health for the Developmental Disabilities Waiver Outside Review Project. She also received an $800,000 grant from the Department of Health for the Continuum of Care Program.

Carolyn Muller, MD, director of the Division of Gynecology Oncology, received a $1.4 million grant from the National Cancer Institute for Community Oncology Research Program Minority/Underserved Community Sites.

Kimberly Page, PhD, professor in the Department of Internal Medicine, received a $1.4 million grant from the National Institute on Drug Abuse for Acute Hepatitis C Infection in Young Injectors.

Jennifer Hettema, PhD, associate research professor in the Department of Family & Community Medicine, received a $1 million continuation grant from the U.S. Public Health Service for Prevention of Teen Pregnancy Through Screening and Brief Intervention in Primary Care.

Arthur Kaufman, MD, Vice Chancellor for Community Health and professor in the Department of Family & Community Medicine, received a $1 million grant from Bernalillo County for the study for adverse childhood experiences.

Andrew Hsi, MD, professor in the Department of Pediatrics, received a $1 million grant from Bernalillo County for the ADOBE Project.

Angela Wandinger-Ness, PhD, the Victor and Ruby Hansen Surface Endowed Professor in Cancer Cell Biology and Clinical Translation and professor in the Department of Pathology, received an $870,000 grant from the National Institute of General Medical Sciences for Academic Science Education and Research Training.

Caroline Bonham, MD, associate professor in the Department of Psychiatry & Behavioral Sciences, received an $840,000 grant from the U.S. Indian Health Service for Tele-Behavioral Health Center for Excellence.

Gary Cutchrell, DDS, JD, professor and chair of the Department of Dental Medicine, received an $800,000 grant from the New Mexico Higher Education Department to train dentists to treat pediatric patients.
Some people have a hard time deciding what they want to be when they grow up. For me, it was easy, I wanted to be a dental hygienist.

But dental hygiene school and the rigorous prerequisite courses I had to take to be where I am today were anything but easy. I spent hours learning about the human body and how each system functions. I memorized muscles, bones and nerves, and became familiar with pharmacology.

I learned how to take radiographs, administer local anesthesia and provide preventive oral health care. But if you ask, “So, is your scholarly journey over?” my answer is, “Absolutely not!” My purpose in becoming a dental hygienist is far from fulfilled.

The value of oral health care was instilled in me at an early age. My aunt, who has been a dental assistant for 22 years, was one of the greatest influences in my career choice.

In my hometown of Grants, N.M., I shadowed in my dentist’s office while working at odd jobs, like preparing bitewing tabs for radiographs and stamping envelopes.

At UNM I began a new chapter in my journey into dentistry. I worked hard to get into a program that accepted only 24 candidates each spring. Once admitted, I worked even harder to become a health professional, determined to provide my patients with the best care.

But I wanted to do even more. In dental hygiene school it became apparent why oral health was an important part of systemic health, and why it needs a second look as a means of preventing and treating disease.

I wanted to pursue higher education beyond my bachelor’s degree, but I was unsure of which direction I should take. Now, as I begin graduate school, I know that I want to expand where and how we provide oral health care.

In October 2016 my grandfather was diagnosed with brain cancer – a very sudden diagnosis that nobody saw coming, as he was otherwise healthy.

He spent days in the ICU and underwent gamma knife radiation surgery in the neurology unit. I sat and watched how the busy doctors and nurses had no time to provide oral hygiene to my grandfather or other patients. Of course, I took care of my grandfather’s needs, receiving the tools I needed from the nurses’ station.

He asked to take his dentures out and swish with Listerine every night like he always did at home. I began to think about how often people come in with poor oral health, only to have it exacerbated when hospitalized, leaving them in worse health when discharged.

Diabetes and cardiovascular disease are associated with periodontal disease. Chemotherapy and radiation also wreak havoc upon the oral cavity, while poor oral conditions can cause aspiration pneumonia in those who are ventilated, lying down or who have poor motor function.

Then it dawned upon me; why don’t we have a dental hygienist on staff in hospitals? They have a team of doctors, physician’s assistants, nurses, etc., who are all focused on bringing patients back to health, yet a huge component of systemic health is unfortunately left out of care.

Bringing oral hygiene routines into hospitals will improve health, as well as quality of life. My grandfather’s prognosis was not going to change with improved oral health care during his stay, but his ability to keep a part of his nightly routine kept his spirits a little higher.

With my master’s degree I want to integrate oral health care and systemic health care to better serve a population in great need. I plan to study aspiration pneumonia in hospitals to improve patient outcomes during long-term stays in my graduate studies, and hope that in the future I can help strengthen the link between oral health care and disease prevention and treatment.

My education here at The University of New Mexico has given me the ability to be innovative in the way oral health care is delivered and to become an integral provider in systemic health care.

Kayla Gallegos is a graduate student in the Department of Dental Medicine.
HELPING HANDS
UNM UROGYNECOLOGY TEAM PROVIDES CARE FOR RWANDAN WOMEN

Peter Jeppson, MD, assistant professor and chief of the Division of Urogynecology, led a team of UNM faculty, residents and techs to Kigali, Rwanda, earlier this year under the auspices of the International Organization for Women's Development to offer surgical care for women suffering from fistulas. “We perform 40 to 50 surgeries in two weeks,” Jeppson says. “We work with medical students a lot while there. When we leave, the team of students and residents follows the patients until they can go home.” Donations to support the surgical missions may be made to the OB/GYN URO Research Education Fund through the UNM Foundation, 700 Lomas Blvd. NE, Albuquerque, NM 87102. (https://www.unmfund.org/fund/other/)

Elizabeth Clark, MD, PGY3 (right) and Shree Chanchani, MD ’06, clinical assistant professor of obstetrics and gynecology at NYU Langone Health, perform a surgical fistula repair.

Thompson and Heather Riese, MD, PGY3 (left) share their insights with a group of Rwandan medical students.

Jennifer Thompson, MD, PGY6, with a patient.
Dear School of Medicine Alumni and Friends,

This has proven to be an exciting year for the UNM School of Medicine Alumni Association. Under the leadership of our president, Rob Melendez, MD, we have kicked off the Coming Home Campaign, aimed at highlighting alumni who come back to New Mexico, to practice and encouraging others to follow their example.

You will notice several alumni are being celebrated in this issue for their commitment to New Mexico. In upcoming issues, we will be working with physician recruiters from across the state to highlight and celebrate those who return here to serve. We look forward to building upon this program, as it perfectly aligns with the School of Medicine’s mission.

Throughout the year we have continued our regional and in-state alumni outreach, hosting events in Phoenix, San Diego and Boston. Looking forward to 2018, we already have plans in the works to visit Seattle and Austin. I hope that if you reside in or near one of these cities you can join us.

Our combined efforts with the Office for Community Faculty have helped us bridge gaps in the transition of our resident alumni to mentors. Whether it is due to this transition or reconnecting with an alumnus who is interested in teaching, this collaboration has helped us re-engage many of our graduates, who are providing exceptional patient care, not only in New Mexico but across the country.

In September, we awarded $25,000 in scholarships to fourth-year medical students who have a proven record of taking on leadership roles in community service throughout their medical education. The scholarships were given out at the annual La Tierra Sagrada Scholarship Dinner. Thanks to your generous contributions, we also provide emergency loans, travel grants and a variety of student support services.

The board will also be transitioning leadership at the end of 2017, and will be welcoming new officers and board members in 2018. As always, I encourage you to reach out and let me know how we can better support and recognize you. We have many opportunities to be involved, whether by serving on the board, in a community faculty role or as a host family for a fourth-year student who may be interviewing in your area. Please let me know how you would like to be engaged.

I wish you all a happy, healthy and safe holiday season. See you in 2018!

Very truly yours,

Amanda Bassett, Director
Advancement and Alumni Relations
Arthur Kaufman, MD, is an avowedly reluctant Living Legend – a designation created by the UNM School of Medicine in 2009 to recognize faculty members’ extraordinary contributions to the school and community.

“Don’t get me wrong,” says Kaufman, a Distinguished Professor of Family and Community Medicine and Vice Chancellor for Community Health. “I’m honored to be recognized, but important, lasting changes are rarely accomplished by any one individual.”

The New York City transplant seems more interested in what’s happening on life’s periphery. “Growing up, I was considered ‘slow’ academically,” he says. “People who knew me in my youth were shocked when I became a physician.

“Now, I really identify with and want to help struggling medical students and struggling communities who start ‘slow.’ They can make an impact on others and become agents of needed change.”

Kaufman studies the edges of public health in New Mexico, and how they affect illness and disease. Identifying education early in his career as his frontline opportunity to improve the health care delivery system, he has spent the past 35 years at UNM restructuring medical curricula.

He was part of a cadre of faculty in the 1970s who placed first-year medical students in medically underserved areas. For those four months, they experienced the real world of community health.

This curriculum merged problem-based learning with invaluable clinical experience, introducing students to different cultures and attitudes toward health while they provided supervised care in outlying communities. Medical schools across the country have embraced this model, and UNM’s Primary Care Curriculum and rural medicine program have long been ranked among the top in the country.

Kaufman considers this the first steps toward integrating public health and medicine in a frontier state.

The second is the cultivation of the HEROs (Health Extension Rural Offices) program, which connects UNM health science resources to local towns and villages, moving the locus of control from campus to community.

HERO agents live in their communities, recruit the health workforce, address local health problems and introduce the latest research and health care practices. Kaufman adapted the model from the agricultural extension service system run by land grant universities, which places “ag agents” in every county in every state.

Kaufman has also made the social determinants of health – poverty, education, housing, health care access, clean air and water, social inclusion and the like – a core concern at the UNM Health Sciences Center. Deploying community health workers into clinics, community agencies and managed care systems has helped make New Mexico’s education and health care delivery system a more effective resource for patients, families and communities.

Like that of most Living Legends, Kaufman’s work will never be finished. “Change is slow, but we’re making progress,” he says. “In our model, we’re seeing downstream health problems significantly reduced.” Meanwhile, his work around the edges is quietly changing the heart of medicine.
BY LORI PETERKIN

Getting a seat at the UNM School of Medicine’s community lectures series is like snagging a ticket to a major rock concert. “You can count on a full house when our Community Academy lecture series partners with UNM speakers on topics of health, medicine and wellness,” says Andy Watson, headmaster of Albuquerque Academy, where the community lectures are held. “The quality of these presenters is extraordinary, and the information they share is important for both individuals and the community at large.”

Nancy Hansen is quick to sign up for each event, because the 550-seat auditorium typically fills up. “This is an awesome opportunity for the public to hear these phenomenal doctors speak on important subjects,” she says. “Every single one has been interesting, informative and well worth the time.”

The program began in 2015, to celebrate the School of Medicine’s 50th anniversary. UNM neurosurgeon Howard Yonas, MD, discussed stroke prevention in the first of what became a series. Barry Ramo, MD, a cardiologist familiar to TV viewers as KOAT’s health editor, was intrigued with the groundbreaking research-taking place at UNM. He partnered to promote the talks, interview speakers and moderate questions at each of the events.

“It has been a privilege to meet and learn about some of the extraordinary people and programs at the UNM School of Medicine,” Ramo says. “The programs celebrate the contributions the UNM medical center has made to the health of our state.”

Topics have included diabetes and heart disease (David Schade, MD), treating Ebola in West Africa (Eileen Barrett, MD), human performance in the extreme (Jon Femling, MD, and Emily Pearce, EMT) and the very popular

Your Dazzling Brain series (Bill Shuttleworth, PhD, and faculty from the UNM Brain & Behavioral Health Institute).

Next March 13, the BBHI team will present another Your Dazzling Brain talk on sleep – touching on the neuroscience, sleep’s effect on our overall health and ways to improve its quality. “I encourage you to come to the presentation” Ramo added. “It should be fascinating.”

Register at www.aa.edu under the Community Academy tab beginning February 1. Contact Lori Peterkin, lpeterkin@salud.unm.edu, for more information.
For Nancy Croker, MD, the bond started with a newspaper article over morning coffee. It was about an incoming UNM medical student who had emigrated to the U.S. from Pakistan as young girl with her mother and three siblings after her father was kidnapped by the Taliban and never seen again. To support the children, her mother took a series of low-paying jobs until she succumbed to cancer at the age of 47.

“I knew I had to meet this amazing young woman and wanted to be her champion,” Croker says. “When I heard about the White Coat sponsorship program for incoming medical students, I immediately signed up and ‘claimed’ Yalda Barlas as my sponsored student.”

That was the beginning of a relationship that grew into dinner together during exam week, a Starbucks gift card as a mid-semester pick-me-up and, most recently, sponsorship of the La Tierra Sagrada Scholarship that Barlas received at the Sept. 14 annual awards dinner.

“I feel like I have someone watching over me, who cares and is there to offer support when I need it,” says Barlas, MS-II.

“This is exactly the type of connection we hope to develop between students and donors,” says Amanda Bassett, director of Advancement and Alumni Relations. “It is one of the great opportunities for members of La Tierra Sagrada Society.”

Other medical students who received between $2,500 and $5,000 of the $95,000 given in scholarships at the dinner were Ray DeKay, Julia Dexter, Chrys Djatche de Kamgaing, Alexandra Thompson, Lauren Faber, Parisa Kermani, Anna Kistin, Kriti Mishra, Joseph Pagador, Angelica Romero, Joshua Sheak, Letty Tomaszewski, Theresa Kurtz, Jacqueline O’Neill, Nicholas Levin, Gina Stroud, Ingrid Lindquist, Luke Lovro, Leah Lucero, Michael Wentzel, Christian Garcia and Amanda Provencio.

The evening began with students displaying posters as a way to introduce themselves to donors and guests.

During the dinner program, Julia Dexter (MS-III) and Michael Wentzel (MS-IV), spoke of the path that brought each of them to a career in medicine and how the scholarship affects education and career choices.

Executive Vice Dean Martha McGrew, MD, spoke about the financial obligation of a medical education and thanked donors for their generosity in helping to grow the dean’s endowment to nearly $500,000 and give more than a million dollars in student scholarships and research grants since the Society began in 1996.

To become part of this organization, or learn more about it, contact Lori Peterkin, lpeterkin@salud.unm.edu, 505-272-8085 or visit http://som.unm.edu/giving/tierra-sagrada.
The DaVita Medical Group has promoted Lance Wilson, MD ’98, to chief medical officer. Meanwhile, David Freeman, MD ’12, and Eldie Cruz, MD ’04, have both joined the DaVita medical staff as general surgeons, while Urvi Shah, MD (House Staff), is newly arrived as a pediatrician.

Ursa Brown-Glaberman, MD ’06, an assistant professor at the UNM Comprehensive Cancer Center, received the Cancer Clinical Investigator Team Leadership Award from the National Cancer Institute.

Rebecca L. Coalson, MD ’08, recently opened Southwest Gynecology, Inc., in Las Cruces. Coalson, a Las Cruces native, started her career at UNM Hospital in 2008. She is board certified and a fellow of the American College of Gynecology.

Erin Corriveau, MD ’09, is an assistant professor in the Department of Family Medicine at the University of Kansas School of Medicine. She completed her residency in family and community medicine at UNM in 2012 and completed a second residency in preventive medicine at Johns Hopkins University School of Medicine in 2014.

Megan Fitzpatrick, MD ’14, is completing her anatomic pathology training at Stanford. She founded and ran an organization dedicated to public health outreach implementation through partnerships with nongovernmental organizations in El Salvador. She also studied malnutrition, typhoid fever and the economics of antenatal care in Kenya and Uganda through the Centers for Disease Control and Prevention’s Hubert Global Health Fellowship.

Erika Garcia, MD ’08, was honored by the Clovis News Journal for National Women in Business Month. She is a board-certified family physician and medical director at Roosevelt General Hospital in Portales, N.M.

Heather Greene, MD ’12, is a family medicine practitioner at the Presbyterian Medical Group clinic at 3436 Isleta Blvd. SW in Albuquerque. She is board certified by the American Board of Family Medicine.

Gurujot S. Khalsa, MD ’04, has been appointed chief of emergency medicine at the Albuquerque Veterans Affairs Medical Center. Khalsa, who joined the VA in 2009, previously was the acting chief of the emergency medicine service. He completed his residency in emergency medicine at the Henry Ford Hospital in Detroit.

David P. Leachman, MD ’00, has joined MountainView Regional Medical Center in Las Cruces as its chief medical officer. A board-certified anesthesiologist, Leachman previously served as an assistant professor in the UNM School.
Albert Kwan, MD ’83, was elected president of the Organization of State Medical Association Presidents in June—the first UNM alumnus to have done so. He is a surgeon based in Clovis, N.M.

Kyle Leggott, MD ’16, is a second-year family medicine resident at the University of Colorado School of Medicine. He is one of 30 scholarship winners selected to participate in the Family Medicine Leads Emerging Leader Institute. The $1,000 scholarship pays for travel to attend both the American Academy of Family Physicians National Conference of Family Medicine Residents and Medical Students and the AAFP Foundation Family Medicine Leads Emerging Leadership Institute.

Michael J. Napoliello, MD (House Staff), was recently appointed to the Board of Governors of the New York University School of Medicine. He is CEO of PharmaSavant, LLC, in Princeton, N.J., which provides clinical research consultation to pharmaceutical companies. He has played key roles in the development of several approved drugs and has had previous faculty appointments at the medical schools at UNM, Dartmouth, Cornell and the University of Cincinnati.

Robert Melendez, MD ’00, (here with his wife Lucille).

Robert F. Melendez, MD ’00, MBA, has been promoted to the rank of lieutenant colonel in the New Mexico Air National Guard. Melendez, an ophthalmologist specializing in cataract and refractive surgery, practices with Eye Associates of New Mexico and has served since 2016 as president of the UNM School of Medicine Alumni Association.

Alisha Parada, MD ’08, has been named vice chair for diversity and inclusion in the UNM Department of Internal Medicine.

Ryan Pate, MD ’04, has joined the Southern Illinois University School of Medicine as chief of the Division of Orthopedic Surgery and assistant professor of surgery. He is a member of SIU Medicine, the school’s group practice. He is a Fellow of the American Academy of Orthopedic Surgeons and the American Association of Hip and Knee Surgeons. He is also a member of the International Congress for Joint Reconstruction.

Lindsey Pennington, MD ’11, is a cosmetic facial plastic and reconstructive surgeon with an individual practice in Shreveport, La.

Joseph Pope, MD ’91, will serve as vice president of the San Juan College Board. Pope, who practices family medicine in Farmington, N.M., has served on the board since 2007. He completed a family practice residency at St. Mary’s Hospital in Grand Junction, Colo., in 1994.

Jesus Tafoya, MD ’14, is practicing family medicine in his hometown of Las Vegas, N.M., as a member of the Las Vegas Medical Group. He completed his residency at the Texas Tech University Health Sciences Center.

Brent Wagner, MD ’99, is an associate professor of medicine at the University of Texas Health Science Center at San Antonio and a staff physician with the South Texas Veterans Health Care System. His research into how gadolinium-based contrast agents used in MRI

Please share your updates and professional accomplishments. Contact Amanda Bassett at the UNM School of Medicine Alumni Association to submit information for inclusion in an upcoming issue of UNM Medicine

Telephone: 505.272.5700
Email: abassett@salud.unm.edu
RUNNING RX
BUILDING COMMUNITY ONE STEP AT A TIME

BY ANTHONY FLEG, MD

Running as medicine? Yes, indeed.
My journey with running goes back to the day I showed up for high school cross country in my basketball shoes, ready to see what this was all about. I ended up running for most of my high school and college career, never the fastest, but always willing to get 100 percent out of my body.

In 2016, I had a vision of bringing together a community of all ages and fitness levels that supported each other in their efforts toward improved health and wellness. A few planning meetings and a $0 budget later, Running Medicine was off and . . . running!

Running Medicine (RM) has flourished, based simply on the understanding that running and exercise is a beautiful and potent medicine for mind, body and spirit. Originally formed as a component of the Native Health Initiative, RM aims to create a culture of wellness through a supportive, loving community.

More than 100 folks attend our three-times-a-week “Celebrations.” We have also seen RM groups start in other communities, and we’re always looking for ways to contribute to wider cultures of wellness in our UNM, Albuquerque and Indigenous communities.

I’d like to share three insights from the RM journey with my colleagues.

First, the importance and beauty involved in helping adults re-discover the sacredness of play.
Adults are actually quite good at play once we create an environment that allows for the innate playfulness in all of us to emerge. However, getting to that point takes some work.

We observed in RM that when given the choice between playing a game and going for a walk/run, most adults choose the latter. But when we get those same adults to try it again, coaxed by the kids we have out there modeling it so well, the effects are immediate – joy, a release of that day’s stress and a boost of energy for the evening ahead. We need a way to help adults regain that element of play in their lives if they are going to experience true health and wellness for themselves.

Second, RM is intergenerational by design, far different than what a youth team or adult league offers. In RM, there are no parents sitting on the sidelines or in their cars texting. They are full participants! We think that larger changes we have seen in families – improved ways of eating, working through family discord, dealing with death – comes from a whole-family approach, much more so than individual exercise could offer.

Finally, the importance of creating loving spaces that heal. There are intangible elements that you feel when you show up to RM and the circle begins for that day, someone sharing a meditation, inspiration or prayerful thought.
That continues during the run/walk, where everyone you pass gives you high fives and encouragement. And when it all comes to a close, the circle forms again and ends with that same motivational tone and a handshake line similar to indigenous ceremonies. Indeed, this is a ceremony, more than a cardiovascular-disease-prevention or aerobic fitness activity.

Our work uses love as the funding source for all of our programs. We find this currency to be quite effective in uniting people who come from diverse backgrounds. Our leadership meetings never concern money, focusing instead on building a loving community, creating new leaders and empowering each person and family in the circle. If RM were funded by large grants, I’m not sure it would have that same energy that keeps people coming back.

So here’s the take-home message: Fill your heart with loving intention toward the work you do and great things happen!

Anthony Fleg, MD, an assistant professor in the Department of Family & Community Medicine and the College of Population Health, is founder of Running Medicine.
ARTHUR KAUFMAN, MD

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For more information on how to contribute to Dr. Kaufman’s legacy contact Betsy Skye Smith, Director of Development (505) 313-7623 or betsy.smith@unmfund.org
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