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Since 1984, the Science Museum of Virginia and the Governor of the Commonwealth of Virginia have jointly run the Virginia Outstanding Scientist and Virginia Outstanding Industrialist awards program. The Outstanding Scientist Award honors those scientists who, through their research and commitment to science, have made a recent contribution to basic scientific research, which extends the boundaries of any field of science. This contribution should be easily recognizable as a definite advance of knowledge or a significant technological development.
Division of Hematology/Oncology Honored

Dr. Tom Smith, chair of the Division of Hematology and Oncology, has recently been appointed as the U.S. representative to the National Cancer Institute of Canada Health Economics, Services, Policy and Ethics Cancer Research Centre Planning Committee. This group will define policy that allocates expensive national cancer care resources in the fairest, most effective way.

The National Library of Medicine/National Institutes of Health has awarded VCU a $400,000 two-year GO8/ROI grant to study “Truthful prognostic and treatment information for patients with metastatic breast, colon, lung and prostate cancer.” The team of Drs. Robin Matsuyama, Jim Khatcheressian, Laurie Lyckholm and Tom Smith will create and test decision aids for people with treatable but not curable cancer.

Drs. Smith, Patrick Coyne, J. Eitan Cassel and Lisa Shickle start B01CA116227-01 Palliative Care for Hospitalized Cancer Patients in June. This 5-year grant (total cost at $5 million; VCU-Massey direct costs $190,000/year) will assess the structure, processes, and clinical outcomes of care among hospitalized persons with advanced cancer that receive palliative care consultation team services as compared to similar patients receiving usual hospital care.

“All grants are creative and clearly distinguish our division of Hematology-Oncology from others in the country,” said Richard P. Wenzel, MD, MSc, Chair, Division of Hematology and Oncology.

Heart Gala 2007

On Friday, April 28th, the Fifteenth Annual Richmond Heart Gala to raise funds for research and education took place at the Science Museum of Virginia. Tom Goode, Richmond Market President for Bank of America, chaired the event presented by Bon Secours Richmond Health System.

The American Heart Association Richmond Heart Gala tradition started in 1992. The main objective of this black-tie event is to raise money for cardiovascular disease and stroke research and education. Over the years, through the generous support of sponsors and donors, the event has raised over $6 million. Last year alone, the Heart Gala raised over $750,000. This year’s goal is $900,000.

The Richmond Heart Gala enjoys the support of corporate, medical and social leaders in our community. The Pauley Heart Center and MCV Hospitals are major sponsors.

HIV and HAART in the Last Decade

The face of HIV/AIDS is changing. Per CDC statistics, heterosexual transmission accounted in 2005 for about 1/3 of all newly diagnosed HIV/AIDS cases in the U.S. While MSM activity is still the most common transmission means here, heterosexual transmission now accounts for more new infections than intravenous drug use. This comes as little surprise, given that globally, HIV transmission is overwhelmingly driven by heterosexual activity. African Americans account for only 12% of the U.S. population, yet now bear nearly 50% of the HIV disease burden. The number of new HIV infections in the U.S. and most countries is not dropping, and at least 25% of persons infected in this country are unaware. This led the CDC, in late 2006 to recommend that HIV testing become essentially “routine” in primary care settings – the goal being to test everyone, not just those in the “old” high risk groups. This, of course, has been met with a certain degree of public and legislative resistance in most states, including Virginia. It will take time but attitudes will change.

Yet there is much that has been accomplished in the last decade since the advent of triple drug highly active antiretroviral therapy or HAART in 1996. We have new drug combinations that are both more effective and have less toxicity. Typically, treatment is now once a day, sometimes with a single combination tablet. As a result of HAART, life expectancy after diagnosis of HIV in the U.S. has increased from <7 years to 24 years in 2006, with concomitant improvements in life quality.

Tripling life span from any disease in a decade is nearly unrivaled in medical history. We have more drugs in the HIV pipeline than all other infectious diseases combined, with new classes of drugs – integrate inhibitors and entry inhibitors, now available in our clinic for persons with very drug resistant HIV that was previously nearly untreatable. We are beginning to roll out large scale availability of drugs in underdeveloped areas of the world, though we have a long way to go. Along the way, we have made huge advances in our understanding of how HIV damages the immune system and how the body fights HIV that has driven HIV vaccine research at a frenzied pace. While a cure remains elusive, HIV is now a treatable chronic illness in developed countries and new hope exists in countries less fortunate.

Allergy Clinic Manages Difficult Immune-Medicated Diseases

The adult allergy asthma and immunology clinic in ACC4 evaluates and treats patients with a variety of immune-mediated disorders. These include common problems such as allergic rhinoconjunctivitis, sinusitis, asthma, insect venom and food allergies, urticaria, angioedema and atop dermatitis, and less common diseases such as anaphylaxis, mastocytosis, eosinophilia-related syndromes and primary immune deficiency disorders.

Collaborative interactions with physicians in other specialties play an important role in the management of certain patients, e.g., cardiologists and gastroenterologists in the management of hypereosinophilia. Clinical trials for new therapeutic agents to treat asthma, allergic rhinitis, common variable immunodeficiency, hereditary angioedema and hypereosinophilic syndrome have been offered to patients with these diseases. Such trials have played a role in the development of Advate and Xolair for asthma, and new preparations of IVIG for common variable immunodeficiency, and are now playing a role in the development of recombinant IL-3 in treating attacks of hereditary angioedema and of mepolizumab (anti-IL-5) for treating the hypereosinophilic syndrome. Further, research completed in the basic laboratory has been translated into diagnostic; blood tests for systemic anaphylaxis and mastocytosis, and immunohistochemical reagents used for the diagnosis of systemic mastocytosis.

For appointments at Adult Allergy and Immunology clinic, please call 828-9341.

Contributed by Lawrence B. Schwartz, MD, PhD

Charles & Evelyn Thomas Professor of Medicine Chair, Division of Rheumatology, Allergy & Immunology

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Contributed by Daniel Nixon, DO, PhD

Associate Professor of Medicine

Director, VCU HIV/AIDS Center

Dr. Todd Stavitz received the following letter:

Dear Dr. Stavitz,

...I wanted to thank you, Dr. Mitchell Schiffman, Dr. [Robert] Fisher and the entire staff at [Hume-Lee Transplant Center] for the years of care and kindness provided to my husband. I wanted you to know that all of his physicians at MCV were his favorite. You have a wonderful caring way with all of your patients and their families.

Thank you!
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