Fellows

Since only one percent of residency applicants are now selected into our Housestaff Program, it makes sense to examine the subspecialty training programs – our fellowships. This examination should take place even though all programs passed the Residency Review Commission with flying colors last year. It is important that our fellowship programs continue to improve.

Associate Chair for Education, Michael B. Edmond, M.D., MPH, is now addressing a centralized system for recruiting to assist the Division Chairs in administering their recruitment activities. Neal Roberts, M.D., Associate Professor, Division of Rheumatology, Allergy and Immunology, is chairing a two month review of the quality of our fellowship education. Simply stated, the Department is taking stock of its fellowship training with a goal of making these programs as competitive as our residency.

As we enhance the value and scope of fellowship training, the Department will increasingly seek fellow applicants with interest in research – basic or applied. Thus, the individual fellowship programs will need rigorous training, some with associated additional degrees at the Master level and others associated with intense basic science coursework. As a result of a critical evaluation of our fellowship training by the division chairs, it is likely that increasingly they will find excellent funding for fellows – national funding from NIH or from industry – to support progressively more complex research projects. Such funding is a measure of our academic growth in education.

For the reputation of the Department of Internal Medicine to continue to rise nationally, we must create new knowledge, improve our training, and enhance patient care. That is the mission of all good departments. By developing progressively stronger fellowship programs in our subspecialties, we stay focused on the mission while being recognized nationally and internationally for our work.

Richard P. Wenzel, M.D., M.Sc.
William Branch Porter Professor and Chair

Clinical Activities:

Interventional Bronchoscopy

Dr. Leonard Moses, Assistant Professor, Division of Pulmonary and Critical Care Medicine, specializes in interventional bronchoscopy procedures. He is one of the few physicians in the nation qualified to perform bronchoscopic stenting. Beginning in 1993 he began working with colleagues at the University of Pittsburgh to develop the procedure. “We were using cardiac stents and adapted gastrointestinal endoscopic equipment. We have come a long way since. There are now biomedical companies that produce equipment and stents specifically for our procedures.”

A stent is a tube of flexible wire that holds an airway open. Stents come in many different shapes and sizes for various applications. Some have a flexible coating. Stenting is indicated when patency of the central airways cannot be maintained using other bronchoscopic or therapeutic techniques such as bronchoscopic laser, and the patient has respiratory symptoms, impaired functional status, or diminished quality of life. Patients with malignant or benign conditions sometimes develop airway strictures that are successfully treated with stents. Dr. Moses reports that results can often be instantaneous and dramatic. “Recently, after completing a procedure, the patient, a wonderful lady, immediately sat up and kissed me, saying she could breathe easily for the first time in years. In another recent case, I made a follow-up call to a patient. His wife said he wasn’t available because he was out playing golf.”

The decision for stent insertion is usually made during a diagnostic flexible bronchoscopic exam. The process for bronchoscopy with stent insertion begins with an office screening...
New Faculty Member: Introducing Pamela Daffern, M.D.

Dr. Daffern earned her medical degree from the University of Texas Southwestern Medical School and completed her residency in internal medicine at the University of New Mexico Hospital in Albuquerque. After her residency, Dr. Daffern joined the faculty of the University of New Mexico as Assistant Professor where she served as the Director of the Walk-in Clinic. “New Mexico was both similar to MCVH, and unique in many ways. It was similar in that we had a large indigent population of Indians, however that patient population presented some difficult cultural barriers. Overcoming those barriers was half the battle.” While at New Mexico, Dr. Daffern also established the International Health Clinic, and the Student Health Center.

In 1991, she began a two year fellowship in Allergy and Clinical Immunology at Scripps Clinic in La Jolla, California. Upon completing her fellowship, Dr. Daffern served as Senior Research Associate at The Scripps Research Institute. Her area of research involved the interactions of eosinophils and epithelial cells in inflamed airways.

At VCU/VCV Dr. Daffern will evaluate and care for patients with diseases of allergy and immunology. She will also be involved in conducting clinical trials for drugs to treat these diseases. Her particular areas of interest are: chronic sensitivities, difficult asthma cases, allergic skin disorders, food allergies, and anaphylaxis.

Honors, Awards & Offices

Chequeta Allen, Administrator, has been reappointed for another two year term to the American Association of University Women Educational Foundation Career Development Grants Panel. Ms. Allen has also been appointed Administrator for the newly founded VCU Institute for Women’s Health.

Dr. Kevin Cooper, Professor, Division of Pulmonary and Critical Care Medicine, and Dr. Domenic Sica, Professor and Chairman, Division of Clinical Pharmacology and Hypertension, have been elected to the School of Medicine’s Promotion and Tenure Committee.

Dr. Domenic Sica has also been appointed as a contributing editor of the newly founded Journal of Clinical Hypertension. Dr. Sica contributes a regular column on the pharmacotherapy of hypertension.

Send in Your Contributions for the Fourth DOIM Poetry Volume Between Rounds

A number of contributions have already been submitted, along with some world class original photography. The deadline this year is September 20, so send in your submissions now! All contributions will be published. Send your contributions to: Michael F. Barnes, Box 980452, 828-5548, or email address: mfbarnes@hsc.vcu.edu

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and physical exam. Dr. Moses reviews the chest X-rays and chest CT scans and completes a comprehensive evaluation. The procedure itself is done on an outpatient basis or 23 hour admission, and usually takes 45-60 minutes. Stenting is usually done under general anesthesia with an anesthesiologist present.

In addition to stent placement, VCU/VCV has acquired an argon plasma coagulation unit for interventional bronchoscopy. Argon photocoagulation has been performed by gastroenterologists, and only recently has been adapted to pulmonary patients. Other Interventional Bronchoscopy procedures performed by Dr. Moses include: laser bronchoscopy (Nd:YAG, KTP, argon), HDR brachytherapy (in association with radiation oncology), bronchoplasty, or balloon dilation of airways for benign or malignant disease.

Dr. Leonard Moses

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The following abstracts were presented at the 1999 Annual Meeting of the American Geriatrics Society, May 19-23, in Philadelphia:


“Healthy older men have enhanced LH secretion to exogenous GnRH.” Vij, S., Kuno, H., *Mulligan, T.*

The following abstracts have been selected for presentation at the Annual Scientific Sessions of the Heart Failure Society of America, September 21-24, San Francisco:

Uppalapati, P., Prinz, A., Mohanty, P., “Hemodynamic improvement with carvedilol in patients with NYHA class IV heart failure receiving intravenous inotropes.”


The following abstract was presented at the 81st Annual Scientific Meeting of the Endocrine Society, June 10-14, San Diego:


The following presentation was made at the 14th Annual Meeting of the American Association of Nurse Practitioners, June 15-19, Atlanta: Nestler, J., “Women’s health: insights into the polycystic ovary syndrome.”

**Gastroenterology & Pulmonary Medicine Ranked in the Top 40 in Nation**

The 10th edition of “America’s Best Hospitals” ranks all 6,299 U.S. hospitals by surveying 2,400 board-certified specialists. These physicians are asked to name 5 hospitals in their specialty that they consider exemplary. The top 188 hospitals are then ranked in 16 specialties. To be eligible to be ranked, the hospitals must meet one of three standards: membership in the Council of Teaching Hospitals (COTH), affiliation with a medical school, or have 9 items of medical technology from a master list of 17. MCVH meets all three.

MCVH ranked high in two medical specialties that demonstrate the expertise of our faculty: 38th place in digestive tract, and 37th place in respiratory disorders.
Patient Care

The following letter was received by Dr. Richard Wenzel:

I can applaud with great personal testimony the superb medical-acute cardiac care given at MCV! I attribute my quality of life to the fine care I received.

The following letter was received by Dr. Domenic Sica:

Thank you for taking the time to see me yesterday for my first visit to you. I was truly impressed and thankful to see a physician that seems to care about his patients and demonstrates it with words and deeds.

Customer service is like a dinosaur, and when received I think it is only right that I write to express my gratitude to you and your staff, and also to Dr. Franadaz for a job well done.

The following letter was received by Dr. John Roberts:

Words can not express my gratitude for your dedication as a physician and for the way you treated [my husband]. With the help of God and your care and concern, you gave him two years and three months longer so we could be together. Most of the time was quality time and thank you for helping make that gift possible.

Grants

Dr. Stephen O’Keefe, Associate Professor, Division of Gastroenterology and Hepatology, has been awarded a Clinical Research Award from the American College of Gastroenterology in the amount of $17,670 for a study entitled “The effects of elemental diets of pancreatic trypsin synthesis and protein catabolism in patients with acute pancreatitis.” Dr. O’Keefe is a leader in developing dietary plans for patients with pancreatitis and other chronic conditions requiring specialized dietary treatments.

Dr. Maria Iuorno, Assistant Professor, Division of Endocrinology and Metabolism was been awarded a three year Clinical Associate Physician award by the NIH to perform clinical research studies in the polycystic ovary syndrome. The clinical studies will be conducted in the Clinical Research Center under the mentoring of Dr. John Nestler.

Dr. Evelyn Fisher, Associate Professor, Division of Infectious Diseases, has received an NIH grant for the Community Programs for Clinical Research on AIDS (CPCRA) in the amount of $546,035. This is a renewal of ongoing research being conducted by Dr. Fisher.

Dr. Robert Jesse, Associate Professor, Division of Cardiology, has received a $57,750 sponsored by Duke University, for a study entitled “Symphony II.”

Dr. Mitchell Shiffman, Associate Professor, Division of Gastroenterology and Hepatology, has received an NIH grant in the amount of $235,195 for clinical trials in hepatitis C.