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Mayo Clinic and the University of Minnesota establish a formal research collaboration
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Patricia Simmons, M.D., has carried a love of learning from the small country school where her education began to the University of Minnesota Board of Regents, the leadership board she was elected to in 2003. At Mayo Clinic, her career has been highlighted by achievements in adolescent gynecology and breast disorders and her service in leadership roles.

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The needs of the patient come first. This guiding principle is at work in so many ways at Mayo Clinic every day. In this issue of Mayo Alumni, you can read about the efforts under way to continue excellence in discovery and commitment to the future with the Minnesota Partnership for Biotechnology and Medical Genomics. The Partnership is a formal research collaboration between Mayo Clinic, the University of Minnesota and the state of Minnesota to improve health care using the most recent breakthroughs in medical technology to achieve goals that neither institution could alone.

The Minnesota Partnership has inspired discussions between the two institutions on additional joint efforts. Collaborative medical training on genomics is planned and cost savings are already being realized through bulk purchasing of microarray chips and supplies.

This exemplifies how Mayo Clinic is changing and at the same time maintaining its time-honored principle.

The changing world of health care is bringing new challenges, but also many opportunities for Mayo Clinic to flourish and better serve the needs of patients. I know you will find it interesting to learn how our alma mater is collaborating in research, which helps Mayo Clinic continue to practice the kind of health care that has distinguished it for generations.

T. Paul O'Donovan, M.D.
Cardiovascular Disease ’67
President
Mayo Clinic Alumni Association
Dr. Will Mayo had no way of knowing his assessment of the group medical practice would also perfectly describe a 21st century initiative, this one involving joint research to improve patient care. The Minnesota Partnership for Biotechnology and Medical Genomics is a venture that fits well into the Mayo concept that one can accomplish more with others than one can alone. The Minnesota Partnership is a formal research collaboration between Mayo Clinic, the University of Minnesota and the state of Minnesota to improve health care using the most recent breakthroughs in medical technology. By joining forces in the Partnership, these two renowned institutions hope to achieve goals that neither could separately.

The Partnership stems from a request by then Gov.-Elect Tim Pawlenty, who wanted to know whether Mayo and the University could collaborate in some way to foster biotechnology in the state and better position Minnesota for economic growth. Now, after three years of progress, the Partnership is promising long-term possibilities for both – critical breakthroughs in medical research and significant economic impact for Minnesota. A midrange estimate is an economic impact of $320 million and 4,300 jobs in 2010.

In 2001, lawmakers wanted to make sure that these two organizations could work together to launch an effective program. By 2003, there was no doubt. Research, administrative and legal staff from both institutions resolved issues, made compromises and reached agreements on everything from communications to intellectual property. Joint planning teams were set up, a Web site and newsletter were launched, and leaders were named. Providing leadership are Hugh Smith, M.D., chair, Mayo Clinic Board of Governors in Rochester, and Frank
Cerra, M.D., senior vice president for health sciences, University of Minnesota. Science coordinators for the Partnership are Eric Wieben, Ph.D., director of Mayo’s Genomics Research Center, and Mark Paller, Ph.D., assistant vice president for research at the university’s academic health center.

Initial funding from the Minnesota Legislature, Mayo Clinic, and the University has made possible the Partnership’s first research awards. In early 2003, the Partnership’s leadership asked for collaborative research proposals from their investigators. The proposals were required to be true collaborations by investigators from both institutions and involve research that could not be conducted by either organization alone. Projects had to advance understanding of a disease and generate outside funding, presumably from the National Institutes of Health. Applicants were strongly encouraged to involve some form of genomics or biotechnology in their proposals.

Response from researchers was overwhelming. Thirty-four collaborative proposals were received from 128 investigators from 12 colleges at the University and 121 investigators from Mayo Clinic, for a total of $21.8 million in requested funds. The applicants were hailed for their interest and enthusiasm. The overall quality of the science proposed was called superb. Clearly, the interest exceeded available funding. The field was narrowed and the final selection was made by an independent team of nationally recognized scientists. Four proposals were chosen to share the $3 million in direct funding. They included research on obesity, heart disease, Alzheimer’s disease and prostate cancer. The four projects were announced in January 2004 during a news conference at the state capitol.

Future Partnership plans include an initiative to increase laboratories for medical genomics in Rochester and a request for a five-year commitment from the Minnesota Legislature for $70 million in research support.

Minnesota Gov. Tim Pawlenty, left, announces the formation of the Minnesota Partnership for Biotechnology and Medical Geonmics as Hugh Smith, M.D., chair, Mayo Clinic Board of Governors in Rochester, right, and Robert Bruininks, president, University of Minnesota, listen during a news conference at the state capitol.
Two Partnership investigators are seeking to understand the genomic origins of atherosclerosis. It’s clear that some individuals have a greater susceptibility to arterial plaque and vascular dysfunction. Basing their research on the recently mapped human genome, Amir Lerman, M.D., from Mayo, and Robert Hebbel, M.D., from the University of Minnesota, hope to pinpoint the genetic factors that place patients at greater risk for “hardening of the arteries” and subsequent vascular disease and heart attacks.

Their investigation builds upon each institution’s respective discoveries and expertise. University researchers have previously devised a method for propagating the endothelial cells from a simple blood sample. Dr. Hebbel and his team will try to understand the functioning of the cells that line the vascular system. Those cells harbor the clues that could lead to a new drug or treatment.

At Mayo Clinic, researchers have already developed a clinical test to identify atherosclerosis. Dr. Lerman’s group will continue to study patients who have the condition, along with the cells. This team is particularly interested in inflammation signals in the vascular system and how they correspond to the biologic behavior of the endothelial cells. They will compare those cellular behaviors to the known vascular conditions of study volunteers. Their goal is to discover a means of earlier and more accurate identification of heart disease risks. Ultimately, the hope is for a new drug to control coronary artery disease as part of a broad-ranging therapy.

Another pair of investigators is tackling the growing obesity problem by studying how brain function affects weight. Mayo’s James Levine, M.D., and the University’s Catherine Kotz, Ph.D., are aware that some individuals have a greater resistance to weight gain and obesity – a characteristic that cannot be totally explained by exercise, eating habits and/or a person’s metabolism.

Again, foundational discoveries by each organization laid the groundwork for this study. The Mayo team has identified a fourth factor in weight loss – the calories burned not by exercise, but during regular, daily activities. They’ve termed this factor “non-exercise physical activity
thermogenesis” or NEAT. University researchers have identified mechanisms within the brain that are likely players in the regulation of NEAT in the body. Not unlike switches or thermostats, these mechanisms control how much energy a person burns for each type of activity. Some people are more efficient in using and burning energy in this way and the collaborative team wants to discover why. With that knowledge, researchers might be able to initiate or increase the factor in individuals prone to obesity.

Alzheimer’s disease is an increasing focus of medical research as the baby boomer generation ages. There is no cure or effective treatment, only therapies designed to slow the progress of dementia. It is known that the therapies are most effective when intervention is early. Again, because Alzheimer’s is traditionally diagnosed by accumulated observable symptoms (physical and behavioral) it is difficult to identify in the very early stages when the culprit amyloid plaques and neural tangles associated with the disease begin to form in the brain. MRI or PET scans are helpful, but at this point their precision is insufficient. There is no laboratory test and no way to make a definitive diagnosis, much less an early one.

**Partnering**

Catherine Kotz, Ph.D.,
University of Minnesota

James Levine, M.D., Mayo Clinic
A collaborative team headed by Michael Garwood, Ph.D., of the University of Minnesota, and Joseph Poduslo, Ph.D., and Clifford Jack, M.D., of Mayo Clinic, hope to develop a special probe, a “smart molecule” that could navigate through the blood-brain barrier and attach itself to amyloid plaques. This molecule would be chemically marked to make it easily identifiable with MRI. If successful, the method would be tested in animal models, and hopefully lead to a means of early diagnosis of Alzheimer’s in humans.

The fourth collaborative project funded by the Partnership seeks to find a biomarker for aggressive forms of prostate cancer. Currently, tests can indicate the presence of cancer, but not its likelihood of progression, a critical factor in deciding on treatment among older patients. George Klee, M.D., Ph.D., at Mayo and Donald Connelly, M.D., at the University are co-investigators. Blood or biopsy tissue
samples collected at Mayo Clinic will be tested using microarray technology and results will be cross-indexed against genes and known biomarkers being studied at both institutions. So much genomic data is expected that it will take the computing and analytical power of both organizations to handle the bioinformatics workload. Specialized software programs developed by the University will be used to help identify biomarkers. Mayo researchers will use the data to develop automated systems to measure the biomarkers. Knowing what to look for in blood or tissue and how to measure it, can lead researchers from the laboratory to clinical trials in testing prospective methodologies for prostate cancer screens. The goal is a specific chemical or genetic test that will identify the more aggressive forms of the cancer, allowing timely and equally aggressive treatment.

The Minnesota Partnership has inspired additional collaborations and discussions between the two institutions. Collaborative medical training on genomics is planned and cost savings are already being realized through bulk purchasing of microarray chips and supplies.

— Bob Nellis

Partnering

Donald Connelly, M.D.,
University of Minnesota

George Klee, M.D., Ph.D., Mayo Clinic
A COMMITMENT TO LEARNING

Mayo libraries offer a wealth of resources to support Mayo Clinic’s dedication to inquiry.
Walk off the elevator on the 14th floor of the Plummer Building, and you are surrounded by history. The marble wall filled with Mayo Clinic physicians’ names engraved on it in memoriam comes into view first. Through ornately decorated doorways, the Plummer Hall reading room is a hushed space. Dr. Henry Plummer gazes down from his portrait above the fireplace. Opposite are stained-glass windows filtering the subdued light of late afternoon. Individuals sit engrossed in reading, studying. Rows of medical reference materials surround them.

This first impression of a quiet, static, traditional library is deceiving, though. Look to the right. In the corner, you see two students working at computer terminals. Walk through a doorway just past them, and you find a state-of-the-art computer laboratory with Internet access and electronic links to extensive digital resources.

The blend of old and new on Plummer 14 is representative of the Mayo Clinic Libraries as a whole. Steeped in rich tradition dating back almost 100 years, the libraries continue to move forward, offering greater access to information, more services to employees and students, and increased speed and ease in obtaining materials. Mayo’s libraries now are among the most comprehensive and technologically advanced in North America.

Offering resources in new ways

Today, one of the most often used components of the libraries is the Mayo Digital Library. Staff and students throughout Mayo Clinic’s three main campuses and the Mayo Health System can simply sit down at their computers, log on, and the wealth of the libraries is at their disposal.

“The Mayo brothers and their early partners, in addition to being clinicians and researchers, were scholars, too. They all kept individual libraries because they were interested in the latest research and the application of that research to patient care.”

— J. Michael Homan

“Mayo Clinic has many doors. But, through the distribution of our electronic resources, everyone at Mayo always has access to us,” says J. Michael Homan, the libraries’ director. “Desktop access to digital resources at all Mayo sites eliminates geographic and time barriers to information and knowledge.”

The Mayo Digital Library includes 2,700 electronic journals, over 100 electronic books, and the institution’s primary, full-text drug information resources. Databases and tools such as Ovid, PubMed, UpToDate, MD Consult, ISI Web of Science and scores of others provide access to a variety of knowledge resources. Library staff create and maintain the library intranet site, the Mayo online catalog, an electronic journal database with links to all licensed resources, and the Mayo Authors’ Database. The Mayo Digital Library is used extensively – about 5.3 million times in 2003.

It’s not enough just to have the electronic resources available, though. They need to be easily accessible to the busy individuals the libraries serve. To that end, the staff has recently undertaken a major redesign of the Mayo libraries’ intranet home page.

“The home page is a launchpad to get to other resources and services, so it needs to be well designed,” says Homan. “We worked with a group of physicians, nurses and students to go through usability testing and tell us what was wrong with the old site.”

Based on users’ feedback, the new site will have less jargon and more opportunities for customization. With the first phase’s arrival in May, the improved intranet site is the latest in a long line of innovations put in place to meet the needs of Mayo Clinic Libraries’ patrons.
GROWING WITH THE CLINIC

When Drs. Will and Charlie Mayo decided they needed a medical library in 1907, it was due in large measure to their interest in scholarship and their desire to stay abreast of developments in medicine.

“The Mayo brothers and their early partners, in addition to being clinicians and researchers, were scholars, too,” says Homan. “They all kept individual libraries because they were interested in the latest research and the application of that research to patient care.”

The doctors hired Maud Mellish to organize a library and to initiate editorial and illustration services through which their publications and presentations could be expertly produced. As Mayo Clinic grew, the organization’s dedication to scholarship remained, and the library grew along with the clinic. When the 1914 Building was completed, the library was one of its primary occupants. In 1928, the library took up residence in the newly constructed Plummer Building, where it has remained for 76 years. Currently, the main branch of the Mayo Clinic Libraries occupies Plummer 11 through 16.

In addition to the Plummer Library, Mayo Clinic in Rochester has six branch libraries: the Venables Health Science Library in the Siebens Building, the Learning Resource Center in the Mitchell Student Center, the Saint Marys Hospital Staff Library, the Colonial Library at Rochester Methodist Hospital, and the patient libraries at Saint Marys and Methodist. Add the clinical and research libraries at Mayo Clinic’s locations in Jacksonville and Scottsdale, the Mayo Health System libraries, and the Mayo Digital Library, and you have one of the

A glimpse at medicine’s past

In a quiet corner on the 15th floor of the Plummer Building is a pathway to the past: Mayo Clinic’s History of Medicine Library. This unique library houses a fascinating collection of medical literature chronicling the development of science and medicine, including several thousand volumes of rare medical classics and early journal literature. The earliest book in the collection, Liber aggregatus in medicinis simplicibus, was published in 1479 and the earliest journal literature, “Philosophical Transactions of the Royal Society of London,” in 1665. Early medical imprints, from before 1875, and more recently published histories, biographies and other support material are included in the collection, as well, which encompasses 23,000 volumes.

The Mayo Clinic Libraries also have two online exhibits that highlight the history of medicine. To view the unique architectural features of Mayo Hall, and to learn more about the physicians and scientists honored there, go to www.mayo.edu/medlib/mayohall/index.html. An exhibit marking the library’s 90th anniversary and an important bequest to the library is on the Web at www.mayo.edu/medlib/lib_exhibit/introduction.html.

Alumni may use the History of Medicine Library’s resources by appointment. Assistance in identifying historical works, reference verification, and other literature research assistance also can be arranged. To schedule an appointment or a tour, call the History of Medicine Library at 507-284-3676.
CHANGING AS KNOWLEDGE ADVANCES

Along with the electronic and physical developments that have taken place within the libraries, the role of the librarians has kept pace with changing times, too. For example, in the early 1970s, when Pat Erwin began working at Mayo Clinic as a junior reference librarian, everything was done by hand. “When I first started, there were people hired just to shelve materials, pull books and journals, and make copies. By comparison, what that position requires now is incredible,” says Erwin, who is in her 32nd year as a Mayo Clinic reference librarian. “You have to be computer literate. You have to be able to function well within the electronic environment. You have to deal with 17 library locations. When something new comes in, you have to know where it’s supposed to go. It’s a far, far more complex environment.”

Currently, the libraries employ 28 librarians and other professional staff and 40 support staff. Their tasks involve public services, such as assisting patrons or performing literature searches, as well as behind-the-scenes work that most people never see.

One group that remains largely out of public view, but which fulfills a vital function for the libraries, is the staff that handles technical processing.

“When I first started, there were people hired just to shelve materials, pull books and journals, and make copies. By comparison, what that position requires now is incredible.”

— Pat Erwin
for the library system. The duties include acquiring and cataloging all the library materials – electronic and hard copy – and marking and placing the physical items. In addition, those individuals monitor everything published in medicine, science, technology and health care administration to ensure that Mayo’s libraries contain what staff and students need for scholarship, as well as clinical and scientific decision making.

CONTINUING SUPPORT OF SCHOLARSHIP

As the amount of information available has expanded, it has become increasingly more difficult for clinicians and scientists to find all the materials they require for research. That’s where the services of Mayo’s reference librarians come in.

“The electronic world – the world of knowledge – has become extraordinarily complex with large numbers of databases and resources, and huge volumes of new knowledge areas,” says Homan. “It is incumbent upon the library to keep up with that. Our librarians know how to find things quickly and expertly.”

As Erwin describes the process she goes through to complete a complex literature search, it’s easy to see why staff and students often leave the searching to the experts. “Normally, when I receive a request for information about a topic, I start with one database. I get ideas about what’s...
out there, what approaches to take, and the vocabulary that’s available,” she says. “Then I switch and do the same thing all over again using another database that has a different perspective or emphasis. Before I’m through, I may work through five, six, sometimes 10 different databases.”

In addition to complex searches for information, library patrons also can request assistance in navigating the digital library. For example, a staff member working on a research topic who knows of 10 articles she needs can ask the library to find the articles, scan them to make electronic copies, and e-mail them to her.

The advanced services and the electronically sophisticated resources available through the Mayo Clinic Libraries today are a far cry from the one-person shop Maud Mellish began in the early 20th century. And, the libraries are likely to continue to evolve as time goes on. However, the original purpose and goal of the libraries have remained constant.

“Mayo Clinic supports these libraries, their services and resources because the institution values research and education,” says Homan. “It’s been that way for a long time. Investing in the libraries illustrates Mayo’s ongoing, solid commitment to the advancement of medical knowledge and evidence-based health care.”

—Tracy Reed Will
Paul O’Leary, M.D., came to Mayo Clinic in 1917, and after serving in the U.S. Army Medical Corps in World War I, he returned to Rochester and helped build the Department of Dermatology into a world leader.

Dr. O’Leary’s impact on the field of dermatology and the legacy he left with his leadership and teaching at Mayo Clinic will now be honored with the Mayo Clinic Alumni Association’s newest society, the O’Leary Society.

“There’s so much tradition in Dermatology and this will formalize the feelings of many,” says Randall Roenigk, M.D., chair of the Mayo Clinic Department of Dermatology in Rochester and a member of the society’s founding committee.

The organization held its charter meeting in February in Washington, D.C. It is organized in similar fashion to other Mayo Clinic Alumni Association societies, such as the Priestley and Plummer societies.

From 1924-1953, Dr. O’Leary was chair of the Mayo Clinic Section of Dermatology and Syphilology, which is today’s Mayo Clinic Department of Dermatology. He served as chair from age 33 to 62. He passed away at age 64.

During his career, Dr. O’Leary was president of the American Academy of Dermatology, editor-in-chief of the Archives of Dermatology and was a founding director of the American Board of Dermatology. At Mayo Clinic he was president of the staff.

“The Society is dedicated to continuing Dr. O’Leary’s legacy of professionalism, personal integrity, scholarly teaching, research and sincere concern for all patients.
entrusted to his care,” says K.L. Spear, M.D., of Fort Myers, Fla., O’Leary Society president.

Dr. Roenigk praised the level of commitment and devotion alumni have for Mayo Clinic.

“In my experience, alumni of Mayo dermatology programs are among the most devoted to their training program as any in the country,” Dr. Roenigk says. The dermatology alumni dinner hosted at the annual Academy of Dermatology meeting is often attended by more than 100 alumni from Mayo Clinic, he notes.

Organizers hope the society can serve as an organization that supports continuing education of its members, as well as supports the academic mission of the three Mayo Foundation Departments of Dermatology.

“The O’Leary Society should provide a forum for dermatologists to interact in ways that foster research, education and the care of patients,” says Mark Dahl, M.D., chair of the Department of Dermatology at Mayo Clinic in Scottsdale.

Dr. Roenigk says that as Mayo Clinic continues to grow, the O’Leary Society will serve as an important organization to continue the focus on the traditions unique to Mayo.

In the past, the Dermatology alumni have met for the “O’Leary Meeting” every other year. They plan on meeting socially and for business at least twice a year and will hold their meeting in conjunction with the Meeting of the Mayo Clinic Alumni Association. The Mayo Clinic Alumni Association’s next meeting is scheduled for 2005 in Jacksonville.

— Michael Dougherty

O’Leary Society
Officers and Members at Large 2004

President: K.L. Spear, M.D.
President-elect: Joe Fiore, M.D.
Vice President: Carl Soderstrom, M.D.
Secretary-Treasurer: Randall Roenigk, M.D.

O’Leary Members at Large:
2004-2006
Smith Gibson, M.D.
Arnold Schroeter, M.D.

2004-2008
Karen Heildelberg, M.D.
Henry Randle, M.D.

2004-2010
Sigfrid Muller, M.D.
Suzanne Connelly, M.D.

Who is eligible for the O’Leary Society?

Regular membership:
■ Completed Mayo Dermatology residency or a one-year training program in any recognized subspecialty in Mayo Dermatology.
■ Mayo Clinic staff members, not trained at Mayo Clinic, are eligible after 12 months.
■ Mayo Medical School graduates, who are also certified by the American Board of Dermatology.

Associate membership:
■ Residents in training.

Honorary membership:
■ Individuals nominated and unanimously approved by the O’Leary Society Board of Directors.

honor longtime Mayo Clinic department chair
Learning well:
A profile of
Patricia Simmons, M.D.

The life of Patricia Simmons, M.D., defies easy categorization. She’s the Missouri farm girl with the engaging smile who became a leading pediatrician and one of the world’s authorities on adolescent gynecology and breast disorders. She’s equally at home in the Mayo Clinic Board Room, along the canals of Venice or deep in the subtexts of a contemporary American novel. In her career she may be a physician first, an educator second, and an executive after that, but to family, friends and colleagues, she has embodied the art of living well by doing well for others.

Dr. Simmons traces her love of learning and of life to her early years growing up on a farm and being taught in a two-room schoolhouse. “I learned about the process of learning in that schoolhouse,” says Dr. Simmons, currently a professor in Mayo Medical School. “With four grades in one room, once you had learned something, the teacher deployed you to work with the younger kids. For instance, I would help first graders learn to read. I’m not sure how much they learned from me, but I became a pretty good reader. On the other hand, once you’d finished whatever fifth grade was doing, you could listen in on eighth-grade science. You could learn as much as you wanted.”
Her thirst for knowledge and her nascent leadership abilities blossomed throughout her life and came to fruition at Mayo Clinic in Rochester. She served two terms as a member of the Board of Governors there and also was a member of Mayo’s Executive Committee and Board of Trustees. In all her leadership roles she has displayed a unique ability to leaven the scientific rigor of her medical education with additional learnings from her passions for the humanities, her travels abroad and the simple art of listening and caring for people, one patient at a time.

“While my parents never burdened me with their expectations for what I should become, I don’t think they ever saw my future on the farm,” she says. They were supportive of her plans to find the right college. After searching nationally she decided on Carleton College in Northfield, Minn. Dr. Simmons’ decision to pursue medicine as a career came late in her undergraduate years while she was studying biology. While other students had already decided on medical school, Dr. Simmons was only certain that she loved science and wanted an advanced degree. An adviser in her junior year suggested medical school.

“It was some of the best advice I ever received,” says Dr. Simmons “I loved science, I loved interacting with people. It seemed like medicine would pair these two well.”

Dr. Simmons earned her medical degree from the University of Chicago Pritzker School of Medicine. During her final year she married Lester Wold, M.D., now an anatomic pathologist at Mayo Clinic in Rochester. They both found matches for residency training at Mayo Clinic. Dr. Simmons completed her residency in pediatrics and then did a fellowship in pediatric endocrinology.

Dr. Simmons says she was so busy as a new resident there wasn’t much time to reflect on Mayo Clinic’s system or philosophy. “When you’re in residency, you’re just working hard to learn everything you can to be a good doctor,” says Dr. Simmons. “But as you gain experience at Mayo, you learn to appreciate the extraordinary people and systems here and the power of being focused on the needs of the patient above all.”

“It’s a joy to share your experiences and interests, watch someone grow and see them discover what they can become. Being identified by someone as a mentor is a compliment and a tremendous honor.”

— Patricia Simmons, M.D.
Dr. Simmons says her decision to pursue an academic medical career stems from the lesson she learned in the two-room school: once you've acquired a body of knowledge you have a responsibility to pass it on to others. Throughout her career, Dr. Simmons has spoken at medical conferences and other venues from La Crosse, Wis., to Tokyo, Japan. “Patients are best served by doctors who remain current and are able to pass that knowledge on to new doctors,” she says. To that end Dr. Simmons has served as a mentor to young doctors and other women at Mayo interested in future leadership positions.

“You have an obligation to respond when people seek you out,” she says. “It’s a joy to share your experiences and interests, watch someone grow and see them discover what they can become. Being identified by someone as a mentor is a compliment and a tremendous honor.”

Dr. Simmons says being a physician remains the most rewarding responsibility she has outside of her family.

“As I look at my career at Mayo Clinic, I’m convinced I’m the best doctor I can be because of the people with whom I practice, the support I receive and the system in which I practice,” she says.

Dr. Simmons’ special abilities as a physician have long been recognized. Doreen Frusti, R.N., chair of Mayo Clinic’s Department of Nursing, remembers when she and Dr. Simmons worked together on the adolescent chemical dependency unit in the 1980s. Dr. Simmons was the medical consultant and Frusti was the director of clinical nursing and the program coordinator.

“It was a challenging unit and it took a special person to work there,” Frusti says. “She treated each and every one of those young and challenging patients as though they were the most important person in the world. She gave them respect. A young person in this situation needed a self-esteem boost, and Dr. Simmons always did this for them. She was unusual in her consistent respect for people.”

Through the years Dr. Simmons has made many contributions to Mayo Clinic beyond her clinical practice. She has been a physician leader and participant in many of Mayo Clinic’s public initiatives in the fields of marketing, communications and government relations, both federal and state.

“Dr. Simmons understands the importance of the relationship of Mayo Clinic with its public,” says John La Forgia, chair of Mayo Clinic’s Department of Public Affairs and a longtime colleague. “She’s able to translate Mayo’s mission, values and current programs in a way that people instantly grasp even if they aren’t experienced in medical matters.”

She especially treasures her time as chair of the executive board of Mayo Medical Ventures as one that opened her eyes to Mayo Clinic’s broad reputation and its consequent ability to find new ways to extend its healing mission.

“Dr. Simmons has the ability to quickly understand the needs and desires of Mayo’s external partners and at the same time represent Mayo very well with a wide variety of such partners,” says Rick Colvin, executive director of Mayo Medical Ventures. “She added significant value to Mayo Medical Ventures during the time I worked with her.”

Dr. Simmons’ leadership experience extends to professional societies. She is the president of the North American Society for Pediatric and Adolescent Gynecology and is a past president of the Northwest Pediatric Society.

Last year, the Minnesota Legislature unanimously elected Dr. Simmons to the University of Minnesota Board of Regents. She represents Minnesota’s First Congressional District, which stretches across the southern tier of the state from South Dakota to Wisconsin. The regent’s post has been held by other Mayo physicians including Dr. William J. Mayo and Dr. H. Bryan Neel III.
“People in our community asked that I take a look at this,” says Dr. Simmons. “I was flattered, but had substantial reservations. After all, I love my work at Mayo and my plate was full. But as I listened to friends and colleagues, and studied the issue, I became intrigued with the future of higher education, particularly the role of the university in society. Finally, I couldn’t resist, and decided I very much wanted to participate in university governance.”

Wanting, however, was not enough. It also meant campaigning. Although the regent post is not a public election, it is a vote by the Minnesota House and Senate, and so required many of the same activities, such as meeting with individual legislators and developing campaign-like materials that described Dr. Simmons’ community involvement, professional achievements and commitment to serving the public.

“In the end, you sit in the gallery to watch the vote,” Dr. Simmons says. “When your name comes up and each legislator is either voting for or against you, you’re a little anxious, particularly when you’re sitting there with your mother at your side. It’s all rather daunting.”

Of the 196 senators and representatives present, 196 voted ‘aye.’ Dr. Simmons said the unanimous vote was gratifying, but more importantly indicated a level of support that would greatly enhance her effectiveness on the Board of Regents.

“As a regent, I have the opportunity to think beyond medical education,” she says. “Institutions of higher learning and their leaders have responsibility to help define the future of society.”

Balancing the priorities of such an active life would be a challenge for any family. Considering that Dr. Simmons’ husband, Dr. Wold, is a physician and leader at Mayo, as
Les has encouraged me to move forward at each step in my career. He’s been so supportive and that makes it possible to take on new challenges.”
— Patricia Simmons, M.D.

well, makes the juggling even more complicated. Dr. Wold is a member of the Mayo Board of Trustees and emeritus chair of the Department of Laboratory Medicine and Pathology.

“The secret is to marry the right person,” Dr. Simmons says. “Les has encouraged me to move forward at each step in my career. He’s been so supportive and that makes it possible to take on new challenges.”

Dr. Simmons and Dr. Wold have two children: Paul, 21, and Barbara, 20.

“My mom and I have an amazing relationship and very few life experiences would be complete without her,” says Barbara. “My mother is an amazing woman who has inspired me and many of my friends, both female and male.”

Just as their children left home for college, Dr. Simmons’ parents decided to move to Rochester. She said it’s been a wonderful time to have her parents so near again and be able to share life with them.

Dr. Simmons chuckles at the question her daughter prompted her with several years ago when she was on the Board of Governors of Mayo Clinic Rochester. “Barbara said, ‘So when your term ends, I’ll be graduating from high school. What are you going to do then, Mom?’ It was a very good question.”

Dr. Simmons doesn’t plan her next moves long in advance. Her preference is to devote the time and energy to her current endeavor. “I’ve always tried to do the best I could on the task at hand,” says Dr. Simmons. “When you work hard and do well, it creates choices for you.”

Dr. Simmons is now focused on her clinical practice, her service as a regent and her related work in public affairs. It was late last year and months after her election to the Board of Regents that Minnesota Gov. Tim Pawlenty encouraged Mayo Clinic and the University of Minnesota to join forces in a partnership to capitalize on each institution’s strengths in genomic research. She said the Minnesota Partnership for Biotechnology and Medical Genomics is likely to yield great results for patients, the public and both institutions.

“The genomic partnership is very much in keeping with Mayo’s philosophy that the result can be greater than the simple sum of the parts,” says Dr. Simmons.

Recently, Dr. Simmons attended a national conference for leaders in higher education.

“A speaker asked the attendees to raise a hand if they were the first person in their family to go to college,” says Dr. Simmons. “A large number of hands went up. That’s a wonderful aspect of the United States. Here was a graphic illustration of what education can do. All of these people who were the first to attend college in their family are now leaders in academia.”

Dr. Simmons was one of those raising a hand. She hasn’t forgotten that two-room schoolhouse where her journey began. This past March, Dr. Simmons and daughter Barbara visited the site on a sunny, windy spring day. The building, still standing, hasn’t seen a student for many years. Dr. Simmons and her daughter peeked through broken windows at the two small rooms that seemed so large in her memory. Since her childhood in those rustic rooms she’s had experiences that were beyond even her vivid imagination. She knows though that none of it would have occurred without the fundamentals of learning, sharing and giving she acquired from her family on the farm and her education in a two-room schoolhouse in the Missouri heartland.

— Michael Dougherty
Mayo Clinic Board of Trustees welcomes new public member

Ronald Olson, J.D., a Los Angeles attorney, was welcomed in May as a new member on the Mayo Clinic Board of Trustees during the board’s quarterly meeting in Rochester. Olson will serve a four-year term.

“Our trustee board nominating committee identified key characteristics a new member should have,” says Denis Cortese, M.D., president and chief executive officer of Mayo Clinic. “Ron Olson fulfills these requirements in exemplary fashion.

“Ron possesses great dimension in leadership and brings diverse experiences to the table. He has had a distinguished legal career and has developed great expertise in corporate governance, and we look forward to how he will contribute to our organization. He will be a great asset to Mayo Clinic.”

Olson has practiced law with the firm Munger, Tolles & Olson in Los Angeles since 1968, focusing on commercial litigation. He also counsels executives and boards of directors in a range of matters, including corporate governance. Olson serves on the board of trustees for Southern California Public Radio, the RAND Corporation and the University of Southern California Annenberg School for Communication. He is a director for the following organizations: Berkshire Hathaway, Edison International, City National Corporation, California Institute of Technology and Jules Stein Eye Institute.

Mayo Eugenio Litta Children’s Hospital director named

Philip Fischer, M.D., chair of the Division of General Pediatric and Adolescent Medicine and director of the Pediatric Diagnostic and Referral Clinic, has been named medical director of Mayo Eugenio Litta Children’s Hospital.

Dr. Fischer received medical school training at the University of California, Irvine, completed his pediatric residency at the University of Utah, and studied tropical medicine in England. He practiced pediatrics in central Africa for six years while serving as the associate director of a medical center there.

He was then on the faculty of the University of Utah for seven years and has been at Mayo Clinic since 1999.

Dr. Fischer’s research interests are broad and include congenital malaria, calcium deficiency and adolescent fatigue.

Mayo Eugenio Litta Children’s Hospital is an 85-bed facility located within Saint Marys Hospital. The nine-year-old facility has 43 general care beds, 28 neonatal intensive care beds, and 14 pediatric intensive care beds. Mayo Eugenio Litta Children’s Hospital has a Level One Pediatric Trauma Unit. Fixed-wing aircraft and the Mayo One helicopter provide pediatric and neonatal transport services to both regional and national patients.

Mayo Clinic Researchers Identify Gene Regulating Aging and Fertility

Mayo Clinic researchers have discovered a gene responsible for the onset of aging, including age-related disorders such as infertility, reproductive problems and cataracts. This research, conducted in genetically modified mice, is promising in helping physicians understand and treat the same disorders in humans. The findings appear in the July issue of the journal Nature Genetics.

The discoveries came as the result of general investigations into possible genetic causes of cancer. In this case, it was discovered that this particular gene, called BubR1, governs production of a protein that modulates physical aging. The mice studied lacked normal levels of that protein and began to age prematurely.

“Darren Baker in our laboratory found that mutant mice with low amounts of BubR1 protein live five-times shorter than normal mice. They also develop a variety of age-related disorders at a very young age,” says lead investigator Jan van Deursen, Ph.D., of the Mayo Clinic Departments of Pediatric and Adolescent Medicine, and Biochemistry and Molecular Biology.
The research was supported by a grant from the National Institutes of Health.

Dr. van Deursen says, “This prompted us to investigate whether BubR1 protein levels go down as normal mice age naturally – which is indeed what we found. Based on these findings, we believe it is the decline of this protein with time that may trigger some of the physiological effects of aging.”

Another Mayo investigator, Karthik Jeganathan, discovered that mice with low amounts of BubR1 protein are infertile and unable to distribute chromosomes properly when their germ cells divide. Abnormal numbers of chromosomes in germ cells are a hallmark of reproductive aging in humans, and the primary cause of increased stillbirths and birth defects, such as Down syndrome, in women over 35 years of age. Says Dr. van Deursen, “Given the age-dependent decline in ovarian BubR1 in mice, it seems reasonable to assume that this protein may contribute to age-related infertility and certain birth defects in humans.”

In collaboration with Mayo ophthalmologist J. Douglas Cameron, M.D., the researchers discovered that mice with low amounts of BubR1 also develop cataracts that are very similar to age-related cataracts in humans.

Mayo Clinic establishes landmark research program to predict and prevent alcoholism and other addictions

Mayo Clinic has established a landmark research program in the genomics of addiction with the long-term goal of predicting and preventing alcoholism and other chemical dependencies.

The first step in the research will be to identify human genes that contribute to someone’s vulnerability to alcoholism. The next step will be to develop ways to use the genetic information to protect someone from becoming addicted. Ultimately, people who are at increased risk of becoming addicted could receive personalized therapy that could change their lives.

The total investment needed over five years to support this research is nearly $20 million. The Samuel C. Johnson family of Racine, Wis., and The SC Johnson Fund have committed a total of $12.05 million over five years to the program. Mayo Clinic is responsible for raising the additional funding from other sources. The generosity of the Johnson family will provide full funding of the program in 2004 and half of the funds needed for 2005-2008. In honor of this significant support, the program will be named the Samuel C. Johnson Program in the Genomics of Addiction.

The late Samuel C. Johnson served as chairman of the Mayo Clinic Board of Trustees from 1983 to 1990, marking his term as the longest-serving public member of Mayo’s board.

“We are grateful to the Johnson family for their generosity and support,” says Hugh Smith, M.D., chair, Board of Governors, Mayo Clinic in Rochester. “Their generosity is another important step in a concerted effort by Mayo Clinic to secure both private and public funds that will allow us to translate genomic discovery directly into improved patient care. The early success of our partnership with the University of Minnesota through the Minnesota Partnership for Biotechnology and Medical Genomics helped spark interest from and ultimately the generosity of the Samuel C. Johnson family in making this gift. Clearly, momentum is building toward accomplishing even greater things as we work with a variety of public and private partners to move genomic medicine forward.”

David Mrazek, M.D., chair, Mayo Clinic Department of Psychiatry and Psychology, will direct this research program. “We have known for years that alcoholism runs in families and that children of alcoholic parents are at very high risk of developing the problem,” says Dr. Mrazek. “We also know that a deep craving for alcohol is a core component of the problem and that there is good evidence that these cravings have a genetic basis. Some genes already have been linked to alcoholism, but every relevant gene must be identified so we can learn how they interact. This can lead to personalized therapies for people at risk for developing alcoholism and other addictions, involving effective methods of prevention and innovative treatments.”

Eric Wieben, Ph.D., director, Mayo Clinic Genomics Research Center, and Mayo’s project director for the Minnesota Partnership in Biotechnology and Medical Genomics says, “The emerging field of medical genomics promises to transform the practice of medicine. The Samuel C. Johnson Program in the Genomics of Addiction will let us apply the latest advances in science to reducing the burden of addiction on our families and our society. Attacking the problem of alcoholism and other addictions at the point of origin would not have been possible 10 years ago, but it is today.”

Nearly 14 million Americans, one out of every 13 adults, abuse alcohol or are alcoholic, according to the
National Institute on Alcohol Abuse and Alcoholism.

Several infrastructure components are essential to this and other genomics research efforts at Mayo, including adequate research space. Mayo plans to leverage its own investments, state funding and the philanthropic gifts to create the synergy necessary for scientific advances.

Mayo Clinic in Rochester moves to electronic medical records

The paper trail is stopping for outpatients at Mayo Clinic in Rochester. From now on, all medical records will be created and stored electronically for nearly 1.5 million annual outpatient visits.

“This is a technology milestone,” says David Mohr, M.D., internal medicine specialist who has guided the process from idea to reality. “But more importantly, it’s a tool to streamline and improve patient care.”

Electronic record keeping enables all providers to have immediate access to a patient’s records, including physician notes, orders for tests and medications as well as laboratory and test results.

The electronic records can be searched and retrieved in many ways, including by date of treatment, physician’s name, test name, test category and by the health concern for which a patient was seen. Electronic records replace what often are very thick plastic jackets filled with color-coded paper records. A patient who has complex health needs might have 40 jackets of records.

Innovative patient record keeping first started at Mayo Clinic in 1907. Henry Plummer, M.D., the fourth physician in the Mayo practice, designed a system to keep all of a patient’s records in a single file that traveled with the patient and was stored in a central repository.

Mayo Clinic built a system of conveyers and pneumatic tubes to carry patient records and correspondence throughout the clinic, an idea Dr. Plummer picked up while investigating how factories and businesses managed information.

The move to electronic medical records began 11 years ago when teams of Mayo physicians, other care providers, administrators and information systems specialists began planning what’s now called Mayo Integrated Clinical Systems (MICS). With no suitable on-the-shelf product available, Mayo Clinic worked with information technology vendors to design its own, one of the first systems anywhere to integrate records from clinic and hospital practices.

In 1994, the first electronic physician note was entered. Now, 14 million notes and 200 million laboratory results are in the system and accessible in seconds. In 1997, radiology images were added. Nearly 44 million radiology images are stored and available online.

Today, 24,000 care providers and support staff use the system at Mayo. Across the campus, there are 15,000 terminals to input and access data. Every week, 55,000 clinical notes are added to the system, and 125,000 outpatient orders are made electronically for diagnostic tests, medications or consultations.

System security and stability are paramount – both to protect patient privacy and ensure information is available to support patient care.

Study led by Mayo Clinic finds treatment causes short-term, modest delay in Alzheimer’s disease onset in patients who have mild cognitive impairment

For the first time, a drug appears to have a slowing effect — though limited — on the progression from mild cognitive impairment, a strong early predictor of Alzheimer’s disease.

This randomized, double-blind, placebo-controlled, multicenter study compared vitamin E; donepezil, an Alzheimer’s treatment drug; and placebo for delay or prevention of progression to Alzheimer’s disease in mild cognitive impairment patients. The study’s results were presented at the Ninth International Conference on Alzheimer’s Disease and Related Disorders in Philadelphia on July 18. The Alzheimer’s Association described the trial as “among the most anticipated studies” to be presented at the conference.

“This is the first study to demonstrate any positive treatment effect on mild cognitive impairment with respect to progression to Alzheimer’s disease,” says Ronald Petersen, M.D., Ph.D., Mayo Clinic neurologist and lead investigator of the trial. “We are optimistic because this means we have begun to make progress toward delaying the development of Alzheimer’s disease and the cognitive decline that accompanies it.”

The study investigators report that vitamin E did not have an effect on slowing the progression to Alzheimer’s disease. However, over the first half, or 18 months, of the three-year trial, mild cognitive impairment patients treated with donepezil had a reduced risk of
progressing to Alzheimer’s disease compared to patients who took placebo; the average delay in disease progression was about six months in those subjects who progressed to Alzheimer’s disease. Although the patients treated with donepezil initially progressed to Alzheimer’s disease at a slower rate than patients treated with vitamin E or placebo, this risk-reduction effect was short term. By the end of the study, the risk of progression to Alzheimer’s disease was the same among all three treatment groups.

“There were a lot of complicating factors, however, and there was no overall risk reduction effect of donepezil by the end of the study,” says Dr. Petersen. “It looks like donepezil had a time-limited, modest effect.”

The investigators do not know exactly why donepezil’s effect dropped off over time. Theories are that the drug’s effect wore off after 18 months, or that the drug exerts a modest effect and then the disease process outweighs the chemical effect of the drug, indicates Dr. Petersen.

Previous studies show that without treatment, about 10 to 15 percent of individuals who have mild cognitive impairment progress to Alzheimer’s disease each year. However not every patient who have mild cognitive impairment will progress to Alzheimer’s disease.

During the three-year study, the trial participants developed Alzheimer’s disease at a rate of 13 percent per year. Among those who progressed to Alzheimer’s disease, patients treated with donepezil averaged 661 days until diagnosed with Alzheimer’s disease, while those treated with vitamin E averaged 540 days until Alzheimer’s diagnosis and those treated with placebo averaged 484 days to Alzheimer’s disease.

Due to the complexity of the study’s results, the investigators point out that more analysis will be critical to assess the practical implications of the new information and make recommendations for clinical practice.

Mayo Clinic’s designation renewed as an Alzheimer’s Disease Research Center

The National Institute on Aging renewed Mayo Clinic’s designation as one of the country’s 29 Alzheimer’s Disease Research Centers for an additional five years. The renewal comes with a $7.5 million grant to support research at Mayo Clinic in Jacksonville and Rochester. Since 1991, Jacksonville investigators have been at the forefront of Alzheimer’s research in African-Americans.

About 330 cognitively normal, African-American volunteers participate in ongoing research at the clinic. And although they have traditionally been underrepresented in Alzheimer’s disease research, the disease is widely thought to disproportionately affect African-Americans. Many researchers have looked for differences in genetic predisposition without convincing results.

Mayo Clinic researchers believe if African-Americans are disproportionately affected, it may be because diseases, such as diabetes and hypertension, which may put people at risk for developing Alzheimer’s, affect African-Americans more than other racial groups. They also believe that standardized neurocognitive tests probably contribute to misdiagnosing a number of African-Americans. Physicians use these tests to help them diagnose Alzheimer’s by comparing a person’s cognitive abilities to what’s considered normal. However, data for determining what normal memory is for older African-Americans did not exist. So Mayo Clinic researchers, working with their large group of volunteers, determined soon-to-be-published standards.

As they’ve recruited cognitively normal, older African-Americans to participate in this research, Mayo Clinic physicians have also provided free dementia evaluations and follow-up treatment for more than 350 African-Americans.
Mayo Update

Floyd Willis, M.D., a family practice physician at Mayo Clinic in Jacksonville, and other researchers are studying early memory loss in African-Americans. Now that there are standards defining what normal memory is in older African-Americans, Dr. Willis wants to know if early memory loss is the beginning of Alzheimer’s. If it is, by identifying these people early, they’d be the ones to benefit most from existing or yet-to-be-discovered therapies that slow progression of the disease.

On the other hand, Dr. Willis says knowing that early memory loss isn’t due to the Alzheimer’s disease process can help direct physicians to the real cause. “As a primary care physician, it’s extremely important to me,” he says. “That’s because significantly more African-Americans are theorized to have memory problems from little strokes. Where do these little strokes come from? Hypertension and diabetes. So if there are large numbers of African-Americans who actually have their memory loss because of these small strokes, that’s significant, because you can fix these problems. We can’t yet arrest and correct Alzheimer’s disease, but it is possible to correct hypertension and diabetes, or at least find them much earlier before they start causing problems.”

Mayo Clinic named one of four collaborative MS research centers

A creative approach to nerve tissue repair, coupled with an unusual combination of expertise helped Mayo Clinic be chosen as a

Collaborative MS Research Center by the National Multiple Sclerosis Society. Mayo Clinic is one of only four such centers to earn the distinction this year.

Stephen Reingold, Ph.D., the National Multiple Sclerosis Society’s vice president of research programs, describes the Mayo Clinic research initiative as “bold and exciting.” He adds, “By combining the skills of experts in MS research, other specialists, and new technologies, the Mayo approach holds great potential for speeding efforts to bring novel methods of tissue repair to the fore of MS treatment.”

“Earning this award is really exciting for us because it acknowledges all the excellent work investigators at Mayo Clinic have done toward fighting this disease, and it funds us to go forward with a research program that itself is very innovative,” says Mayo Clinic MS expert Moses Rodriguez, M.D.

The award includes $825,000 in research funding over a five-year period.

The other Collaborative MS Research Centers are Johns Hopkins University, Yale University and The Cleveland Clinic Foundation.

The Mayo Clinic multidisciplinary research team’s goal is to find a new way to stimulate the body to repair the MS-damaged covering of nerve fibers called myelin. When the protective myelin covering is damaged, nerves do not function properly and body functions can be lost.

MS affects an estimated 400,000 people in the United States annually.

Researchers discover location of possible lung cancer gene

A breakthrough discovery has brought cancer researchers a monumental step closer to knowing why some people are more likely to get lung cancer. A group of cancer researchers at 12 institutions and universities, including Mayo Clinic, the National Cancer Institute (NCI) and the National Human Genome Research Institute, has located a region containing a familial lung cancer gene that they believe dramatically increases a person’s risk of getting lung cancer, the No. 1 cancer in the United States.

Gloria Petersen, Ph.D., a cancer epidemiologist, and Mariza de Andrade, Ph.D., statistical geneticist, at Mayo Clinic in Rochester, participated in the research discovery. The researchers found strong evidence that lung cancer susceptibility is inherited with a genetic marker on chromosome 6. Markers on chromosomes 12, 14, and 20 also indicated possible linkage to lung cancer susceptibility, although the results were not as strong.

Identifying the location of the gene or genes is the critical first step. The next goal for these researchers is to more closely examine this region of chromosome 6 to locate the exact gene or genes that cause lung cancer susceptibility.

In addition to identifying the location, the researchers found that in carriers of the gene(s), any amount of smoking increases their risk of lung cancer. This finding suggests that smoking even a small amount can lead to cancer for individuals who have inherited susceptibility. The researchers found that in noncarriers, the more they smoked, the greater their risk of cancer.
Mayo Clinic and Arizona State University forge new ties in research and education

Mayo Clinic in Scottsdale and Arizona State University have joined forces on several new collaborations in medical research and education.

The new collaborations include the potential development of joint education programs involving law, business and nursing; setting up a joint seed-fund program to pursue cutting-edge research and technology; collaborative research in bioinformatics and bioengineering; and shared office space on each campus.

Some specific provisions of a potential agreement include:
■ Establishment of a seed fund to support the interdisciplinary and translational research projects that are collaborative efforts between ASU and Mayo Clinic scientists. ASU and Mayo will each contribute an equal amount of money to the fund.
■ Development of joint education programs.
■ Provisions for shared faculty and appointments for Mayo Clinic and ASU faculty at both institutions.
■ Shared graduate students and involvement of Mayo faculty in ASU graduate programs.
■ Establishment of Mayo Clinic-ASU collaborative partnership offices, one at Mayo and one at ASU.

Mayo Clinic and ASU have a history of collaborations. Last year the two institutions signed an agreement to advance specific areas of research, including neuro-imaging, receptor biology, microdevices and vaccine development.

“We are committed to working closely with our partners at ASU as we continue to increase our ongoing collaborations in education and research,” says Victor Trastek, M.D., chair, Board of Governors, Mayo Clinic in Scottsdale. “This will ultimately support the care that we provide to patients, and strengthen health care here in the Valley and throughout Arizona.”

Educational collaborations include potential combined degree programs involving Mayo Clinic and the ASU School of Law, the W.P. Carey School of Business, the ASU Graduate School and potential development of an ASU-Mayo joint nursing program. Shared graduate students will help provide new experiential learning opportunities, and shared faculty appointments will foster interdisciplinary research and educational opportunities.

The joint seed fund will be used for teams of ASU and Mayo Clinic researchers to explore and test the feasibility of new medical areas or technologies before moving on to a larger scale research program.

As a result of agreements in place, Keith Kelly, M.D., Mayo’s co-director of the ASU-Mayo Partnership for Collaborative Research, has been appointed to a faculty position at ASU and Kathy Matt, ASU’s director of clinical partnerships, will be appointed to an administrative post at Mayo Clinic.
Anthony Fauci, M.D., director of the National Institute of Allergy and Infectious Diseases of the National Institutes of Health and one of the early pioneers in AIDS research, delivered the commencement address for the Mayo Clinic College of Medicine graduating classes on May 22 in Rochester.

“These graduates have worked so hard to attain the skill and knowledge required to practice medicine and research in the 21st century,” said Anthony Windebank, M.D., dean of Mayo Medical School. “We are entering a new era of medical practice and research. These graduates will lead us through the revolution in medical care that will take place in the next 25 years. Most importantly, they will be compassionate physicians whose patients come first. This pledge is reflected in the new version of the Hippocratic Oath that the class wrote for the commencement exercises.”

Forty-four students received medical doctor degrees during the afternoon ceremony. Fifteen students received master’s degrees and 19 students received doctorate degrees in biomedical research. Of the
doctoral graduates, Mayo Graduate School and Mayo Medical School jointly conferred seven students with M.D./Ph.D. degrees. These students completed eight years of training as physicians and biomedical research scientists.

“Recent and significant advances in biomedical research have already impacted diagnosis and treatment of certain types of human disease,” said Diane Jelinek, Ph.D., dean of Mayo Graduate School. “Mayo Graduate School PhD. and M.D./Ph.D. graduates are emerging from our program as uniquely trained and highly skilled basic and clinical investigators who will play a key role in continuing scientific discovery as well as the translation of basic biomedical discoveries into improved patient care.”

Jonathan Baines, M.D., Ph.D., received a special recognition at the Mayo Clinic College of Medicine commencement ceremonies. Dr. Baines, of Native American descent, was ceremoniously “blanketed” by his older brother, David, to honor his achievement of obtaining an M.D./Ph.D. David Baines, M.D. graduated from Mayo Medical School in 1982 and practices in St. Maires, Idaho, on a reservation. He also holds appointments on committees and boards at the Centers for Disease Control and Prevention, the Institute of Medicine, and the National Academy of Sciences.

The blanket ceremony is a traditional custom to acknowledge tribe members’ accomplishments and life milestones. Dr. Jonathan Baines was also presented with an eagle feather, the Native American symbol of spiritual, emotional and physical strength. It is one of the highest honors given to warriors for special accomplishments.

American Indian/Alaska Natives comprise less than 1 percent of physicians in the United States, and even fewer obtain M.D./Ph.D.s.

“Achieving diversity among our physicians and medical scientists ensures that all people are served by medicine – in patient care as well as medical research,” said Anthony Windebank, M.D., dean, Mayo Medical School, Mayo Clinic College of Medicine. “Jon Baines has succeeded in the face of tremendous odds and we applaud him for his academic and cultural achievements. By recognizing this example of family and diversity we recognize their importance to all.”

Dr. Baines completed his Ph.D. thesis in Mayo Graduate School’s Tumor Biology program on “Novel Immunotherapeutic Approaches to Cervical Cancer.” He has started a preliminary residency in surgery at Mayo Clinic School of Graduate Medical Education, Mayo Clinic College of Medicine.
Alumni meetings

Receptions

American Academy of Otolaryngology – Head and Neck Surgery, Sept. 21, New York, N.Y.
American College of Gastroenterology, Oct. 1-6, Orlando, Fla.
American Society of Therapeutic Radiology and Oncology, Oct. 3-7, Atlanta, Ga.
American College of Surgeons, Oct. 10-14, New Orleans, La.
American College of Rheumatology, Oct. 16-21, San Antonio, Texas
Congress of Neurological Surgeons, Oct. 16-21, San Francisco, Calif.
American Academy of Maxillofacial Prosthetics, Oct. 24-27, Ottawa, Canada
MN Nephrology Collaborative Group (American Society of Nephrology), Oct. 27-Nov. 1, St. Louis, Mo.
American Association for the Study of Liver Diseases, Oct. 29-Nov. 2, Boston, Mass.
Association of American Medical Colleges, Nov. 5-10, Boston, Mass.
American Heart Association, Nov. 7-10, New Orleans, La.
American Society of Hematology, Dec. 4-7, San Diego, Calif.

Postgraduate meetings

For more information, please complete and return the tear-out card in this issue. Or you may call 507-284-2509 or 800-323-2688. Unless otherwise noted, meetings are held in Rochester.

Minimally Invasive Surgery Series 2004: Laparoscopic Gastric Bypass, Sept. 16-17, Scottsdale, Ariz.
7th Annual Mayo Clinic Internal Medicine Update, Oct. 7-10 or Oct. 21-24, Sedona, Ariz.
17th Annual Techniques in Advanced Laparoscopic and Gynecologic Surgery, Nov. 4-6, Scottsdale, Ariz.

Alumni news

1950s
Alexander Minno (Internal Medicine ’53) has been named the 2004 Honorary Alumnus of the University of Pittsburgh School of Nursing.
Ernesto Saldias (Physical Medicine and Rehabilitation ’52) donated his monography “Clinical examination of Muscle System on Poliomyelitis” to the National Museum of Medicine at the University of Chile.

1960s
James Baker (Pathology ’69) has spent a month in 2003 and 2004 in general pathology in Kijabe Hospital in Kenya.
James Etheridge (Pediatric and Adolescent Neurology ’65, Electroencephalography ’70) received an honorary Doctor of Science, Honoris Causa, from Eastern Virginia Medical School in May 2004. Dr. Etheridge is the former chair of the Department of Neurology and Dean/Provost of the Eastern Virginia Medical School.
P. Kahler Hench (Internal Medicine ‘63) received recognition of Master from the American College of Rheumatology at the organization’s meeting in 2003.

Roger Kempers (Obstetrics and Gynecology ‘61) recently completed his three-year term as president of the International Federation of Fertility Societies. He continues his work with the 55-country federation as chairman of the scientific committee.

1970s

Suzanne Ildstad (MMS ‘78) was appointed to the Institute of Medicine’s committees on spinal cord repair and cord blood stem cells.

John Manesis (Diagnostic Radiology ‘74) has authored a collection of poetry titled With All My Breath.

1980s

Susan Bailey (Pediatric Adolescent Medicine ‘84, Pediatric Allergy ‘86, Allergy ‘88) was elected to the American Medical Association’s Council on Medical Education for a four-year term.

Lael-Anson Best (Thoracic Surgery ‘88) received a fellowship from the Royal College of Surgeons of England.

Shigenobu Kanba (Psychiatry ‘87) was appointed as chairman of the Department of Neuropsychiatry at the Kyushu University Medical School in Japan.

Denis Schexnayder (Internal Medicine ‘83) was promoted to directorship of the hospitalist program at Memorial Hospital in Gulfport, Miss.

1990s

Javier Torres (Surgery-Preliminary ‘99) completed a cardio thoracic anesthesia fellowship at Washington University in St. Louis.

2000s

Maher Abbas (General Surgery ‘02) received the John Winkley Teaching Excellence Award from Kaiser Foundation Hospital.

Staff news

Amado Báez was recognized by the American Medical Association’s Resident and Fellow Section and received the 2004 Paul Ambrose Award for Leadership Among Resident Physicians.

Lawrence Burgart was elected president of the Rodger C. Haggitt Gastrointestinal Pathology Society.

Stephen Carmichael was the keynote speaker at the meeting of the Anatomical Society of Southern Africa in Durban.

J. Aidan Carney gave the keynote Maude Abbott lecture at the annual meeting of the United States and Canadian Academy of Pathology.

James Cerhan was asked to become a member of the Epidemiology of Cancer Study Section, Center for Scientific Review.

Christopher Chute is chair-elect of the U.S. delegation to the ISO (International Standards Organization) Technical Committee on Health Informatics.

William Cooney was guest lecturer at the Detroit Academy of Orthopaedic Surgeons, and appeared as the 14th Annual Visiting Professor for the Duke Hand Club and Duke University, Division of Orthopedic Surgery.

Morie Gertz was elected to a three-year term as treasurer of the International Society of Amyloidosis at the International Symposium on Amyloid and Amyloidosis.

Hossein Gharib was honored as a Master of the American College of Endocrinology at the College Convocation during the 13th annual meeting and clinical congress of the American Association of Clinical Endocrinologists.

Amit Ghosh was invited to be a tutor at the 2004 Oxford Workshop “How to Practice Evidence-Based Medicine,” organized by the National Health Service Research and Development Center for Evidence-Based Medicine, University of Oxford, United Kingdom.

Jonathan Gladstone is the 2004 recipient of the Jacques Meloche Award, presented annually by the Canadian Headache Society.

Andrew Good was elected chair of the Minnesota Section of the American College of Obstetrics and Gynecology.

Francis Haddy is peer review administrator for NASA and received the Luther College Distinguished Service Award in 2004.

Jennifer Hand has been appointed to the Test Committee of the American Board of Dermatology.

Jeanne Huddleston was elected president of the Society of Hospital Medicine.

Joseph Hung received the American Pharmacists Association’s Academy of Pharmacy Practice and Management Merit Award.

Bernard King was inducted as a Fellow in the American College of Radiology.

Ruud Krom was awarded the royal distinction “Commander in the Order of the Dutch Lion” by Queen Beatrix of the Netherlands at an award presentation during the queen’s birthday celebration.

Robert Kyle was elected to a three-year term as president of the International Society of Amyloidosis at the International Symposium on Amyloid and Amyloidosis.
Ricardo Lloyd was elected president of the United States and Canadian Academy of Pathology. Deborah Lightner was selected as a 2004-2005 fellow for the Executive Leadership in Academic Medicine, Program for Women.

Scott Litin served as Scientific Program chair for the 2004 American College of Physicians (ACP) annual session.

Mark Litzow was elected to the position of chair-elect, Autologous Blood and Marrow Transplant Registry.

David McKean received the Mayo Graduate School’s 2004 Dean’s Recognition Award at the Mayo Graduate School and Mayo Medical School graduation luncheon.

Peter Murray was appointed to the Committee on Examinations for the American Board of Orthopedic Surgery, the American Board of Surgery and the American Board of Plastic Surgery Joint Committee on Hand Surgery.

Jeffrey Myers serves as chair of the United States and Canadian Academy of Pathology Education Committee.

K. Sreekumaran Nair received the distinguished investigator award from the American Society of Clinical Nutrition and delivered the E.V. McCollum lecture at the Annual Experimental Biology meeting.

Heidi Nelson was elected to membership of the American Surgical Association.

Mark Pagnano was elected to membership in the Knee Society.

Peter Pairolero was elected president of the Society of Thoracic Surgeons.

Michael Pietila won a prestigious Postdoctoral Travel Award from the American Society for Biochemistry and Molecular Biology for the most outstanding abstract.

Glenn Roberts received the Gardner Middlebrook Award at the annual meeting of the American Society for Microbiology.

Roy Rogers III, was awarded the Gold Triangle Award from the American Academy of Dermatology.

Vivek Roy received a Teacher of the Year award at the Mayo Clinic Jacksonville resident and fellow graduation.

Devon Rubin received a Teacher of the Year award at the Mayo Clinic Jacksonville resident and fellow graduation.

James Scolapio was selected chairman of the Continuing Medical Education committee by the American Gastroenterological Association.

Gary Sieck was elected chair of the Respiration Section of the American Physiological Society and to the Section Advisory Committee of the American Physiological Society.

Steven Sittig was appointed co-chair of the Subcommittee on Respiratory Therapists in the U.S. Uniformed Services and co-chair of the Disaster Preparedness Exploratory Group by the American Association for Respiratory Care.

Thomas Spelsberg was elected to the Governing Council of the American Society for Bone and Mineral Research.

Thoralf Sundt III was elected into membership of the American Surgical Association

Rakesh Suri was elected by the Thoracic Surgery Residents Association as a resident representative to the Joint Council for Thoracic Surgery Education.

Henry Tazelaar was elected president of the Pulmonary Pathology Society.

Eric Tangalos gave a keynote address at the Colorado Health Care Conference on Quality Health for the Future.

Zelalem Temesgen was appointed chair of the communications committee and member of the National Board of Directors of the American Academy of HIV Medicine.

Jon van Heerden was awarded the Oliver Cope Meritorious Achievement Award at the annual meeting of the American Association of Endocrine Surgeons.

Prathibha Varkey received the 2004 American Medical Association Foundation Excellence in Medicine Leadership award for her efforts in education and community service.

Pawan Vohra won a Postdoctoral Travel Award from the American Society for Biochemistry and Molecular Biology.

Michael Wallace was elected chairman of the American Gastroenterological Association Section on Imaging and Advanced Technologies.

Roger White received the 2004 Hans Dahll Award at the Emergency Cardiovascular Care Update 2004 Conference.

Bruce Wolfe was elected president of the American Society of Colon and Rectal Surgeons in May.

Paul Young received a Teacher of the Year award at the Mayo Clinic Jacksonville resident and fellow graduation.
Fellow, resident and student news


Michael Thompson received the 2004 Outstanding Research Award for the Internal Medicine Residency Training Program of the Mayo School of Graduate Medical Education.

Obituaries

1930s

Carl Morlock, 97, died June 17, 2004. Dr. Morlock received his medical degree from the University of Western Ontario. After completing his internship and residency training in medicine at Victoria Hospital in London, Ontario, he came to Mayo Clinic in 1934 for a fellowship in medicine. Dr. Morlock joined the Mayo Clinic staff in 1939. He served as head of a section of medicine from 1952 to 1967. He also was a professor of medicine at the Mayo Graduate School of Medicine. Dr. Morlock was a fellow in the American College of Physicians since 1940.

1940s

Ben Barnes, 89, died June 10, 2004. Dr. Barnes received his medical degree from the University of Pennsylvania Medical School in 1938. After his residency training in pathology at Episcopal Hospital in Philadelphia, he served in the Army Medical Corps as a flight surgeon. He completed his fellowship in internal medicine at Mayo Clinic in 1949. Dr. Barnes entered private practice in internal medicine in 1949 in Allentown, Pa. He served as chief of medicine at Sacred Heart Hospital and was founder of Hamilton Internist Associates. Dr. Barnes served as chief of staff of Muhlenberg Medical Center in 1961 and later as medical director. He retired in the 1980s.

Sherman Egan, 88, died Oct. 14, 2003. Dr. Egan received his medical degree from Northwestern University Medical School in 1939. He completed his residency in internal medicine at Mayo Clinic and then entered the U.S. Army in 1942. Dr. Egan served in the Army through 1945, eventually reaching the rank of captain. Dr. Egan entered private practice in South Bend, Ind., where he practiced internal medicine until his retirement in 1981.

James Foerster, 88, died Feb. 10, 2004. Dr. Foerster received his medical degree from Washington University in 1940 and did his residency training in diagnostic radiology at Mayo Clinic in 1944. He then served as a major in the U.S. Army Medical Corps during World War II. Dr. Foerster joined St. Mary’s Hospital in Wausau, Wis., in 1947. He formed Radiology Associates, which provided services to three hospitals. He also was one of the founders of the Wausau Medical Center, now known as the Marshfield Clinic-Wausau Center. Dr. Foerster served there from 1972 to 1985, when he retired.

1950s

John Fairbairn, 81, died June 29, 2004. Dr. Fairbairn received his medical degree from the University of Buffalo Medical School in 1945 and then served two years in the U.S. Air Force through 1947. Dr. Fairbairn completed his fellowship training in peripheral vascular disease at Mayo Clinic, eventually joining the Mayo Clinic staff in 1956. He specialized in the treatment of peripheral vascular disease and became known for his expertise in the disease, serving as editor of the textbook *Peripheral Vascular Disease*. Dr. Fairbairn retired in 1987.

Robert Flaherty, 80, died June 22, 2004. Dr. Flaherty received his medical degree from Marquette University in 1947 and completed a fellowship in radiology at Mayo Clinic in 1954. He served as a medical officer in the U.S. Air Force until 1959. He then settled in Fort Wayne, Ind., where he formed a private practice with two other physicians, CFB Radiology, Inc. Dr. Flaherty retired in 1989.

Grant Fletcher, 81, died March 24, 2004. Dr. Fletcher received his medical degree from Stanford University in 1946. He served in the U.S. Army Medical Corps, eventually reaching the rank of captain. After his discharge, he entered family medicine in Sonoma, Calif. Dr. Fletcher came to Mayo Clinic in 1952 for residency training in anesthesiology. In 1955, he practiced anesthesiology in Carmel, Calif. He joined the Stanford Medical School faculty in 1963 and served as an associate professor of anesthesiology. He was the founder of the Inhalation Therapy Program at Stanford University Medical Center. In 1972, he left Stanford to manage his family’s ranch in Sonoma, where they raised livestock and operated a vineyard.
John Kirklin, 86, died April 21, 2004. Dr. Kirklin received his medical degree from Harvard University Medical School in 1942. He completed an internship at the University of Pennsylvania Hospital in Philadelphia and then served as a fellow in surgery at Mayo Clinic. He joined the Mayo Clinic surgical staff in 1950. Dr. Kirklin was noted for his work, which revolutionized cardiovascular surgery through his development and refinement of the heart-lung machine. In the 1950s, he modified the Gibbon machine and performed the world’s first series of open-heart operations using a heart-lung machine. He, and his colleagues, improved the original pumping and oxygenator system to the point that utilization of the machine is part of the everyday practice of cardiac surgery. At Mayo Clinic, he was the first chair of the Department of Surgery and was noted for performing the first operations for a variety of congenital heart malformations, highlighted by his contribution to the surgical correction of Tetralogy of Fallot. In 1966, Dr. Kirklin joined the faculty of the University of Alabama Birmingham as chairman of the Department of Surgery and the Surgeon in Chief for University of Alabama Birmingham Hospital. He held those positions until 1982 and retired from surgery in 1989. He was noted for establishing UAB’s comprehensive training program for young heart surgeons. Dr. Kirklin authored more than 700 publications, He also authored the textbook Cardiac Surgery. He also served on multiple editorial boards and served as editor of The Journal of Thoracic and Cardiovascular Surgery. He received a number of awards during his career, including the American Heart Association Research Achievement Award (1976), the Rudolph Matas Award in Vascular Surgery, the 1972 Lister Medal awarded by the Royal College of Surgeons in England, the Rene Leriche Prize of the International Society of Surgery and the American Surgical Association Medallion for Scientific Achievement. Dr. Kirklin also received the Mayo Foundation Distinguished Alumnus Award in 1981. He was a member of more than 60 local, state, national and international associations and scientific societies, including the American Association for Thoracic Surgery, serving as president in 1978-79.

Wilbourn Shands, 80, died Sept. 30, 2003. Dr. Shands received his medical degree from Vanderbilt University School of Medicine in 1946. He then served as a lieutenant in the U.S. Army Air Corps and followed his service with a residency in general surgery at Mayo Clinic until 1952. Dr. Shands completed a fellowship at M.D. Anderson Cancer Clinic in Houston. He was called back into service with the Air Force and served in the Korean War. He was in private surgical practice for 24 years. He served on the faculty of the Mississippi Medical School and was among the original clinical faculty when the school opened. Following a stroke in 1978, Dr. Shands retired from surgery, but continued work, serving as a medical officer at the Veteran’s Affairs Regional Office.

Robert Williams, 82, died Dec. 26, 2003. Dr. Williams completed his residency training in pathology at Mayo Clinic in 1953. He joined Middletown Hospital in Middletown, Ohio, as director of laboratory. In 1960, Dr. Williams moved to California. During his career, he served as director of laboratory at hospitals in San Fernando, Oakland, San Luis Obisbo, and Bakersfield, Calif. He was director of laboratory at Mercy Hospital in Bakersfield when he retired in 1985.

John Welch, 82, died Feb. 4, 2004. Dr. Welch served in the U.S. Army from 1947 to 1949. He came to Mayo Clinic, completing a fellowship in general surgery in 1955. He then joined the staff as a consultant in surgery. Dr. Welch was a professor in the Mayo Medical School and was active in many of Mayo’s educational programs. He served as president of the Mayo Clinic Alumni Association and the Priestley Society. He retired in 1987.

Frederick Zimmer, 82, died April 27, 2004. Dr. Zimmer received his medical degree from University of Pennsylvania School of Medicine in 1945. After completing his internship and additional training at the University of Pennsylvania Hospital and the Veteran’s Administration Hospital in Roanoke, Va., he came to Mayo Clinic. Dr. Zimmer completed his residency in internal medicine in 1952. He joined the medical staff at Geisinger Medical Center in Danville, Pa., eventually founding the department of endocrinology. He worked at Geisinger Medical Center for 33 years, retiring in 1985.

George Engstrom, 77, died May 13, 2004. Dr. Engstrom began his career as a high school science teacher and coach in Webster, S.D. He received his master’s degree from South Dakota State University and went to work as a research chemist at Goodyear Tire & Rubber Co., in Akron, Ohio. He received his Ph.D. in biochemistry from the University of Wisconsin in Madison and did his postdoctoral fellowship training in gastroenterology at Mayo Clinic from 1963 to 1965. Following his time at Mayo Clinic, Dr. Engstrom began a 26-year career at...
the National Animal Disease Center, U.S. Department of Agriculture in Ames, Iowa. As a researcher there, he focused on the development of assays for mycotoxins in feedstuffs and later focused his work on the metabolism of vitamin D. He retired in 1992.

**Donald Krabill**, 72, died Jan. 22, 2004. Dr. Krabill received his medical degree from the University of Cincinnati. He completed his residency training in anesthesiology at Mayo Clinic in 1961. He served in the U.S. Army and later joined a private practice in Casper, Wyo., for two years. Dr. Krabill joined the Mayo Clinic staff and was an anesthesiologist there until his retirement in 1985.

**Douglas McGill**, 74, died Feb. 21, 2004. Dr. McGill received his medical degree from Tufts University School of Medicine in 1955. After serving two years as a doctor in the U.S. Army, he came to Mayo Clinic where he completed his residency in internal medicine in 1961. He joined the Mayo Clinic staff in the gastroenterology division. Dr. McGill was a professor in what became the Mayo Clinic College of Medicine and was chair of the Division of Gastroenterology and Hepatology & Internal Medicine from 1977 to 1982. He also was president of the American Gastroenterological Association from 1985 to 1987. He retired in 2002.

**John Michenfelder**, 73, died May 2, 2004. Dr. Michenfelder received his medical degree from St. Louis University in 1955. While completing his residency training in internal medicine, he was called to military duty for two years. Upon completion, he did three years of training in anesthesiology at Mayo Clinic. Dr. Michenfelder joined the Mayo Clinic staff in 1961. He chaired the Division of Anesthesiology at Saint Marys Hospital from 1972 to 1976. He served as editor-in-chief of the journal Anesthesiology from 1979 to 1985. The Anesthesia Foundation selected his book Anesthesia and the Brain as the best book of the year in 1990.

**1970s**

**William Cormier**, 53, died Nov. 3, 2003. Dr. Cormier received his medical degree from Northwestern University in 1975. After his residency training at Good Samaritan Hospital in Cincinnati he served a two-year oncology fellowship at Mayo Clinic in 1980. He returned to Cincinnati where he worked in private practice for 23 years. Dr. Cormier practiced at three Greater Cincinnati hospitals and served as president of the medical staff at Mercy Franciscan Hospital in Mount Airy, Ohio, in 1998 and 1999.

**The Rev. George Freemesser**, 70, died March 23, 2004. Dr. Freemesser received his medical degree from the University of Ottawa in 1960. After a yearlong medical internship at St. Mary’s Hospital in Rochester, N.Y., he entered the Basilian seminary in Pontiac, Mich. He later went on to the Basilian seminary in Toronto and was ordained in 1965. Dr. Freemesser completed his residency training in psychiatry at Mayo Clinic in 1971. Following his residency, he worked in community psychiatry at Baylor College in Houston until 1975. In 1975, Dr. Freemesser returned to the seminary in Toronto and started a private psychiatric practice at the Cardinal Flahiff Basilian Center.

**David Swanson**, 73, died July 18, 2004. Dr. Swanson received his medical degree from the University of Illinois School of Medicine in 1956. He did his residency training in psychiatry at the Illinois State Psychiatric Institute until 1962 and then entered private practice in Chicago from 1963 to 1970. He also was on the faculty of Loyola University Stritch School of Medicine. Dr. Swanson joined Mayo Clinic in 1970 as a professor of psychiatry. He served as head of the section of adult psychiatry from 1974 to 1978. Dr. Swanson served as vice chairman of the department of psychiatry and psychology from 1978 to 1985. He established and directed the clinic’s first chronic pain management program. He retired in 1993.

**1980s**

**Mark Wineinger**, 50, died June 19, 2004. Dr. Wineinger received his medical degree from the Indiana University School of Medicine in 1979. He served his internship at the Naval Regional Medical Center in Oakland, Calif., and later served two years as a flight surgeon with the U.S. Navy. Dr. Wineinger completed his residency training in physical medicine and rehabilitation at Mayo Clinic. He joined the Mayo Clinic staff in 1987. He later moved to the University of California Davis to pursue a research fellowship in the department of human physiology. He joined the UC Davis department of physical medicine and rehabilitation and eventually was named associate professor. Dr. Wineinger was project director at the Center for the Study of Neuromuscular Disease at UC Davis. He later served as director of the Rehabilitation Research and Training Center in Neuromuscular Diseases from 1994 to 1998 and continued as project director from 1998 to December 2003.
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