Spanning the spectrum
from laboratory to patient
Features

2 Spanning the spectrum from laboratory to patient – Medical Scientist Training Program gives students a broad perspective on medicine
Begun in 1986, the Mayo Clinic M.D.-Ph.D. program blends training in medical research and clinical practice in order to prepare students to translate scientific discoveries into applications that improve patient care. The program was recently recognized by the National Institutes of Health as one of the top M.D.-Ph.D. programs in the country.

6 The Mayo Clinic Life Sciences System: From Henry Plummer to Bioinformatics
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September is not that far away and we’re looking to it with great anticipation. The 2004 Mayo Clinic Alumni Association International CME Program on Sept. 9-11 at Adare Manor, Ireland, has an outstanding slate of courses.

The course schedule features a range of presentations. Mayo Clinic CEO and President Denis Cortese, M.D., will provide an overview of Mayo Clinic’s future. There also are a number of sessions focusing on medical specialties from Mayo Clinic’s top practitioners.

It’s a perfect time of year to enjoy Ireland as well. Many of the attendees will tour Ireland after the meeting. Optional tours are available during the meeting, but the rest of the group will travel on the “Best of the Emerald Isle” tour from Sept. 12-22.

Space remains for the CME program and tour. In this issue, you’ll find additional information and instructions on how to sign up. We hope you’ll join us on this unique trip that provides learning and a time for visiting and renewing friendships with colleagues.

The Mayo Clinic Alumni Association exists to serve you. If you have ideas, comments or suggestions, please contact me at mayoalumni@mayo.edu.

Michael J. Ebersold, M.D.
Neurosurgery ’76
Secretary-Treasurer
Mayo Clinic Alumni Association
Preparing the leaders of tomorrow

“The M.D.-Ph.D. program capitalizes on the strengths of Mayo’s research mission by providing specialized training to individuals who have the potential to directly link basic research and ultimate improvement of patient care,” says Diane Jelinek, Ph.D., dean of Mayo Graduate School. To earn their dual degrees, students first complete two years of medical school. In year three, they switch to full-time graduate studies. After finishing their Ph.D. degrees, students return to medical school for two years to complete the program.

The classes in the program are very small; only six students are admitted annually. The competition for admission is intense, with between 150 and 200 people applying each year. To be considered, individuals must not only present impressive academic credentials, they also must have substantial research experience.

“The kind of individuals we want are curious and interested in life, very inquisitive. They are not willing to accept the facts as they are. They always want to open new doors,” says Dr. Rodriguez. “So much of medicine is about the opposite. It’s about doing things the right way, or doing it one way because we’ve always done it that way. We want

For more information, please call 507-284-4356 or visit the Web site: www.mayo.edu/mgs/mstp.html
students who are willing to go against that grain. If you want to make a new discovery, you have to ask ‘Is it really the best way?’”

Attracting the best individuals is a key aim for the program.

“The M.D.-Ph.D. degree was created to develop the person who is going to be a bridge between basic scientists and clinicians. We want these students to be able to apply their basic science skills to try to solve major clinical problems,” says Dr. Rodriguez. “Graduates of this program go on to advance the cause of science.”

According to Anthony Windebank, M.D., dean of Mayo Medical School, the students will not only have an impact on the field of medicine individually, but their influence will affect the next generation of scientists and physicians. “M.D.-Ph.D. graduates often become faculty members at medical schools across the country. They will be a guiding force for our medical students and graduate students of the future.”

Providing a unique experience

One student who earned a spot in the program is Geoffrey Johnson, a native of Austin, Minn., and a graduate of Massachusetts Institute of Technology.
Technology. Johnson is a seventh-year student whose research thesis focused on discovering what initiates the process of rejection after organ transplantation. His personal aims and the program’s goals are a perfect fit. “I’m motivated by research that is oriented toward not only understanding basic fundamentals of science, but also addressing important questions for humanity and medical science,” he says.

When Johnson was considering M.D.-Ph.D. programs, Mayo’s was particularly attractive because it offered something many others did not: collaboration. “I applied to Mayo because there was less of a split between those working in research and those working in medicine,” he says. “The laboratories at many institutions are in such incredible competition with one another for grant funding that you don’t communicate with the laboratory across the hall, let alone communicate with somebody in a different field. Here, it’s a team effort. There’s much more collaboration between clinical labs and basic science labs.”

The collaborative atmosphere extends beyond inter-laboratory communications and into students’ individual experiences, according to Johnson. “The entire time I’ve been here, I’ve been

“One of my goals has been to take what I’ve learned in research and medicine and develop it into a service or product, something new and tangibly useful that could have an impact on a broad number of people in a very direct way.”

– Geoffrey Johnson

Geoffrey Johnson
treated as a future colleague by the vast majority of people I’ve worked with,” he says. “It’s part of the culture at Mayo Clinic. But, the program also is set up consciously in a way that allows the students – because there are so few of us and we aren’t a burden on the physicians or the scientists – to function as young scientists and as young doctors more so than is possible at other places.”

Now in the second phase of his medical school education, Johnson hasn’t decided what he’ll do after he completes his work at Mayo Clinic. But, he’s already realized part of his vision of affecting people through his research.

“One of my goals has been to take what I’ve learned in research and medicine and develop it into a service or product, something new and tangibly useful that could have an impact on a broad number of people in a very direct way,” he says. With several patents pending on applications from his research, Johnson is beginning to make the kind of impact his mentors and teachers at Mayo hope for when they admit a student to the program.

“Receiving national recognition

Mayo’s M.D.-Ph.D. program recently received a stamp of approval from the National Institutes of Health that will help ensure that it continues to recruit and train the best students. Designated as a Medical Scientist Training Program by the National Institute of General Medical Sciences, the prestigious recognition brings with it more than $1 million in support over the next five years.

“For Dr. Rodriguez, the new NIH recognition also emphasizes the critical significance of Mayo’s research and education shields. “This designation reinforces the importance that Mayo is placing on research by supporting the program,” he says. “Right now, so much is concentrated on clinical practice and the bottom line, with good reason. But, we need to stay focused on the fact that our big goal is to take care of patients by eliminating disease. This program is developing people who will help do that.”

– Tracy Reed Will

Mayo’s Medical Scientist Training Program by the numbers

41 The number of students currently enrolled in Mayo’s Medical Scientist Training Program.

4 The number of individuals admitted to the program last year.

115 The number of applicants to the program last year.

44 The number of graduates from Mayo’s M.D.-Ph.D. program since it began in 1986.

1 The size of the M.D.-Ph.D. program’s first graduating class.

5 The size of the program’s graduating class in 2003.

19 The number of states represented in the current students’ undergraduate alma mater, plus one from Puerto Rico.
“By combining genotype and phenotype information into one system, this unique resource will allow us to draw inferences regarding health and disease that were previously undetectable.”

Sherine Gabriel, M.D.
From Henry Plummer to Bioinformatics

From the researcher’s or clinician’s computer screen, it could be one of thousands of search engine pages on the Internet. But any similarity stops there.

For one, this page exists only on a highly secure password-protected location on Mayo Clinic’s internal computer system. For the moment, its use is limited to only a handful of researchers. For them, it is an aid in developing clinical studies or finding data for a current laboratory investigation. For the Mayo Clinic Life Sciences System, these are the first days of what is destined to become a unique state-of-the-art cross-referencing storehouse of knowledge.

To say it will house data from five existing Mayo clinical and patient databases only begins to represent its scope. Eventually the data sources will expand to include a bioinformatics resource – comprised of clinical notes, Mayo’s growing bank of genomics data, links to Mayo’s existing tissue and serum repositories, the surgical index, and pathology records. Potentially, it could include comparable information from Mayo’s Scottsdale and Jacksonville locations. One unified, cross-referencing system, it will allow accurate and immediate access to millions of records that could aid in discoveries and, in turn, enhance patient care. In essence, it takes the concept of systemized patient data instituted by the visionary Henry Plummer, M.D., and applies 21st century hardware and software, launching it to a new level of synergism.

For Mayo Clinic researchers, the value is obvious. For the first time they will be able to more easily and efficiently correlate Mayo Clinic’s collected data (in some cases, going back a century) that is relevant to their specific investigation or their preparations for a clinical trial. This type of biomedical informatics system is essential, given the billions of data sets that are generated by genomic scans. The unique advantage to Mayo Clinic researchers is that their genomics databases will be linked to other Mayo Clinic research and data repositories that have made the institution a unique center for patient- and population-based studies.

“By combining genotype and phenotype information into one system, this unique resource will allow us to draw inferences regarding health and disease that were previously undetectable,” says Sherine Gabriel, M.D., who provided oversight leadership for the project. “We believe that the resource we are building, together with IBM, will be of tremendous value for researchers and clinicians, alike.”

“It will bring the practice of medicine at Mayo to the molecular level,” says Christopher Chute, M.D., Dr. P.H., a principal developer of the system. Harnessing the informational power of computing, says Dr. Chute, will effectively “drag the lab bench to the bedside.”

For example, today a physician might ask, “Have we seen this condition before?” and query colleagues or check literature files. Tomorrow, that practitioner would be able to enter symptoms into the system’s online interface and quickly find matching cases, associated test results, treatment approaches and patient outcomes. The Doctors Mayo believed that medicine and science were advanced far more by teamwork than by individuals working alone. Following that logic, the Mayo Clinic Life Sciences System will allow the Mayo Clinic physicians of the 21st

Henry Plummer, M.D.
Mayo Clinic has always valued and safeguarded the confidentiality of patients and volunteers involved in its research. Mayo invests millions of dollars annually to ensure patient privacy, safely secure medical samples and data, and train all staff in confidentiality protections.

All patient-oriented research at Mayo Clinic is scrutinized by Mayo’s federally mandated Institutional Review Board to protect the rights of patients and volunteers. A documented informed consent process is employed to allow collection and use of medical samples and clinical data.

Once collected, data is protected by multiple levels of computer and physical security. Medical samples are stored in a highly secure area, under 24-hour video surveillance. Identities of participants are removed from the data and samples, unless essential for a specific research project. No identities are released in publication of any scientific findings. More than 95 percent of Mayo patients allow their records and samples to be used for research.

Patient confidentiality in research at Mayo Clinic

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has produced a resource that would not have been possible for either institution working alone.

Dr. Chute cautions that this is a nascent project that will grow considerably in its content and capability over the next five years and beyond. Future users will have the advantage of additional data sources and more complex search options.

“Medicine is a knowledge-driven discipline,” says Dr. Chute. “It’s been said that if you read 50 medical articles a day, every day, at the end of a year you’ll only be 800 years behind. Combine that with the growth curve in genomics, it’s clear that human beings cannot handle the data alone. Medical informatics allows us to leverage that knowledge.

“This is a baby step, what we’re doing right now. It’s estimated that our computing capacity increases by a factor of 10 every decade, so the potential down the road is tremendous,” says Dr. Chute.

The Mayo-IBM collaboration began in 2000 and is an ongoing relationship that will encompass more than the Mayo Clinic Life Sciences System. The original goal was to develop an information system that would allow Mayo Clinic investigators to quickly identify potential participants for clinical trials. That system has developed into a valuable resource for many kinds of research. It functions over a highly secure interface with all user access screened by an approved Mayo Institutional Review Board protocol, so patient privacy and confidentiality are ensured. All data is used with patient permission.

The first users are a small group of researchers who began to access the system early this year. From that early group, access to the resource will gradually grow over time as more data is added and processes are defined.

Dr. Chute says a major factor in Mayo Clinic’s advance in the 20th century was an intellectual concept – the organizational system Dr. Plummer applied to managing medicine and research. He adds that Mayo Clinic may now be starting to “ratchet up toward the next level, to digital medicine. And it’s symbolic, I think, that it’s happening almost exactly a century after Plummer initiated the unit medical record.”

– Bob Nellis
Research and education are essential to Mayo Clinic’s commitment of providing the best care to every patient, every day. These endeavors — patient care, biomedical research and education — are depicted in the three shields of the Mayo Clinic logo.

To highlight the importance of research and education at Mayo Clinic, a new name was created for Mayo’s scholarly activities. Mayo Clinic College of Medicine is the name Mayo Clinic is using to refer to its research and education programs. The name reflects the strength of Mayo’s academic programs, which are integral to providing the best patient care. The college is comprised of the research and education programs, including those of nursing and the five schools, at Mayo Clinic’s three sites.

Mayo Clinic College of Medicine is an integral part of Mayo Clinic, which shapes the future by:
- Educating tomorrow’s leaders in medicine and science.
- Conducting advanced research to improve the diagnosis, treatment and prevention of major diseases.
- Translating today’s discoveries into effective, compassionate care for each patient.

By establishing a single, unifying name for Mayo Clinic’s wide-ranging programs in biomedical research and education, Mayo expects to increase awareness of its extensive programs with key academic, philanthropic and legislative audiences, says Denis Cortese, M.D., president and chief executive officer of Mayo Clinic.

The name Mayo Clinic College of Medicine was selected to represent scholarly activities on Mayo’s three campuses — Jacksonville, Fla., Rochester, Minn., and Scottsdale, Ariz.

Mayo Clinic College of Medicine will provide greater recognition in national lists that rank academic medical centers and assist in the recruitment of leading students and faculty members. Philanthropic opportunities include providing gifts for schools, technology, programs, faculty positions and scholarships/fellowships. The name also highlights the national and global impact of Mayo’s scholarly activities.

Mayo Clinic College of Medicine is not a campus in the traditional sense. Rather, it is a new name that describes Mayo Clinic’s programs in biomedical research and education at Mayo Clinic’s three locations. References to Mayo Clinic College of Medicine can be seen in many key locations:
- Information for benefactors.
- Scholarly articles for academic audiences.
- Posters and displays at scientific conferences.
- Recruitment materials for students, trainees and faculty.
- Presentations to city, state and federal officials.
- Reports from government and private-sector organizations that fund biomedical research and education.

“Our programs in research and education are essential to the future of Mayo Clinic,” says Dr. Cortese. “They enable us to practice state-of-the-art medicine in service to our patients, add to the body of medical knowledge and pass on that information to future generations.”

– Matthew Dacy
Mayo Clinic College of Medicine fast facts

- Research and education have been central to Mayo Clinic’s mission since its earliest days. The first Mayo Clinic Building, which opened in 1914, combined facilities for research and education in close proximity to patient care. This model remains equally true today at Mayo Clinic locations in Arizona, Florida and Minnesota.

- The combined annual budget for biomedical research and education at Mayo Clinic College of Medicine is more than $450 million.

- In 2002, Mayo Clinic received more than $143 million in funding from the National Institutes of Health and other federal sources, placing Mayo in the top tier of academic medical centers in terms of federal funding.

- Mayo Clinic College of Medicine has one of the highest levels of per capita research funding in the country: more than $1 million per full-time researcher.

- Mayo Clinic College of Medicine has five of the nation’s leading biomedical and health career schools — Mayo Medical School, Mayo Graduate School, Mayo Graduate School of Medicine, Mayo School of Continuing Medical Education and Mayo School of Health Sciences — with programs on every campus. The schools are nationally recognized for excellence. Last year, for example, about 3,000 students applied for 42 positions at Mayo Medical School.

- Mayo Clinic provides graduate and undergraduate research and education experiences to about 1,000 nurses each year.

- More than 20,000 medical and research professionals — who live and work in all 50 states and more than 70 countries around the world — received their education from Mayo.

- Mayo Clinic College of Medicine is one of the top three educators of medical school faculty in the United States and Canada.

- The Mayo Clinic Medical Library is one of the largest of its kind in the world.

To learn more about Mayo Clinic College of Medicine, please visit the Web site at www.mayo.edu.
Decades before he developed a research career at Mayo Clinic, Thomas Spelsberg, Ph.D., was a young boy who liked to dabble in chemistry experiments at his home in Clarksburg, W.Va.

The young Spelsberg occasionally made explosives and tested them in the back yard. One such device was set to detonate in the doghouse. It faltered momentarily and then blew the doghouse sky high, rattling homes and breaking windows of some nearby houses. He quietly hid in the basement, but as the police and his father investigated, they soon found him and the chemistry set was locked away for awhile.

“They just followed the wires of my train transformer from the explosion to the window and into the basement where I was,” says Dr. Spelsberg, who has spent 30 years as a researcher at Mayo Clinic and serves as the director of the Genomics Education Program at Mayo Clinic.

Although admonished, his interest in chemistry wasn’t dampened.

Curiosity continues to crackle today in Dr. Spelsberg’s approach to research. “I’ve always been curious how things work and was lucky to have matched it to my interest in science,” says Dr. Spelsberg.

An interest in science was prompted by Dr. Spelsberg’s father, a physician who was born in Germany. In high school, the young Spelsberg purchased his first telescope, spending hours at night scanning the sky. And even after the setback with the chemistry set, Dr. Spelsberg’s father encouraged his son’s interest in discovery.

After high school, Dr. Spelsberg attended West Virginia University in Morgantown on a track scholarship. He specialized in middle distance races, but most of his focus was on the sciences, including biochemistry. He landed a summer job in a laboratory of a geneticist, who needed someone with experience in biochemistry.
“I fell in love with it,” says Dr. Spelsberg. “The work turned into a paper that was published in *Nature.*” He landed a predoctoral National Science Foundation fellowship, while earning his Ph.D., in developmental biology and genetics at West Virginia. Dr. Spelsberg completed his postdoctoral fellowship in biochemistry at the University of Texas M.D. Anderson Hospital and Tumor Institute in Houston. He was promoted to the staff in 1969. He then moved to Vanderbilt Medical Center in Nashville, Tenn., to join Bert O’Malley, M.D., in the Center for Reproductive Biology. There he won an American Genetics Foundation fellowship.

After three years, he became interested in a position at Mayo Clinic. Dr. Spelsberg was familiar with Mayo Clinic, remembering his father often sent patients to “the Mayo brothers” when he was practicing in West Virginia. Dr. Spelsberg visited Rochester and said he realized that it was the right place for him to be. He came in 1973 when Mayo Clinic was hiring a large number of researchers for the newly opened Mayo Medical School and the Cancer Center.

**Finding a place**

Dr. Spelsberg’s career at Mayo Clinic has been spent studying the biochemistry and molecular biology of steroid hormones, chemical carcinogens and growth factors in reproductive and skeletal tissues. He and his laboratory colleagues have had 30 years of continuous National Institutes of Health funding. He holds the titles of Mayo Distinguished Investigator and the Mr. Eisenberg Professorship. The latter he cherishes as it is the professorship sponsored by a generous Mayo donor,

“I think that’s the ultimate in peer recognition. It’s almost unheard of for a basic scientist to be endorsed to lead a group that is mainly comprised of clinicians.”

— Roger Nelson, M.D.
George M. Eisenberg, with whom Dr. Spelsberg became close friends. Dr. Spelsberg has served on the Board of The George M. Eisenberg Foundation for Charities in Chicago for the past 13 years.

In the late 1980s, he teamed up with B. Lawrence Riggs, M.D., a Mayo Clinic endocrinologist, to discover that bone cells were direct targets for steroid hormones. This discovery opened up a new field in osteoporosis and skeletal diseases and ultimately even research into calcification of vessels and valves in cardiology. He continues the bone work with Sundeep Khosla, M.D., also a Mayo endocrinologist, and the cardiovascular work with Nalini Rajamannan, M.D., a former Mayo fellow in cardiology, now at Northwestern University Medical Center.

Dr. Spelsberg and his laboratory colleague, Malayannan Subramaniam, Ph.D., discovered the gene, TIEG, a tumor suppressor gene, which Mayo has patented. Dr. Spelsberg, James Ingle, M.D., a Mayo Clinic oncologist, and fellows Monica Reinholz, Ph.D., and Dr. Subramaniam found it to be an excellent marker for predicting breast cancer metastasis and patient outcome. It is one of 10 U.S. patents Dr. Spelsberg and his laboratory have helped Mayo Clinic attain. Many companies have licensed several of these patents. Dr. Spelsberg and his colleagues and fellows have authored over 280 publications and have received numerous awards for their research on the actions of estrogens and TGF-Beta on genes in bone cells and breast cancer cells and in cardiac valve calcification.

His work as a researcher continues to focus on the molecular actions of steroid hormones and growth factors on gene activities in skeletal cells, breast cancer, and more recently in cardiovascular disease. He collaborates with Mayo clinical investigators in all of these areas. During his tenure at Mayo Clinic, Dr. Spelsberg has served in a number of leadership positions. “Those jobs do take you away from the lab, but I think they help refresh you and give you the opportunity to help your colleagues and Mayo,” says Dr. Spelsberg.

For 10 years, in the 1980s to 1990s, Dr. Spelsberg served as director for the Center of Reproductive Biology at Mayo. He also has served as head of the Section of Biochemistry and chaired the Department of Biochemistry and Molecular Biology. In 1987, he was elected secretary of the Mayo Staff Officers and Councilors. In 1994, he was elected president of the Mayo Clinic Staff, becoming the first and only Ph.D. to serve as president of the staff.

“I think that’s the ultimate in peer recognition,” says Roger Nelson, M.D., a friend and colleague and dean of the Mayo Clinic School of Graduate Medical Education. “It’s almost unheard of for a basic scientist to be endorsed to lead a group that is mainly comprised of clinicians.”

Dr. Spelsberg has been an educator in the Mayo Medical School and Mayo Graduate School for many years, receiving several Mayo teacher of the year honors. He has recently been elected as a Councilor by the international membership of the American Society for Bone and Mineral Research.

The promise of the genome

Dr. Spelsberg says the promise of discovery in medical genomics keeps him excited and focused on what’s ahead. “I could begin to think about retirement, but in reality, it’s just too exciting right now,” he says. “The excitement of discovery and the breakthroughs really keep me going.”

Dr. Spelsberg is the chair of the Genomics Education Steering Committee and director of the Genomics Education Program. He and his steering committee of scientists, clinicians, and computer experts are working on educating the staff and allied health personnel at Mayo to promote and help everyone understand and utilize these new breakthroughs in medicine. “One of our strategies is to teach the teachers. The goal here is to educate a select group of educator-clinicians so they can, in turn, educate all the staff in their divisions and departments at Mayo, its health system, and group practices,” he says. “We are also developing a major Genomics Education Web site and sponsoring conferences and symposia.”

Dr. Nelson says Dr. Spelsberg is the “ultimate example of collegial teamwork at Mayo Clinic.”

Dr. Nelson said he was in charge of the first-year lectures in endocrinology at the Mayo Medical School in the 1970s. Dr. Spelsberg volunteered to lecture and was well received for his work. Yet, Dr. Nelson notes, this was at a time when Dr. Spelsberg was just getting his research career going at Mayo Clinic. “This was on his own time and he insisted on doing it.”
The teamwork that has led to discoveries at Mayo Clinic is possible, because people interact with each other on a regular basis, says Dr. Spelsberg. The attitude that encourages teamwork at Mayo Clinic will help the institution as it continues to work with the University of Minnesota through the Minnesota Partnership for Biotechnology and Medical Genomics, a state-sponsored partnership aimed at leveraging the two institutions’ strengths.

History should help this partnership. “In the ’70s, the basic sciences here were part of the university. They were great to us and we to them, and everyone flourished,” says Dr. Spelsberg. “I think the collaboration with the University of Minnesota is going to reap rewards for everyone involved,” says Dr. Spelsberg. “Efforts in these areas take lots of money and a large number of experts and equipment. By bringing Mayo and the university to work together, we have two giants who are capable of great things. Separately, we aren’t likely to get as far.”

At home

Dr. Spelsberg’s office in the Guggenheim Building in Rochester is full of photographs, the fruits of his interest in photography and astronomy and his home state of West Virginia. But just as many photographs include his family, his wife, Liza, whom he met in college, and their three children: a daughter, Sarah Clark (a professional musician), who lives in Telluride, Colo.; a son, Thomas Spelsberg, a business systems analyst manager, and his wife Katie Schultz (daughter of Henry Schultz, M.D.), who live in Madison, Wis.; and the youngest, Nancy (an engineer) and her husband, Charlie Wills (a former University of Wisconsin basketball player), who also live in Madison. All three children graduated from the University of Wisconsin-Madison. Thomas and Nancy have, or are working on, their MBAs, and Sarah will be pursuing a physician’s assistant career this fall.

Family has always maintained his attention even during the busiest times of his career. He’s coached many athletic teams, including softball, basketball and soccer teams for his children “I didn’t know a lick about soccer,” says Dr. Spelsberg.

“His and Liza’s house has always been a place for kids to congregate,” says Dr. Nelson. “Tom’s a bit like the Pied Piper with the kids. He always has made time for his kids and everyone else’s.”

“There are times you worry about how you’re going to accomplish it all, but once you miss the opportunities to spend time with your children, you don’t get it back,” says Dr. Spelsberg. “And when I look back now that they’re grown and out of the house, I’m so glad I did make the time.”

“If you ever need cheering up, go to lunch with Tom. His humor and positive attitude are contagious.”

— Kerry Olsen, M.D.

The Spelsbergs gathered over Christmas in 2003. Seated, left to right, are Liza, daughter Sarah Clark, daughter Nancy Wills. Standing, left to right, Dr. Spelsberg, daughter-in-law Katie Spelsberg, and son Thomas. Not pictured are Charlie Wills, husband of Nancy, and Chris Clark, husband of Sarah.
Always learning

Dr. Spelsberg’s inquisitiveness continues today. He regularly lectures both professionally and in the general public about astronomy, genomics and ancient civilizations.

He plays the piano and is learning to play a hammered dulcimer, which he recently received as a Christmas gift.

An interest in astronomy that started in his youth, remains strong. Dr. Spelsberg has less time to study the stars, and he’s even sold his telescope, but he continues to lecture about the topic.

Kerry Olsen, M.D., a colleague of Dr. Spelsberg’s, says, “Tom is a teacher extraordinaire who can make a journey across the galaxies and into the genome both highly relevant and fun.”

“The excitement of discovery really keeps me going,” says Dr. Spelsberg. “And just the thought of what research investigators are doing here at Mayo, and will be doing here in the future, is as exciting as ever.”

Dr. Spelsberg is among the leaders who are helping guide Mayo Clinic into the research involving the human genome. His expertise and enthusiasm are well-suited for this new and growing field that changes almost daily with discoveries that can eventually help clinicians provide better patient care.

“He has unbounded enthusiasm and passion for his research, for science, and he has a deep commitment to Mayo,” says Dr. Olsen. “If you ever need cheering up, go to lunch with Tom. His humor and positive attitude are contagious.”

It was at breakfast where Dr. Spelsberg worked his magic in 1983. Dr. Spelsberg’s excitement about Mayo Clinic proved more jolting than a morning cup of coffee when Eric Wieben, Ph.D., now director of the Mayo Clinic Genomics Research Center, first met Dr. Spelsberg during an interview at Mayo Clinic.

“He was actually one of the first people I met at Mayo and one of the reasons I came here,” says Dr. Wieben. “We met for breakfast on the first day of my interview trip in the Kahler coffee shop. He had a full breakfast and I had something minimal because I was nervous about my day and this meeting with a senior staff person in the department. I didn’t have to worry. Tom talked nonstop for the entire time, brimming over with enthusiasm about Mayo, his colleagues and his work. That has never changed and it’s one of Tom’s great strengths – he has genuine and infectious enthusiasm for his science and for Mayo.”

The young inquisitive boy who blew up the doghouse has been known for a practical joke or two.

“Of course, Tom used to be more fun in the old days,” says Dr. Wieben. “It wasn’t unusual for him to try to liven up the floor by booby-trapping somebody’s desk or playing other practical jokes. He still likes to joke, but he doesn’t have the time to develop the same quality of trouble that he used to be known for.”

– Michael Dougherty
Favorable financial year in 2003 positions Mayo Clinic to meet future challenges

Despite a difficult first half of the year due to the economy and world events, Mayo Clinic reported an improved financial performance for 2003. However, Mayo officials caution that future operating performance will be under increasing pressure due to challenges in the health care market.

For fiscal year 2003, Mayo Clinic sites in Minnesota, Wisconsin, Iowa, Arizona and Florida achieved $132 million in Income from Current Activities (ICA), the best measure of Mayo’s overall financial performance, on total revenues of $4.8 billion.

While ICA for 2003 improved over the $61.3 million posted for fiscal year 2002, it still represents a slim margin of 2.7 percent.

“To continue our mission of advancing medicine, we must have adequate reserves to prepare for several significant financial realities that lie ahead — aging baby boomers approaching retirement, high societal health care costs, significant employee pension payments, and funding for research and education,” says Robert Smoldt, Mayo Clinic’s chief administrative officer.

“Superior patient care is intertwined with strong programs in medical education and research,” adds Denis Cortese, M.D., president and chief executive officer of Mayo Clinic. “A margin of greater than 2.7 percent will be required to support programs in education and research. This year’s results put us on a solid path for the future.”

Mayo Clinic’s 2003 was a year marked by growth in patient demand, externally funded research and philanthropy. This is a summary of the 2003 financial performance for Mayo Clinic in Minnesota, Wisconsin, Iowa, Arizona and Florida. The figures include all entities unless otherwise noted.

- In 2003, Income from Current Activities (ICA), the best measure of Mayo’s financial performance, was $132 million, a margin of 2.7 percent.
- Mayo Clinic employed nearly 47,000 people at all its locations. Mayo Clinic in Rochester has added at least 600 new employees each year since the year 2000.
- Outpatient visits increased from 2,197,792 in 2002 to 2,253,513 in 2003.
- Income from patient care increased from $125 million in 2002 to $186 million in 2003.
- Funding for research increased from $324 million in 2002 to $351 million in 2003 – $218 million of which came from government and industry, $133 million from Mayo Clinic funds and benefactor gifts.
- Funding for education totaled $154 million – $116 million of which came from Mayo Clinic funds and benefactor gifts.

- Gifts from benefactors totaled $136 million, up from $121 million in 2002.
- The financial markets made significant gains in 2003. Mayo Clinic’s investments increased in value by $255 million (net of $65 million of investment earnings allocated to support operations), compared with a loss in value of $176 million in 2002. A portion of this investment return is used to fund education and research programs. It will also make a first step toward replenishing reserves that have been depleted during the last few years.
- Mayo Clinic reserves are at the lowest, constant-dollar level since 1950, as measured by an internal Mayo Clinic metric (reserve dollars per physician FTE). This number began to rebound slightly at the end of 2002, and this positive trend continued in 2003.
- Mayo Clinic’s overall bottom line, including significant investment gains, was $326 million.
- Mayo Clinic had $343 million in capital expenditures in 2003, down from $379 million in 2002.
- Mayo Clinic provided $53 million in charity care.
Partnerships are key to Mayo Clinic’s future

In the announcement of Mayo Clinic’s 2003 performance, Denis Cortese, M.D., president and chief executive officer of Mayo Clinic, also made note that partnerships will be key pieces to Mayo Clinic’s future success.

As Mayo Clinic looks to the future, partnerships with foundations, benefactors, government and industry are critical to accomplish mutual aims that can’t be funded by operations alone, says Dr. Cortese. A current example is the Minnesota Partnership for Biotechnology and Medical Genomics, Mayo Clinic in Rochester’s biotechnology partnership with the University of Minnesota and the state of Minnesota. Two hundred and fifty scientists at Mayo and the University are already collaborating to develop joint research proposals.

In Scottsdale, Mayo Clinic is collaborating with Translational Genomics Research Institute (TGen), a Phoenix-based biotech firm, and the city of Scottsdale to expand research activities, particularly in cancer research. Construction has begun soon on a new 110,000-square-foot biomedical research building on the Scottsdale campus of Mayo Clinic. The Mayo Clinic Collaborative Research Building will be financed by Hornaday Development, a local real estate development firm, and will include laboratory research space for Mayo scientists as well as a new TGen initiative called the Center for Translational Drug Development (TD2). There will also be shell space to accommodate future research collaborations.

“The biotechnology initiative will fuel new medical discoveries and will ensure that cutting edge medicine is available in Minnesota,” says Hugh Smith, M.D., chair, Board of Governors at Mayo Clinic in Rochester. Dr. Smith notes that the initiative will also support the development of new businesses and jobs in Minnesota. Two hundred and fifty scientists at Mayo and the University are already collaborating to develop joint research proposals.

Victor Trastek, M.D., chair, Board of Governors at Mayo Clinic in Scottsdale.

Plans for the new Mayo Clinic hospital in Jacksonville accelerated in 2003. The hospital will meet current patient demand and have the flexibility to support new technologies, along with the built-in capacity and infrastructure for the future. The project will be completely funded with proceeds from the sale of St. Luke’s Hospital and philanthropy.

“The new hospital will better integrate patient care and offer patients all services under one roof,” says George Bartley, M.D., chair, Board of Governors at Mayo Clinic in Jacksonville. “It will reduce the time staff spend traveling between our inpatient and outpatient facilities and better serve our education mission.”
Members elected to Mayo Clinic Board of Trustees

The Mayo Clinic Board of Trustees elected members at its quarterly meeting in Scottsdale, Ariz. The board also elected new executive committee members and officers at the meeting in February.

No new public trustees were elected for this calendar year. Robert Allen, John Dasburg and Patricia Mitchell were re-elected as public members of the Board of Trustees. Thomas Johnson, a public trustee, was elected an emeritus board member.

Mayo Clinic staff members elected to two-year terms as internal trustees and also to the board’s executive committee were: George Bartley, M.D.; Denis Cortese, M.D.; Jack Leventhal, M.D.; Robert Nesse, M.D.; Craig Smoldt; and Victor Trastek, M.D. The board also elected Jeffrey Korsmo and Shirley Weis to one-year terms as internal trustees.

Officers elected at the meeting were Bert Getz, chair; Denis Cortese, M.D., president; Hugh Smith, M.D., and Robert Smoldt, vice presidents; Jeffrey Bolton, chief financial officer; and Jon Oviatt, J.D., secretary.

Two physicians recognized with named professorships

The Mayo Clinic Board of Trustees has awarded two Mayo Clinic College of Medicine named professorships.

Ronald Hinder, M.D., Ph.D., a Mayo Clinic general surgeon, was awarded the Joe M. and Ruth Roberts Professorship in Surgery, and Gregory Poland, M.D., a Mayo Clinic internal medicine specialist and vaccinologist, was named the Mary Lowell Leary Professor in Medicine.

Dr. Hinder joined the staff of Mayo Clinic in Jacksonville, Fla., in 1996. Dr. Hinder is chair of the Department of Surgery and a professor of surgery at Mayo Clinic College of Medicine. His research interests include: laparoscopic antireflux surgery, long-term results of antireflux surgery, study of vagotomy associated with antireflux surgery, and Barrett’s esophagus and cell death.

Mr. and Mrs. Roberts founded this professorship in 1977. The Roberts’ professorship was designated for surgery in honor of their son, Stanley, a former surgical resident at Mayo Clinic College of Medicine.

Dr. Poland is a professor of medicine at Mayo Clinic College of Medicine. He is the director of Mayo Clinic’s Vaccine Research Group, which investigates vaccine response and novel vaccines that could affect public health. He also serves at Mayo Clinic as the director of the Immunization Clinic and the Program in Translational Immunovirology and Biodefense, and he is the associate chair for research for the Department of Medicine.

Named professorships at Mayo Clinic College of Medicine represent the highest academic distinction for a faculty member. Faculty are appointed to a professorship through nomination and endorsement of their peers and then confirmed by Mayo Clinic senior leadership. Appointed individuals are recognized for distinguished achievement in their specialty areas and service to the institution. Named professors hold the appointment for the duration of their active Mayo Clinic careers. Upon an incumbent’s retirement, a new professor is appointed. The professorship remains in perpetuity. Professorships are named in honor of the benefactors, who contribute $2 million. The gift funds, which may be unrestricted or focused on a specific medical area, are held in endowment. All income from the endowed professorships supports Mayo Clinic programs in medical education and research.
National Cancer Institute selects Mayo Clinic to coordinate clinical trials for cancer prevention

Mayo Clinic is one of six cancer research centers in the United States chosen by the National Cancer Institute to participate in a new initiative to test the effectiveness of experimental medications and nutritional compounds for prevention of cancer.

The initiative represents a new approach by NCI’s Division of Cancer Prevention to combat cancer. Each of the six cancer centers will design and lead clinical trials, coordinating a network of health care institutions to conduct the trials. The NCI has awarded more than $42 million in contracts to this six-member group. Mayo Clinic’s contract amounts to $9.3 million.

Paul Limburg, M.D., M.P.H., a gastroenterologist specializing in cancer prevention, is the principal investigator for the Mayo Clinic clinical trials network. Charles Loprinzi, M.D., a Mayo Clinic medical oncologist specializing in breast cancer research and treatment, is the co-principal investigator.

“We plan to conduct early phase clinical trials for up to seven types of cancer – colorectal, breast, esophageal, liver, blood system, urinary tract and lung – over the next three to five years,” says Dr. Limburg.

“Our goal will be to find out whether the new agents tested can interrupt the process of cancer by stopping abnormal cells from becoming malignant.”

According to Dr. Limburg, Mayo Clinic will coordinate the cancer prevention clinical trials at 27 health care institutions located throughout the United States and Canada. Approximately 100 patients will participate in each cancer prevention trial.

In addition to Mayo Clinic, NCI-designated cancer centers in Arizona, California, Illinois, Texas and Wisconsin are designing and coordinating cancer prevention trials.

“Each of these six institutions was selected based on its proven ability to conduct cancer prevention research,” says Peter Greenwald, M.D., director of NCI’s Division of Cancer Prevention.

Mayo Clinic College of Medicine celebrates residency match success

All 39 Mayo Medical School graduating seniors who participated in the 2004 National Residency Matching Program were successful in matching with a residency training program. Students opened letters containing their residency match results during a noontime reception on March 18 at Mayo Foundation House.

Thirty-eight percent of MMS graduating seniors will enter residency programs in Minnesota. Thirty-three percent will begin residency programs at Mayo Clinic. Primary care was chosen by 35 percent of the Mayo graduating class. Sixty percent of MMS seniors will enter residencies in various specialties. Among these, anesthesiology, surgery, emergency medicine and diagnostic radiology were chosen most often.

Mayo School for Graduate Medical Education also shared impressive results, reporting that 99.6 percent, or 260 of 261, of its residency training positions filled at all MSGME locations in Rochester, Jacksonville, and Scottsdale.

According to the National Residency Matching Program, more than 25,000 medical students participated in this year’s match and 92.9 percent successfully matched to residency training openings throughout the United States. This represents the highest number of match participants and residency openings in the program’s 52-year history.
The Mayo Clinic Alumni Association CME Program will present three days of courses Sept. 9-11 in Ireland addressing a variety of relevant topics in medical education, research and clinical practice.

The conference format balances topics of general and medical specialty interest in women's health, advances in cancer management, cardiovascular medicine, and surgical advances in cardiac surgery and neurosurgery. The program was developed in response to requests from previous course attendees.

Course headquarters are at Adare Manor, which is situated in the village of Adare, County Limerick, Ireland. The Mayo Foundation designates this educational activity for a maximum of 16.25 category 1 credits toward the AMA Physician’s Recognition Award.

There are optional group activities during the CME program, including tours of Limerick City and the Dingle Peninsula. The culmination of the CME program will be a medieval Irish banquet. CME registrants will have the unique opportunity to enjoy a magically classic Irish evening of feasting and Celtic music held in a medieval tower.

Following the CME program is a guided tour of Ireland for attendees who are interested. The full tour is from Sept. 8-22 and includes five-star accommodations in Cork City, Kilkenny City and Dublin.

Registration has closed, but if you have questions about this trip you may contact Linda Freeman of Concierge Services at 507-280-9066 or toll-free 877-280-9066 or FreemanL@rconnect.com.

Mayo Clinic researchers have discovered genetic mutations in heart patients that make them vulnerable to heart failure because they produce an abnormal protein that can’t decode stress messages from the body.

Mayo researchers are the first to realize that these proteins do not recognize the stress alarm. As a result, they can’t properly respond to cue adjustments within the heart that normally manage stress. These defects make the heart muscle susceptible to damage. The Mayo Clinic research team’s report appears in the journal *Nature Genetics*, v. 36; no. 4, April 2004.

Research team leader Andre Terzic, M.D., Ph.D., a specialist in cardiac biology, describes the work as groundbreaking because it reveals critical molecular mechanisms which may in turn point to possible new treatments for heart failure. “Very little is known about stress tolerance of the heart in health and disease,” says Dr. Terzic. “This discovery opens a new field of investigation in cardiovascular medicine as we uncover how and why the heart becomes vulnerable to stress.”

In addition to collaborating with other researchers from Mayo Clinic, Dr. Terzic’s team drew upon the expertise of the University of Minnesota Supercomputing Center to help model the shape of the protein under investigation.

The significance of the Mayo Clinic findings is threefold. It: 1) for the first time, views heart failure as a communication or signaling problem in the stress-management system of heart cells, 2) tests the idea in human
beings, and 3) offers convincing evidence that miscommunication of stress signals distresses the heart and plays a role in susceptibility to heart failure.

This work differs from most research into genetic causes of heart failure, which has identified defects in proteins involved in the mechanics of cardiac pumping, not in the communication pathways of stress-management systems.

The current investigation involves Mayo Clinic patients who suffer from idiopathic dilated cardiomyopathy, which leaves the heart highly vulnerable to failure under stress. The cause is unknown, but the usual heart disease risk factors — high blood pressure, elevated cholesterol, smoking, obesity — are not necessarily present. To the researchers, this suggested problems in this patient group that had been missed by the standard screening for heart disease: defects in the heart’s stress management system.

To get data from patients, Dr. Terzic’s team collaborated with Timothy Olson, M.D., who directs the Mayo Clinic Cardiovascular Genetics Laboratory. Dr. Olson is a leader in identifying hereditary factors that cause heart disease. With the permission of selected patients who suffered heart failure of unknown origin, he carried out extensive genetic scans of DNA obtained from blood samples. Results showed that some patients shared a defect in a gene that makes a stress-reaction-type protein.

Says Dr. Olson: “By introducing a conceptually new mechanism for heart failure, our work points out how molecular genetics can provide a very powerful tool to diagnose a defect in a specific protein in a human disease.”

Several genes contribute to the heart’s ability to adapt to stress. Mayo will be conducting further genomics and proteomics studies to help understand their role in heart failure and enable improved treatment.

After finding mutations, researchers reproduced the mutations in the laboratory using recombinant genetic techniques that allowed them to observe the molecular consequences of the mutations. They found that the mutations create an abnormality within vital structures of heart cells known as the ATP-sensitive potassium channel.

In healthy people, the potassium channel synchronizes the proper balance of potassium and calcium flow in the heart. Calcium is needed for the heart’s contractions. A proper level of potassium enables the cells to restore electrical balance following each heartbeat, and limits the entrance of calcium into the cells. Too much calcium damages cell structure and leads to heart failure.

The new finding shows ATP-sensitive potassium channels can work as defensive barriers, and if they are defective they cannot properly sense the body’s state of stress. When this happens, they fail to decode the metabolic signals that synchronize the flow of potassium and calcium.

### Mayo Clinic radio health segments hit the airwaves

Mayo Clinic is distributing daily 60-second health segments called “Medical Edge Radio from Mayo Clinic” to local radio stations throughout the United States. The new program features general health topics and people-focused stories covering new medical research as well as compelling health information.

“In an era of tight budgets and limited resources, radio station managers often need assistance in finding reliable and affordable health programming,” says Lee Aase, communications manager for media relations at Mayo Clinic in Rochester. “We anticipate that our programming will fill that gap.”

Each professionally produced segment is developed by a team of health and medical specialists. Thomas Shives, M.D, a Mayo Clinic orthopedic surgeon with more than a decade of experience producing health programming for local radio, serves as the program’s medical editor.

At launch on March 29, Medical Edge Radio was heard on at least 30 stations in 17 markets throughout the Midwest. Some participating cities include Waterloo and Cedar Rapids, Iowa; Bismarck and Fargo, N.D.; Aurora, Ill.; Hayward, Wis.; and Mankato, Minn.

Medical Edge Radio from Mayo Clinic is distributed on a market-exclusive basis. For more information or to listen to a Medical Edge Radio story, go to www.mayoclinic.org/news/radiohtml.
Mayo Clinic to construct 162,000-square-foot outpatient clinic building on Phoenix hospital campus

Construction has begun on a new 162,000-square-foot outpatient clinic building on the Mayo Clinic Hospital campus in northeast Phoenix. The hospital-based specialty clinic, funded primarily by Mayo Clinic benefactors, will increase Mayo’s treatment capacity and enhance patient convenience.

Officials held a groundbreaking ceremony April 13 on the Mayo Clinic Hospital campus. Construction is expected to be completed by end of 2005.

“We are very pleased to be moving forward with the construction of the hospital-based specialty clinic,” says Victor Trastek, M.D., chair, Board of Governors, Mayo Clinic in Scottsdale. “Thanks to the support of our generous benefactors, we look forward to a wonderful new building that supports the vision of our 40-year master plan and reinforces Mayo’s long-term commitment to serving patients here in the Valley.”

The new clinic will be connected to the northeast corner of Mayo Clinic Hospital. The building will include:

- Approximately 29,000 square feet of space to serve more patients in the Radiation Oncology department. Located one floor below grade, the space will initially house two linear accelerators, enabling Mayo to treat an additional 60-65 patients per day. The space is configured to ultimately house four linear accelerators.

- Approximately 133,000 square feet of shell space (three floors above grade) will eventually accommodate the transition of clinic-based surgical staff, including the transplant team, to the Phoenix campus. This new location, adjacent to Mayo Clinic Hospital, will create greater efficiencies and convenience for patients.

Construction of the clinic on the 210-acre Phoenix campus will have the added benefit of reducing space constraints on the Scottsdale campus where the long-term focus will be on biomedical research activities and the Mayo Clinic Cancer Center, as outlined in the 40-year Mayo Clinic master plan.

Alumni meetings

Receptions

American Society of Therapeutic Radiology and Oncology, Oct. 3-7, 2004, Atlanta, Ga.
American Academy of Maxillofacial Prosthetics, Oct. 24-27, 2004, Ottawa, Canada
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.

13th Biennial American Motility Society Meeting, Sept. 9-12, 2004
31st Mayo Clinic Pediatric Days, Sept. 9-10, 2004
Internal Medicine Review for Nurse Practitioners and Physician Assistants, Sept. 16-17, 2004
Gastroenterology and Hepatology Board Review, Sept. 19-23, 2004
Geriatric Update for the Primary Care Physician, Sept. 23, 2004
Cardiovascular Board Review and Recertification, Oct. 2-7, 2004
Genomics in Clinical Practice, Oct. 11-12, 2004
Psychiatry and Psychology Annual Fall Conference, Oct. 21-22, 2004
Mayo Clinic Nicotine Dependence Conference, Oct. 24-27, 2004
Mayo Clinic Rochester – Clinical Reviews, Oct. 25-27, 2004
Current Concepts in Primary Eye Care, Nov. 4, 2004
14th Annual Mayo Clinic Symposium on Sports Medicine, Nov. 6, 2004


Mayo Clinic Rochester – Clinical Reviews, Nov. 8-10, 2004
Mayo Clinic OB/GYN Clinical Reviews, Nov. 11-12, 2004

Alumni news

1950s

1960s
J. Aidan Carney (Pathology ’66) was awarded an honorary fellowship of the Faculty of Pathology of the Royal College of Physicians of Ireland.
John C. Duffy (Psychiatry ’65, Child and Adolescent Psychiatry ’67) has been selected to provide consultation services for Joint Commission International’s accreditation program. Dr. Duffy will provide medical strategic planning and assist hospitals in meeting their goal for accreditation by JCI.
Richard Frink (Internal Medicine ’63) published the book Inflammatory Atherosclerosis Characteristics of the Injurious Agent.
Leroy Lapp (Internal Medicine ’66) was awarded the Outstanding Clinician Award from the American Lung Association of West Virginia.

1970s
Danny Duke (Ophthalmology ’77) was recently been named an associate faculty member in the Center for Humanities and Ethics, at the University of Texas Medical School at San Antonio.
Douglas England (Pathology ’77) recently retired as clinical professor of pathology and medicine at the University of Wisconsin and staff pathologist at Meriter Hospital in Madison, Wis.
James Jordan (Psychiatry ’72) is director of the Hamm Clinic in St. Paul, Minn., and received the Teacher of the Year Award in 2003 from the Department of Psychiatry at the University of Minnesota.
Niall Patrick Madigan (Internal Medicine ’73, Cardiovascular Diseases ’75) was appointed medical director of education at Deaconess Billings Clinic, Billings, Mont.
Alkis Pierides (Nephrology ’78) is director of nephrology at Nicosia General Hospital. He also is senior editor of Nephrology in the Daily Practice of Medicine.
Sidney Williams (Internal Medicine ’74) recently passed the national test to be designated a Diplomate of the American Academy of Pain Management.

1980s
Steven Saliterman (Internal Medicine ’80) was elected chief of medicine at Methodist Hospital in Minneapolis and was appointed lecturer in BioMEMS at the University of Minnesota Department of Biomedical Engineering.
1970s
Selim Isbir (Cardiovascular Surgery ’98) has been named associate professor and was appointed chief of surgery of cardiovascular surgery at Marmara University Hospital in Istanbul.

Myung Ho Jeong (Cardiology ’95) received a certificate of Fellowship of European Society of Cardiology.

Darryl Kawalsky (Cardiovascular Diseases ’92) was recognized as a top cardiologist in D Magazine’s “Best Doctors in Dallas” issue. The magazine surveyed local physicians to select the best physicians among their peers.

Joseph Drazkowski spoke at the 15th Annual Arizona Geriatrics Society Symposium. He also presented Grand Rounds at Tucson Medical Center.

Tom Fitch received certification in Hospice and Palliative Medicine from the American Board of Hospice and Palliative Medicine.

Hossein Gharib was a Visiting Professor, Division of Endocrinology, Metabolism, and Molecular Medicine, Northwestern University Medical School in Chicago.

Raymond Gibbons served as chair of the program committee for the American Heart Association’s Scientific Sessions.

Jonathan Gladstone is the recipient of the National Headache Foundation/Seymour Diamond Clinical Fellowship in Headache Education and the American Headache Society/GlaxoSmithKline Clinical Headache Fellowship.

Thomas Habermann presented the results of a clinical study at the annual meeting of the American Society of Hematology (ASH).

David Hawkins was elected to a four-year term on the Executive Board of the American Auditory Society.

Joseph Hung received the American Pharmacists Association Academy of Pharmacy Practice and Management Merit Award for 2004.

E.E. Keller was a keynote speaker at the second International Selcuk University Faculty Congress in Afyon, Turkey.

Nicholas LaRusso received the Distinguished Achievement Award of the American Association for the Study of Liver Diseases for 2003.

Hassan Loufli was presented with the Distinguished Mayo Clinician Award at Mayo Clinic in Scottsdale.

Reza Malek was elected member of the Executive Committee of the International Society for Laser Surgery and Medicine at its recent meeting in Munich.

Greg Mayer received certification in Hospice and Palliative Medicine from the American Board of Hospice and Palliative Medicine.

James Muddiman received the American Chemical Society Division of Analytical Chemistry, Arthur F. Findeis Award for achievements by a young analytical scientist.

James Parish was appointed governor for the American College of Chest Physicians in Arizona.

Edith Perez received the North Florida Hispanic of the Year Award at the 2003 Hispanics Achieving Community Excellence ceremony at the University of North Florida University Center.

Karl Podratz was elected to a three-year term as a member of the Board of Regents of the American College of Surgeons.

Petra Polasek-Casey was selected by the Association of Professors of Gynecology and Obstetrics (APGO) as one of 20 scholars to participate in the APGO/Solvay Pharmaceuticals Educational Scholars Development Program.

Jorge Rakela was presented with the Distinguished Mayo Investigator Award at Mayo Clinic Scottsdale.

Izabela Riffe was appointed by the Board of the American Academy of Family Physicians to the Committee of the Scientific Program.

Franklin Sim was appointed Honorary Professor of Orthopedic Oncology at the Peking University People’s Hospital.

Joseph Sirven lectured at the 15th Annual Arizona Geriatrics Society meeting. He also presented Neurology Grand Rounds at the University of Arizona.

Joseph Sirven and Dean Wingerchuk edited the fall issue of Seminars in Neurology, Questions for the Consultant.
Jay Smith received the Kessler Procter & Gamble Excellence in Clinical Practice Award for 2004. William Stone was presented with the Distinguished Mayo Educator Award at Mayo Clinic in Scottsdale.

Fellow, resident and student news

Brian Palmer (MMS) was elected president of the American Medical Student Association.

Obituaries

1940s

James Lally, 85, died June 17, 2003. Dr. Lally received his medical degree from Northwestern University completed his residency training in general surgery at Mayo Clinic in 1949. He was a surgeon at Kansas City’s St. Mary’s Hospital where he worked until retirement in 1988. He served as president of the staff from 1979 to 1981. He also served as a teacher and lecturer at the former General Hospital and Truman Medical Center. After retirement, he wrote a health advice column in the Kansas City Star and also authored the book Over 50 Health Manual. Dr. Lally also invented and patented a number of surgical instruments. In retirement, he still was active in his cancer research work at his laboratory at the University of Missouri-Kansas City Medical School.

1950s

Wilson Greene, 80, died March 9, 2002. Dr. Greene received his medical degree from the Medical College of the State of South Carolina in 1945. He served in the U.S. Naval Reserves and did his residency training in internal medicine and physiology in New Jersey and South Carolina. Dr. Greene completed a fellowship in internal medicine at Mayo Clinic in 1953 and returned to his home state of South Carolina, forming a private practice with three other physicians, Internal Medical Associates PA. He retired in the late 1980s.

John Gross Sr., 83, died Feb. 11, 2004. Dr. Gross received his medical degree from Western Reserve University He completed a fellowship in internal medicine in 1950 at Mayo Clinic. Dr. Gross served as a medical officer in the U.S. Army for two years before returning to Mayo Clinic to join the staff in the division of gastroenterology. He was a professor of medicine in the Mayo Medical School and was a noted expert in diseases of the pancreas. He retired in 1986.

Paul Jarrett, 82, died July 16, 2003. Dr. Jarrett received his medical degree from University of Indiana School of Medicine in 1945 He completed a fellowship in neurology in 1950 at Mayo Clinic. Dr. Jarrett was chief of staff of the psychiatric department at Mercy Hospital in Miami and also served as president of the Florida State Psychiatric Association. He served as chairman of the State of Florida Alcoholic Rehabilitation Advisory Council. Dr. Jarrett was a clinical assistant professor of psychiatry at the University of Miami Medical School.

1960s

Edward Segal, 76, died Nov. 22, 2003. Dr. Segal received his medical degree in 1953 from the University of Minnesota and remained there for his residency in clinical pathology. Dr. Segal completed a fellowship in anatomic pathology at Mayo Clinic in 1959. He was a pathologist at Methodist Hospital in St. Louis Park, Minn., for 30 years. He also served as a clinical associate professor at the University of Minnesota in the Department of Laboratory Medicine and Pathology. Dr. Segal was a board member on the Minnesota Medical Alumni Association and served as its president in 1972. He also was a member of the board of trustees of the Minnesota Medical Foundation.

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Mayo Clinic Resource Central

Resources to help you stay connected with Mayo Clinic and Mayo Clinic Alumni Association

Mayo Clinic in Rochester
200 First Street SW
Rochester, MN 55905
507-284-2511

Mayo Clinic in Jacksonville
4500 San Pablo Road
Jacksonville, FL 32224
904-953-2000

Mayo Clinic in Scottsdale
13400 East Shea Boulevard
Scottsdale, AZ 85259
480-301-8000

For Mayo Clinic and health information on the Web:
www.mayo.edu
www.mayoclinic.org
www.mayoclinic.com

Alumni Center Information

Mayo Clinic Alumni Center
507-284-2317
Karen Skiba
Administrator
507-538-0162

E-mail: mayoalumni@mayo.edu

Alumni Relations Coordinators:
Betsey Smith
507-538-1164
Carol Demulling
507-538-1663

The Doctors Mayo Society
Mark Hintz
800-297-1185

Department of Development
800-297-1185

Physician Referral Information

Rochester  800-533-1564
Jacksonville  800-634-1417
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