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Mayo Clinic is studying the genetic influences that determine smallpox vaccine immunity as part of a National Institute of Allergy and Infectious Diseases (NIAID) award. The $11 million, five-year study involves analysis of genes in 1,000 individuals who have received the smallpox vaccine. The award is recognition of Mayo’s expertise and unique laboratory setting.

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Letter from the President

As we approach the 64th Mayo Clinic Alumni Association meeting in October and the completion of my term as president, I have been reflecting on what this has meant to me.

I have come to appreciate the essential role our association plays in the Mayo system. It provides an ongoing relationship between Mayo and our alumni, strengthening the bonds initially forged during our educational or residency and fellowship years. Through our board and annual meetings we are able to express alumni concerns in an effective way as witnessed by the Mayo responsiveness to our expressed need for expedited access for our patients to Mayo facilities.

The role of the association in developing relationships with our alumni, their patients and friends in the important work of the Development Office in Mayo’s future has become very clear and must continue to grow.

One of the real pleasures in office has been renewing old friendships and making new ones both in this country and abroad on our foreign trips. For those who have not been on a Mayo alumni foreign trip, I strongly urge you to consider participating. Not only are they extremely well organized and educational, they are fun too!

Our 64th annual meeting in Ponte Vedra Beach, Florida, will be an exciting and enjoyable affair in a great location, and I look forward to meeting many of you there.

Like all of us, our time has shaped us not just as competent professionals, but as caring physicians imbued with the core value of putting the patient first. I am very grateful for what Mayo has given me and I am privileged and honored to have had the opportunity to give something back and to have served as your president.

See you in Florida!

T. Paul O’Donovan
Cardiovascular Disease ’67
President
Mayo Clinic Alumni Association
Neutralizing the threat
Mayo Clinic’s Vaccine Research Group strives to improve health and make the world safer through biomedical research.

Gregory Poland, M.D., director of Mayo Clinic’s Vaccine Research Group, doesn’t mince words when discussing the weightiness of his team’s work.

“When I talk about these things to people, they fit into two groups: those who can imagine it and are, therefore, willing to prepare, and — the majority of people — who cannot imagine it and are unwilling to prepare,” he says.

“History has shown that the latter group is always sorry.”

Imagining a smallpox outbreak or an influenza pandemic is no stretch for Dr. Poland, a vaccinologist for 20 years. In the aftermath of September 2001 and subsequent anthrax attacks, he is convinced that the more successes the Vaccine Research Group can post, the better the chances of defusing the dangers of bioterrorism.

A significant step forward in that effort came last fall when the Vaccine Research Group was awarded a major National Institutes of Health (NIH) contract to study the smallpox vaccine. Their current work in smallpox and past achievements in anthrax, influenza and measles research have combined to make them one of the most influential teams of vaccine researchers in the world.

Determined to find answers
In October 2004, Mayo Clinic was awarded a federal contract to study genetic influences determining smallpox vaccine immunity. The contract from the National Institute of Allergy and Infectious Diseases (NIAID) for $11 million over five years involves studying genes in 1,000 individuals who have received the smallpox vaccine.

The program is investigating immune-response gene polymorphisms that affect an individual’s susceptibility to infection, as well as the individual’s response to vaccination. Researchers also are studying other cellular and immunologic responses to the vaccine.

“We’re measuring antibody, cytokine secretion and gene activation using microarray and genomewide SNP technology,” says Dr. Poland, the lead researcher on the project. “Nothing of this magnitude has ever been done at Mayo Clinic, in part because nobody has had this level of funding, and because we didn’t have the sophisticated technology that we have now.”

That technology is key to the way the project will be carried out. Researchers in Mayo’s Genotyping Shared Resource, part of the Advanced Genomics Technology Center, now have the capability to analyze thousands of genes at one time, thanks to a state-of-the-art, high throughput genotyping platform.

“There are only a handful of labs in the world that have this capability,” says Julie Cunningham, Ph.D., a co-investigator on the project and director of the Genotyping Shared Resource. “We can do in a fraction of the time what would have previously taken years. Genotyping can be extremely labor-intensive. We used to do the analyses one by one. This new technology allows us to do thousands at one time.”

The statistical analysis resources available at Mayo Clinic also will play a large role in finding the answers researchers are seeking. Microarray data will be collected for 600 of the 1,000 people in the study, resulting in quantification of more than 47,000 expression transcripts per person on each microarray. More than 100,000 genotypes per person also will be analyzed.

“The volume of information gathered will be significantly larger and more challenging than most research projects,” says Shane Pankratz, Ph.D., the project’s lead statistician from Mayo’s Division of Biostatistics. “For a project of this scale, we need to develop unique tools and novel approaches to answer the questions being posed. We will be breaking new ground.”
After the enrollment period is finished in approximately two years, Dr. Pankratz and a group of Mayo Clinic statisticians will go to work. He estimates it will take more than a year to analyze the data. But, the results are likely to be well worth the enormous efforts involved.

“If we can understand what controls immune response, it opens a new window into understanding the immune system and our ability to manipulate it,” says Dr. Poland. “The long-range implications are fantastic.”

**Dedicated to succeeding**

Terrorist attacks in recent years have dramatically heightened public awareness about the possibility of smallpox and anthrax being used as biological weapons. This increased awareness has made funding for biodefense projects, particularly vaccine research, much more readily available than it was prior to 2001.

Due, in part, to historically scarce funding, few academic medical centers have invested in the facilities and resources necessary to develop a successful vaccine research program the way Mayo Clinic has. Established in 1989, Mayo’s Vaccine Research Group develops and tests new, more effective vaccines; investigates genetic responses to vaccines; and works to improve immunization practices.

Since its inception, the group has grown to 30 people. Its researchers have consistently made significant contributions to the field, propelling them to the forefront of vaccines and biodefense. Their publication track record is one illustration of the group’s level of productivity. On average 20 to 30 papers are published annually.

Examples of past accomplishments include decoding the immunogenetic influence of human leukocyte antigen (HLA) genes on measles and rubella vaccine immune responses; a needle-length study that led to changes in vaccination practices and set new standards for vaccine administration in the United States; and a study of measles failure rates which led the American Academy of Pediatrics to adopt a younger age for the second dose of measles vaccine.

According to Dr. Poland, the group’s proven research expertise was a factor in the NIAID decision to award Mayo the smallpox vaccine contract.

“A major strength is our 13 years of experience in performing exactly these types of studies with other live viral vaccine models,” he says. “We knew we were well suited to do this work. We devoted hundreds of hours to the proposal preparation. That was preceded by more than a decade of work in this field.”

**Focused on critical research**

The Vaccine Research Group is collaborating with Mayo’s Proteomics Research Center on this study to expand understanding of immune responses to smallpox and vaccinia, and to define vaccine antigens that can protect against these agents. The information obtained will increase the understanding of how the current smallpox vaccine functions and guide the design of effective, second-generation smallpox vaccines.

“We have already identified one vaccinia peptide and we are in the process of producing a synthetic peptide vaccine in our peptide synthesis facility to this unique sequence,” says Daniel McCormick, Ph.D., Co-Director of the Mayo Proteomics Research Center. “I’m optimistic that we will find more candidate peptides to develop a

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“Our work has the potential to touch and improve the life of every single human being on the planet. There are not many opportunities in biomedical research to do that. We understand how important our work is and that drives us to do it with excellence.”

– Gregory Poland, M.D.
more comprehensive synthetic vaccine to smallpox. We've had significant success with measles peptides, identifying 13 different types. Now that the process for peptide identification is established, applying it to vaccinia virus should be straightforward.”

According to Dr. McCormick, the Proteomics Center’s work is unique. “No one else is working with results of peptide determination studies for the production of ‘synthetic vaccines’ the way we are,” he says. “Our studies put Mayo Clinic at the forefront of vaccine research and development for highly infectious (and often lethal) agents such as the smallpox virus.”

From Dr. Poland’s perspective, the results of the vaccinia peptide study could have far-reaching significance. “This basic science research is critical to devising a new type of smallpox vaccine that everyone could safely receive,” he says. “We are driven to succeed in this because as soon as we come up with a vaccine that works and is safe, smallpox becomes irrelevant as a weapon.”

Mission-driven group
Passion for their mission is the motivating force behind the Vaccine Research Group’s productivity and successes. The team includes M.D.s, Ph.D.s, research fellows, study coordinators and assistants, nurses and research technicians. All share the goal of advancing vaccine science for humanity’s benefit.

“Our is very much a mission-oriented group,” says Dr. Poland. “Our work has the potential to touch and improve the life of every single human being on the planet. There are not many opportunities in biomedical research to do that. We understand how important our work is and that drives us to do it with excellence.”

Dr. Poland feels his lab’s current work is particularly noteworthy, given current global events. “When you walk into the Siebens Building, you see a poster and video extolling the role that Mayo Clinic played in World War II,” he says. “In the war against terrorism, Mayo is again playing a vital role. The government is looking to us to help devise solutions in this fight. In our biomedical specialty role, we are playing a key part in defending America and improving health care around the world.”

– Tracy Reed Will
With the votes recorded and the gubernatorial signature on the bill, the Minnesota Legislature’s bonding bill of 2005 kick-started further activity for the Minnesota Partnership for Biotechnology and Medical Genomics.

Construction preparation began in downtown Rochester in June for the $21.7 million project that will add a three-story laboratory atop Mayo’s Stable Building. Currently, neither Mayo nor the University of Minnesota has space in existing labs for the needed genomics research that will be conducted in the new laboratory.

“This means we will have state-of-the-art facilities to help position Minnesota as a national leader in medical genomics,” said Hugh Smith, M.D., chair of the Mayo Clinic Rochester Board of Governors. “This addition will house more researchers and provide greater opportunity for our two institutions to join forces to seek new treatments and technologies to fight the diseases that most threaten the people of our state.”

The Minnesota Partnership for Biotechnology and Medical Genomics is a unique collaborative venture among Mayo Clinic, University of Minnesota and the State of Minnesota. The partnership seeks to position Minnesota as a world leader in biotechnology and medical genomics applications that will result in important new medical discoveries, thereby improving health care for patients and supporting the development of new business and jobs in Minnesota.

Construction of the addition is expected to be completed late in 2006. By adding the laboratory space atop an existing building on the Mayo Clinic Rochester campus, the partnership estimates it will save roughly half of the $40 million estimated to build a new building. The space will be owned by the University of Minnesota and maintained by Mayo Clinic.

Bonding money for the project was anticipated in 2004, but the Minnesota Legislature adjourned without coming to agreement on a bill to provide money for capital projects throughout the state, including the Minnesota Partnership for Biotechnology and Medical Genomics.

The project got a boost in January 2005 when Gov. Tim Pawlenty delivered his State of the State address in Rochester at Mayo’s Superior Drive Support Center, which houses Mayo Collaborative Services, Inc. (MCSI). The address was broadcast statewide.
“I want to be perfectly clear on this point: I won’t sign a bonding bill this year without this project (the partnership) in it,” said Gov. Pawlenty.

After the bill passed in April, Gov. Pawlenty came to Rochester for a ceremonial signing of the bill.

The partnership has asked the state for an investment of $70 million over the next five years for research ($33 million in the coming biennium). Gov. Pawlenty followed his vow to fund the lab space and earmarked $15 million in state research funding for the partnership with an announcement that Medica donated $5 million for the project, and that more private contributions are forthcoming.

During his statewide address, Gov. Pawlenty noted that it was just two years ago when he introduced the idea of the partnership, and that the strength of Mayo Clinic and the University of Minnesota coming together is an “awesome force in the world’s medical research marketplace, and it will bring great benefit to Minnesota.” He went on to say that Mayo and the University will partner on cutting-edge research, hailed Mayo as “one of Minnesota’s booster rockets” and described Rochester as an example of a “successful global competitor.”

The partnership previously had received some operational funding from the state, which allowed the partnership to launch joint pilot projects on heart disease, obesity, prostate cancer and Alzheimer’s disease. In less than six months, the partnership generated five research papers, a patent application, two federal grant applications and a
The research facility in Rochester is absolutely central to the success of the historic partnership between the University and Mayo Clinic."

— Gov. Tim Pawlenty

joint business office, and leveraged substantial philanthropic support. Additional support is being sought by Minnesota’s congressional delegation for the biomedical informatics aspect of the partnership.

“The research facility in Rochester is absolutely central to the success of the historic partnership between the University and Mayo Clinic,” Gov. Pawlenty said.

An independent consulting firm last year estimated that by 2015, the Mayo-University partnership would have an annual overall economic impact of $546 million on the Minnesota economy, creating more than 7,000 direct and spin-off jobs, and generating more than $30 million in annual government revenues.

“Having these two important research institutions in our state gives Minnesota a competitive advantage that we must capitalize on,” said Commissioner Matt Kramer of the Minnesota Department of Employment and Economic Development. “Through this investment, researchers in our state may be able to make the next breakthrough in the rapidly expanding field of biotechnology and genomics.”

The 2005 legislature approved $15 million in funding for the partnership this summer. A portion of that support will allow the partnership to organize better its ongoing efforts, including critical scientific infrastructure, recruitment and retention of top-level scientists, product development as a consequence of discovery, and collabo-

Many citizens, Mayo staff and government officials attended a celebration to kick off the construction on a new research facility, which is being built on top of the existing Vincent A. Stabile Building in Rochester. Hundreds of people, including Jeff Korsmo, (right) Chair of Administration, Mayo Clinic Rochester, lined up to pen their names on a beam that was placed in the building.
A majority of the new funding – roughly $9 million – will be used to fund a second, expanded round of research awards to focus on health problems facing Minnesota’s citizens.

“We are currently alerting researchers at the University of Minnesota and Mayo Clinic that we’re accepting funding applications for the next round of research,” says Dr. Smith. “We anticipate the same high level of scientific excellence we saw following our initial request.”

Partnerships will be a theme in the years ahead, as well. Dr. Smith, in comments regarding Mayo’s financial performance in 2004, noted this trend: “You’ll see Mayo Clinic getting involved in more of these endeavors in the future. For example, the multiyear research partnership, with requested state support to supplement contributions made by Mayo and the University of Minnesota, will fuel new medical discoveries and will ensure that cutting-edge medicine is available in the state. The initiative will also support the development of new businesses and jobs in Minnesota. We’re convinced that these kinds of projects will advance the field of medicine while benefiting the states and communities in which we operate.”

– Michael Dougherty
Editor’s note:

The Mayo Clinic Alumni Association exists to establish and maintain mutually beneficial relationships between Mayo and its alumni throughout the world. Alumni benefit from their association with Mayo Clinic through care for their patients, educational opportunities and networking opportunities where they practice. Mayo Clinic benefits from its relationships with alumni. Mayo Alumni magazine, in each issue, publishes profiles of the regional alumni groups, describing their gatherings and history.
Each time the Mayo Clinic Alumni Association’s Greater New York group gathers at the University Club in Manhattan, Ken Brookler, M.D., says he realizes how busy life is.

“You can work two blocks away from someone, but this might be the only time you see each other,” says Dr. Brookler (Otorhinolaryngology ’69), who serves as the alumni group’s leader.

So when the group gathers, it’s an occasion to renew their friendships, update each other and hear about news from Mayo Clinic.

“We always say we need to see each other more frequently, and this gives us a formalized structure like a meeting that brings people back together,” says Dr. Brookler.

The group started in 1968 when it was organized by Stephen Rous, M.D., (Urology ’63). Laird Myers, M.D., (Pediatric and Adolescent Medicine ’57) served as the group’s first president.

William Manger, M.D., Ph.D., (Internal Medicine ’55) organized the annual gatherings for 28 years as its secretary-treasurer, before handing over the duties to Dr. Brookler a few years ago.

“This association seemed important to form and to perpetuate in order to keep ties with Mayo, which is something important to us,” said Dr. Manger, who is chairman of the National Hypertension Association.

The group usually features a speaker from Mayo Clinic as well as a distinguished layperson who talks on his or her topic of interest.

Gathered on the University Club’s 7th floor Council Room, alumni and others have listened to the likes of former New York City Mayor Rudolph Giuliani, Ambassador Cyrus Vance, author Thomas Wolfe and many of Mayo Clinic’s leaders.

“The great enjoyment at the meeting was remembering and renewing friendships developed at Mayo and learning about advances at the clinic,” says Dr. Manger.

The New York alumni are also planning ahead, looking at how often they should meet and how to increase their numbers. A typical meeting attracts close to 100 alumni, spouses and friends.

Dr. Brookler said the size of the groups that attend the events is good, but there are close to 800 alumni in the greater New York area and he’d like to attract more to the meetings.

“I really enjoy the people I meet at our meetings and we think there are a number of younger alumni who would enjoy this as well,” says Dr. Brookler.

— Michael Dougherty
Mayo Medical School experience sparks career course for

E. Anne Peterson, M.D., MPH

During a Mayo Medical School trip to Africa in 1982, E. Anne Peterson, M.D., MPH, snapped a photo of a young child. The youngster from Zaire had orange hair denoting malnutrition, an enlarged spleen from recurrent falciparum malaria and his legs were paralyzed from polio.

The photo of her first visit to Africa is included in PowerPoint™ presentations Dr. Peterson uses, and it travels with her across the world on her laptop computer. She’s been to Africa numerous times since that first trip as a student, but the image reminds her of the millions of children suffering and dying daily in the developing world because they lack adequate access to public health prevention interventions or, often, primary care and treatment. She is devoted to their cause.
“Dr. Peterson’s work as a physician has taken her around the world.

“One of my driving forces has been to have a long-term perspective,” Dr. Peterson says with regard to her international health work. “I ask myself, ‘If I go to this place, how can I make a difference not just today but five years from now, 20 years from now?’”

Dr. Peterson is trying to make such an impact by embarking on a six-month position as a consultant, which will include work for an alliance named the Maternal, Newborn and Child Health Partnership – an entity focused on improving the health of mothers and children in developing countries. She hopes then to go on to a job with a “voice for children as the major focus” or establish herself as a consultant who helps people working on behalf of children across the world.

Since graduating from Mayo Medical School in 1982, Dr. Peterson has focused her efforts on international health care, working from 1985 to 1989 in Kenya as part of a faith-based missionary group, as the commissioner of health for the state of Virginia and, most recently, as the assistant administrator, Bureau for Global Health, within the U.S. Agency for International Development.

Dr. Peterson’s dedication to her work is praised, says Flavia Bustreo, M.D., of the World Health Organization and a colleague of Dr. Peterson’s in the international health arena.

“Dr. Peterson is a very enthusiastic and generous person who has a deep belief that mothers and children have the right to survive and thrive,” Dr.

“I realized that if we truly wanted to help, we’d have to go out into a community and address root causes of what was causing their illness.”

– E. Anne Peterson, M.D., MPH
Bustreo says, “I haven’t come across many people with her level of commitment.”

Dr. Peterson cites her first trip to Africa as a medical school student as the pivotal time in her decision to focus her career on international public health. She went to Africa for a medical school rotation, supported in part by a Reader’s Digest scholarship and by wedding gifts. In those months in Zaire, she treated people who had cholera, measles and what would later be known as AIDS, and grew concerned that patients would return to their communities only to be re-infected and, likely, die of preventable diseases.

“I realized that if we truly wanted to help, we’d have to go out into a community and address root causes of what was causing their illness,” Dr. Peterson says. “In that time I felt called to help people learn to keep themselves healthy.”

Dr. Peterson is a Rochester, Minn., native. Her father James Bassingthwaighte, M.D., Ph.D., (General Surgery ’58, Internal Medicine ’61, Physiology ’64) is director of the University of Washington’s Department of Bioengineering’s National Simulation Resource and says his oldest child’s interest in science emerged during her high school years, when she worked in Mayo Clinic research labs and did science fair projects. That her career unfolded with a focus on children doesn’t surprise him, Dr. Bassingthwaighte says.

“She always looked after her four younger siblings,” he says, “and the things she did for them, she tries to do now on a larger scale. She’s had this deep and abiding interest in children’s welfare, and it’s extended itself into her international work.”

Dr. Peterson followed her father’s urging to attend Mayo Medical School after being accepted at other prestigious programs, including Harvard. Dr. Peterson shares her father’s opinion that Mayo Medical School offers the best education to students, citing its devotion to excellence and spirit of cooperation as its hallmarks.

She went on to residencies in family medicine at the University Hospital at Stony Brook in New York and in preventive medicine at Emory University School of Medicine in Atlanta, before going into private practice in Minneapolis.

She returned to Africa in the 1980s with her husband, Dan Peterson, M.D., a fellow Mayo Medical School graduate, and their young children. In Kenya, the couple worked as part of “Mission: Moving Mountains” to improve primary health care for local people.

For Dr. Peterson, the draw was to serve the people not only as a physician, but also as a health educator, in order to improve their long-term health.

The health and care of children in struggling countries is a key concern of Dr. Peterson.
Returning to the United States, Dr. Peterson went on to work in a range of public areas, both internationally and domestically from surveillance to epidemiology and program design. In the mid-1990s, she returned to Africa, this time to Zimbabwe to focus on AIDS prevention in youth. In the late 1990s, she was recruited to the job of commissioner of health for the state of Virginia and she served three years in the post.

A shining career achievement came in 2001 when President Bush appointed Dr. Peterson to lead the health activities of the country’s premier development agency – the U.S. Agency for International Development – where she helped guide and formulate the government’s international health policies. Dr. Peterson left the post earlier this year.

“I felt I’d done as much as I could do for international health from within the U.S. government,” Dr. Peterson says. “I’m hoping by going outside the government, I can be a voice for some of the international health issues that are harder to tackle when you’re embedded in a U.S. government agency with all of the surrounding politics.”

During her last year at the U.S. Agency for International Development, Dr. Peterson’s focus on child mortality took shape. Nearly 11 million children under the age of 5 die annually, and at least two-thirds could be saved with an investment smaller than that going toward AIDS, Dr. Peterson says.

“The voice for these children wasn’t being heard and new funding to help them didn’t seem to be forthcoming,” Dr. Peterson says. “So my call to focus on children really took hold and became my focus of what to do next.

“We have 30,000 children who die every day. We have the tools, knowledge and inexpensive interventions to help them, but we don’t have any voice, any impetus behind doing the things we need to do.”

Dr. Peterson is a strong force for aiding women and children, says her colleague, Dr. Bustreo. In her travels to developing countries, Dr. Peterson is adept at explaining to politicians and others what problems face their country’s women and children, and how to help them, says Dr. Bustreo.

“In Ethiopia and Cambodia, she’s been able to have a very capable and strong political discussion with officials at the highest level of government,” Dr. Bustreo says. “And at the same time maintain a concern and informed, caring dialogue with mothers in the most remote villages of these countries. These skills are quite unique in the international health arena.”

Retired U.S. Navy Adm. William McDaniel witnessed Dr. Peterson’s political prowess while working with

“We have 30,000 children who die every day. We have the tools, knowledge and inexpensive interventions to help them, but we don’t have any voice, any impetus behind doing the things we need to do.”

– E. Anne Peterson, M.D., MPH
her after the 2004 tsunami in Indonesia. McDaniel hired Dr. Peterson to accompany him with the U.S. Department of Defense in extending medical care and assistance to Indonesia this past winter.

“Anne is extremely intelligent and fast on her feet,” McDaniel says. “We encountered many instances where people raised objections to our mission or were hostile. Anne was very patient and good at explaining our goals.”

Dr. Peterson says she has striven to maintain a balanced and thoughtful approach in her international health work, receiving praise from both sides of political controversies for doing just that. Her level of integrity is well regarded, says Dr. Dan Peterson, her husband.

“Anne is by no means a political animal,” he says. “But she commands respect across the political spectrum because of her passion, her knowledge of the problems, her integrity and her vision for a better future.”

Dr. Peterson is mother to three: Chris, 22, Laura, 20, and Tina, 18. All three spent more time in Africa than in the United States until their teenage years. In recent years, she’s relied on her husband to handle more school events and cooking as she’s traveled the world.

Dr. Peterson names as mentors her father for his devotion to hard work and scientific excellence; her mother for her love; Myrl Glockner, who discipled her as a new Christian; and public health heroes such as Bill Foege, M.D., Presidential Distinguished Professor at Emory University, and Gene Gangarosa, M.D., Professor Emeritus, Department of International Health, Emory University.

Dr. Peterson says she is motivated in her work by a biblical passage – “Religion that is pure and undefiled is this to visit orphans and widows in their affliction” – and tries to measure her achievements on a personal level. “Have I been a consistent voice for those who have no voice, have I guided those programs and tasks that I’m responsible for from a strong scientific base, but tailored to be effective in the real world?” she asks.

Those who know her answer yes.

– Renee Berg

Dr. Peterson and her daughters, Tina, left, and Laura, right.
New Mayo Clinic Rochester Board of Governors chair is selected

Glenn Forbes, M.D., has been selected as the new chair of the Mayo Clinic Rochester Board of Governors.

Dr. Forbes will begin serving as the chief executive officer of Mayo Clinic Rochester on Jan. 1, 2006. He succeeds Hugh Smith, M.D.

Dr. Forbes was selected by a search committee consisting of members of the Rochester board and Mayo Clinic Executive Committee. The committee received broad input from Mayo staff members. Dr. Smith and Dr. Forbes are working together through the end of 2005 to ensure a smooth transition in leadership.

“I’ve enjoyed working with Dr. Forbes for many years,” says Dr. Smith. “I have the utmost respect for his leadership skills. His deep commitment to this institution and its ideal of patient-focused collaborative teamwork will serve us all. It will be a pleasure to work even more closely with Glenn in the coming months.”

Dr. Forbes, 58, has served in many leadership roles since joining Mayo Clinic in 1977. He has been chair of the Department of Diagnostic Radiology and was CEO of Franciscan Skemp, part of Mayo Health System, in La Crosse, Wis., from 1998 to 2003, and was a member of the Mayo Health System Board. He is currently a consultant in the Department of Diagnostic Radiology and a professor of radiology in Mayo Clinic College of Medicine, and has been a member and vice chair of the Mayo Clinic Rochester Board of Governors since 2004.

Mayo Clinic Board of Trustees honor new named professors

Heidi Nelson, M.D., Mayo Clinic colon and rectal surgeon, and Gloria Petersen, Ph.D., a Mayo Clinic epidemiologist, were honored with Mayo Clinic College of Medicine named professorships in May at the Mayo Clinic Board of Trustees’ quarterly meeting.

Dr. Nelson received the Fred C. Andersen Professorship, established in 1977 by the Andersen Foundation and the Bayport Foundation in honor of Fred C. Andersen. Dr. Nelson, who joined the Mayo Clinic staff in 1990, is chair of the Division of Colon and Rectal Surgery and a professor of surgery at Mayo Clinic College of Medicine. In addition to performing surgery, Dr. Nelson researches antitumor strategies, emphasizing T-cell therapies, and also applications of colon and rectal cancer molecular genetics to patient treatment. She also works with the Division of Colon and Rectal Surgery’s clinical investigator program, which trains surgeons to become clinical researchers.

Dr. Petersen received the Purvis and Roberta Tabor Professorship, established in 1981 by Mr. and Mrs. Purvis Tabor of Illinois through bequests from the Purvis Tabor Estate. Dr. Petersen’s...
research focuses on colon, lung and pancreatic cancers. She is investigating the interaction of environment and genetics in causing cancer and how this research translates into clinical and public health practice by identifying high-risk individuals and evaluation of screening and interventions.

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.

These professorships are named in honor of the benefactors. 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.

Parkinson’s medication appears to trigger excessive gambling

Habitual, compulsive gambling by people who previously never or only occasionally gambled recreationally has been tied to Parkinson’s disease drugs called dopamine agonists, according to a new Mayo Clinic case series analysis published in the Archives of Neurology.

“This is a striking effect,” says J. Eric Ahlskog, M.D., Ph.D., Mayo Clinic neurologist who treated most of the patients in the series. “Pathological gambling induced by a drug is really quite unusual.”

The good news, according to Dr. Ahlskog and M. Leann Dodd, M.D., Mayo Clinic psychiatrist who spearheaded the analysis, is that excessive gambling behavior only occurs in a small number of patients given the drugs, and it can be stopped as suddenly as it came on. “It’s a very rare side effect and reversible if you get off the drug, but you have to make the association,” says Dr. Ahlskog.

The Mayo Clinic neurologists treating the Parkinson’s patients learned about the gambling issues of the 11 patients in the series during routine clinic visits. Four had never gambled before starting dopamine agonist treatment.

They noted that in seven patients, pathological gambling developed within one to three months of reaching the maintenance dose or with dose escalation of dopamine agonist treatment; none developed pathological gambling while treated with carbidopa/levodopa alone. The other four patients reported compulsive gambling 12 to 30 months after starting dopamine agonist therapy; excessive gambling abated in all four within months of discontinuing the agonist medication.

Dr. Ahlskog indicated he now tries to open the door for his Parkinson’s patients to discuss gambling as a medication side effect by mentioning the potential when prescribing the medication and urging patients to tell him if they experience such effects. He also mentions the possible gambling issue with all new patients who are already taking a dopamine agonist. He emphasizes that pathological gambling linked to dopamine agonists is reversible as long as the association is recognized.

Although physicians frequently prescribe pramipexole for restless legs syndrome, the Mayo Clinic researchers believe the lower doses used pose little danger of it prompting pathological gambling.

Mayo Clinic creates “Office of the Future”

A scientific-ly designed office environment at Mayo Clinic is the practical realization of a decade of research by James Levine, M.D., Ph.D.

Dr. Levine, an endocrinologist, has spent his career studying how humans expend energy.

His recent research findings (Science, Jan. 27, 2005) show that genomic and biological differences impact how many calories a person burns during everyday tasks. It proved the long-discussed concept of a “slow metabolism” as a factor in obesity. It also showed that people can increase their caloric “burn rates” by integrating more movement into their daily regime. Dr. Levine calls this process “non-exercise activity thermogenesis” (NEAT).

In the Mayo tradition of quickly translating medical discoveries into patient care, Dr. Levine created his NEAT-oriented office floor within six months of his scientific publication. Most visitors think they’ve walked into a gym. Dr. Levine is quick to correct them.

“This is a fully functioning office. My entire staff works here,” explains Dr. Levine, as he walks on a moving treadmill that serves as both desk and computer platform. “The idea is to introduce an environment that will encourage activity in the workplace. Just as it’s hard to be a couch potato without a couch, it’s hard to sit all day at work without a chair or a conventional desk or cubicle.”

James Levine, M.D., Ph.D
“We have meeting rooms, but for small groups we prefer the track,” says Dr. Levine. He’s referring to a two-lane walking track that circles most of the 5,000-square-foot floor. “So when my colleagues and I ‘take a meeting’ we also take a walk.”

The room makeover cost about $5 per square foot. The standing desks cost about $1,000 each, but the room requires no other office furnishings, and no cubicles. The result: a traditional office floor is transformed into a clean, sunny, open space with 10 Plexiglas standing computer desks, complete with variable-speed treadmills. There are no desk phones or wall phones. All employees wear mobile phones on their belts along with a Mayo-designed standometer that measures their vertical time and recognizes when they sit down. It also tells them how much more activity they need in order to meet their individual activity goals for the day.

Walls near the track are essentially magnetic white boards (instead of fabric) for posting ideas and scribbling notes during the moving meetings. All keyboarding, phoning and thinking are done during some form of motion.

Dr. Levine and his colleagues re-examined and completely redesigned the desk. Their version stands vertical and can be used with a treadmill, exercise bike, standing or regular chair. It is modular and mobile, so persons can work where and how they wish. It costs half the price of a cubicle, is more flexible and can easily be personalized. It can also be used at home or in school. The see-through panels let in the light and allow a person to stay visually connected with the rest of the room.

Using the desk at 1 mph will burn about 100 calories per hour. So, walk-working from 9 a.m. to 5 p.m. burns 800 extra calories per day. If food intake stays the same, this could be a loss of more than fifty pounds a year.

2006 International CME program in Dubrovnik, Croatia

The Mayo Clinic Alumni Association’s 2006 International CME program will be held in Dubrovnik, Croatia Oct. 10-14, 2006.

Thomas McDonald, M.D., and Thomas Habermann, M.D., of Mayo Clinic Rochester, are the course directors for the CME program. The educational sessions will be focused on medical topics relative to all specialties including quality and patient safety. The course headquarters will be at the Hotel Excelsior, located on the sea, just a short distance from the ancient city center.

Dubrovnik is a Mediterranean treasure-house of culture and history dating back centuries. It is often referred to as the “Jewel of the Adriatic.” It has one of the world’s most outstanding and still existing ancient city wall fortifications. Dubrovnik has been designated and is protected as a United Nations Educational Scientific and Cultural Organization (UNESCO) World Heritage site because of its cultural and historic importance.

Attendees will have the option of extending their visit following the CME program with a fully escorted tour of Croatia.

Full CME program details and travel information will appear in the Fall issue of Mayo Alumni magazine. Registration and information brochures will be available at the 64th Meeting of the Mayo Clinic Alumni Association in Jacksonville, October 20-22. Registration brochures will be mailed out to Mayo Clinic Alumni Association members in early October.

A Mayo Clinic researcher has been selected as part of an international team to develop a modern insecticide to combat malaria. Yuan-Ping Pang, Ph.D., a chemist and head of Mayo's Computer-Aided Molecular Design Laboratory, will lead computational work on the three-year project to be funded by a $2.7 million Grand Challenges in Global Health award.

The award is one of 43 projects funded by the Foundation for the National Institutes of Health, in

Yuan-Ping Pang, Ph.D.,

A Mayo Clinic researcher has been selected as part of an international team to develop a modern insecticide to combat malaria. Yuan-Ping Pang, Ph.D., a chemist and head of Mayo's Computer-Aided Molecular Design Laboratory, will lead computational work on the three-year project to be funded by a $2.7 million Grand Challenges in Global Health award.

The award is one of 43 projects funded by the Foundation for the National Institutes of Health, in...
It's significant that the foundations recognized Dr. Pang's expertise, but also saw Mayo as a center for innovative biomedical technology,” says Robert Rizza, M.D., Mayo Clinic’s director for research.

Dr. Pang, who built his own supercomputer at Mayo Clinic, will begin the project by determining the protein structures in mosquitoes that carry malaria and how they differ from the structures in human proteins. Using terascale supercomputing at Mayo to understand the structural differences so researchers can develop an insecticide that won’t hurt humans.

“This is a great opportunity to work with the foundations and a stellar team of scientists at Virginia Tech and Kenya, Africa, to provide a solution that may have worldwide impact on health,” says Dr. Pang.

Scientists from Virginia Tech will use Dr. Pang’s computer-generated mosquito protein structure as scaffolding on which they will build new molecules. The prototype will be tested in Virginia and then at the International Center for Insect Physiology and Ecology in Kenya.

The World Health Organization says upwards of 500 million people suffered malaria in 2003 and the death toll from all mosquito-borne illnesses exceeds 1 million annually; most are children under five.

Dr. Pang built his own supercomputer by assembling processing units from hundreds of personal computers. He then used his supercomputer to create the first 3-D model of the viral enzyme that led to the discovery of a small-molecule inhibitor of the Severe Acute Respiratory Syndrome virus.

St. Vincent’s and Mayo Clinic transfer ownership of St. Luke’s Hospital

St. Vincent’s in Jacksonville, Fla., and Mayo Clinic have completed St. Vincent’s purchase of St. Luke’s Hospital. The transfer of legal ownership took effect July 1, 2005.

With the transfer of legal ownership, St. Vincent’s takes title to St. Luke’s Hospital, the two adjoining physician office buildings and other tangible assets. St. Vincent’s is leasing the facilities back to Mayo Clinic until the new Mayo Clinic Hospital is opened in 2008.

The transaction represents an investment by St. Vincent’s of approximately $150 million. With the proceeds from the sale and over $70 million from Mayo Clinic benefactors, Mayo Clinic will begin construction of a 214-bed hospital at its San Pablo Road campus. When Mayo Clinic Hospital opens, there will be a second and final closing that will transfer operational control of St. Luke’s to St. Vincent’s.

“When Mayo Clinic Hospital opens in 2008, patients coming to Mayo for complex medical care will be treated at a single location with integrated inpatient and outpatient services,” said George B. Bartley, M.D., chair of Mayo’s Board of Governors. “Having our hospital, clinic, laboratory, research and education facilities on one campus improves patient care and efficiency and helps reduce costs.”

Mayo Clinic Collaborative Research Building opens on Scottsdale campus

A new biomedical scientific facility that joins Mayo Clinic and the Translational Genomics Research Institute (TGen) in a unique strategic partnership opened June 30 on the Scottsdale, Ariz., campus of Mayo Clinic.

The $25 million building combines the partners’ technological, academic, research and clinical expertise aimed at bringing innovative cancer research findings directly to the bedside of patients.

The new Mayo Clinic Collaborative Research Building (MCCRB), a 110,000 square-foot facility was funded by Scottsdale developer Tom Hornaday of Hornaday Development. The building is the first of its kind for Mayo Clinic in that it brings multiple strategic partners under one roof dedicated to scientific discovery and therapeutics to ease the burden of disease.

The MCCRB is located south of the main clinic facility and directly north of the S.C. Johnson Research Building. The collaboration represents a broadening of
the scope of research between Mayo Clinic and TGen extending beyond its initial focus on melanoma. Tenants of the building thus far include:

• Mayo Clinic research business offices
• Mayo Clinic researchers, including investigational labs for hematologic malignancies, multiple myeloma and pancreatic cancer
• TGen’s Cancer Drug Development Laboratory (CDDL) and the TGen subsidiary, TGen Drug Development (TD2)

The CDDL provides a centralized set of resources for investigators interested in the recent explosion in molecular medicine and genomics-based diagnostics and treatment methods. The combination of world-class researchers and the latest technologies create a highly collaborative multidisciplinary research environment. The goal is to develop innovative preclinical research products based on an individual’s disease and associated molecular profiles that are brought to bear on cancer as quickly as possible.

The work is expected to support the Mayo Clinic Cancer Center, one of only 38 U.S. medical centers named a National Cancer Institute (NCI)-designated Comprehensive Cancer Center. Mayo’s clinical and research experts join forces to address the complex needs of oncology patients.

“Pursuing joint research strategies and building strong partnerships with researchers at TGen helps advance Mayo Clinic’s mission of integrating research and education with clinical medicine to provide optimal health care for our patients and patients everywhere,” says Victor Trastek, M.D., chair of the Mayo Clinic Arizona Board of Governors.

**Mayo announces Physician Leaders for Heart Transplant Program**

Two pre-eminent cardiac specialists have joined Mayo Clinic in Arizona to lead the organization’s new Heart Transplant Program and to prepare for Mayo’s first heart transplant, expected to occur sometime in late fall or early winter 2005.

Francisco A. Arabia, M.D., a nationally recognized specialist in cardiovascular and thoracic surgery, is the surgical director, Heart Transplant Program. Dr. Arabia was Physician Leader, Heart Program, at University Medical Center (UMC) in Tucson, as well as Surgical Director, Lung Transplant Program.

Robert L. Scott, M.D., Ph.D., is the medical director for Congestive Heart Failure and Heart Transplantation. He was medical director, Heart Transplantation, director of Heart Failure Services and medical director, Coronary Care Unit, at Ochsner Clinic Foundation in New Orleans.

Mayo’s new heart transplant program will be the only program in the Phoenix area. It expands its existing cardiovascular and solid organ transplant services by including heart transplantation and other advanced treatments for heart failure and heart disease. Currently Mayo performs kidney, liver and pancreas transplantation.

Dr. Arabia is distinguished in his profession in cardiothoracic and lung transplant surgery. Before joining UMC in 1997, Dr. Arabia completed residencies in general surgery at Tulane University Affiliated Hospitals in New Orleans.

Dr. Scott was on staff at Ochsner since 1998 and previously completed cardiology fellowships in heart failure and transplant at Cleveland Clinic and in cardiology at St. Louis University Hospital. Both Dr. Arabia and Dr. Scott were offered their positions following a comprehensive national search for a heart transplant surgeon and medical director.

The Heart Transplant Program at Mayo Clinic in Arizona will benefit from the infrastructure already in place in the solid organ transplant program and will provide the full spectrum of cardiac care, including heart failure surgery, ventricular assist device implants and rehabilitation services.

**Professional meetings**

**Mayo Clinic Alumni Association Receptions**

American College of Surgeons, Oct. 16-20, 2005, San Francisco
American Society of Anesthesiologists, Oct. 22, 2005, Atlanta
American Academy of Child and Adolescent Psychiatry, Oct. 18-23, 2005, Toronto
Association of American Medical Colleges (AAMC), Nov. 6, 2005, Washington, D.C.
American Association for the Study of Liver Diseases, Liver Meeting, Nov. 11-15, 2005, San Francisco
American College of Chest Physicians, Oct. 29-Nov. 3, 2005, Montreal
American College of Gastroenterology, Oct. 28-Nov. 2, 2005, Honolulu
American College of Rheumatology, Nov. 12-17, 2005, San Diego
American Society of Therapeutic Radiology and Oncology, Oct. 16-20, 2005, Denver

**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.

Mayo Interventional Cardiology Board Review, Sept. 30-Oct. 1, 2005
Geriatric Update for the Primary Care Provider, Oct. 6, 2005
Targeting Carcinogenesis, Oct. 6-7, 2005
Genomics in Clinical Practice, Oct. 20-21, 2005
Parkinson’s Disease and Other Movement Disorders, Oct. 21-22, 2005, Phoenix, Ariz.
Nicotine Dependence Conference, Oct. 24-28, 2005
Clinical Reviews 2005, Oct. 24-26, 2005

**Annual Psychology Fall Conference**, Nov. 4-5, 2005
**Clinical Reviews 2005**, Nov. 7-9, 2005
**Update in Hospital Medicine**, Nov. 9-12, 2005, Tucson, Ariz.
**Mayo Clinic OB/GYN Clinical Reviews**, Nov. 10-11, 2005
**Current Concepts in Primary Eye Care**, Nov. 10, 2005

**Alumni news**

1950s

**Harold Browne** (General Surgery ‘53) was awarded the College Medal from the Royal College of Surgeons in recognition of his “dedication to the teaching, training and examination of young surgeons.”

**Homer Peabody Jr.** (Internal Medicine ‘51), executive director of Rees-Stealy Research Foundation has written a book, *History of the Rees-Stealy Clinic*. The clinic was San Diego’s first multi-specialty group, established in 1923, and many of the ideas at the clinic were modeled after Mayo Clinic following several visits by Dr. Stealy to Mayo Clinic.

1960s

**Robert Altman** (Internal Medicine ’69) retired from Pulmonary Associates. He continues as medical director of the Volunteer Free Clinic St. Vincent de Paul in Phoenix.

**John Hastings** (Neurology ’69) received the 2005 Theodore C. Lyster Award from the Aerospace Medical Association.

**James Monge** (General Surgery ’63) recently spent two months as a volunteer surgeon in Kijabe Hospital, Kenya. He is a clinical professor at the University of Minnesota Duluth Medical School.

**Robert White** (Neurologic Surgery ’61) was elected to the Ohio Veterans Hall of Fame and has been honored with membership in both the Russian and Ukrainian academies of science.

**Lorin Whittaker Jr.** (General Surgery ’69) was presented with the 2005 College Medicine Faculty of the Year Award at the University of Illinois College of Medicine at Peoria, where he is an associate professor of clinical surgery.

1970s

**William Flood** (Pediatrics ’74) received the 2004 Indian Health Services Director’s Award. He is a pediatrician in the IHS at Inscription House Health Center on the Navajo Nation.

**Robert Hendren** (Psychiatry ’79) is president-elect of the American Academy of Child and Adolescent Psychiatry. Hendren will serve two years as president-elect and two years as president. Dr. Hendren is a professor of psychiatry, executive director of the Medical Investigation of Neurodevelopmental Disorders (M.I.N.D.) Institute and chief of child and adolescent psychiatry at the University of California, Davis.
George Longstreth (Gastroenterology ’76) was awarded the American Gastroenterological Association Distinguished Clinician Award.

Jack Slosburg (Anesthesiology ’78) recently retired after 25 years of practice. In 2000, he was selected by physicians for inclusion in the “Best Doctors in Florida.”

David Tollerud (MMS ’78), professor and chair of the Department of Environmental and Occupational Health Sciences at the University of Louisville School of Public Health and Information Sciences, recently chaired two-year-long National Research Council (National Academies of Science) committees: Distribution and Administration of Potassium Iodide in the Event of a Nuclear Incident; and Superfund and Mining Megasites: Lessons from the Coeur d’Alene River Basin. He is currently chair of an Institute of Medicine committee assessing the disposition of the Air Force Health Study of Ranch Hand pilots and ground crew involved with spraying Agent Orange and other herbicides during the Vietnam War.

Paul Tomich (Obstetrics and Gynecology ’77) was elected assistant secretary of the American College of Obstetricians and Gynecologists.

Maurice Webb (Gynecologic Oncology ’72) was elected president of the Society of Pelvic Surgeons.

1980s

Lael-Anson Best (Cardiovascular Surgery ’88) was appointed clinical associate professor of surgery in the Faculty of Medicine of the Israeli Institute of Technology.

Jon Dennis (Pediatrics ’80) was elected president of the Great Lakes Chapter of the Society of Adolescent Medicine.

Gordon Grado (Radiation Oncology ’81) was inducted as fellow of the American College of Radiology. He is affiliated with the University of Minnesota, the Minneapolis VA Medical Center and Scottsdale Healthcare Shea in Scottsdale, Ariz.

James Retmier (Orthopedics ’86) completed two years as chief of staff and currently is a member of the Board of Trustees, Magic Valley Regional Medical Center in Twin Falls, Idaho.

Hiroaki Shimokawa (Physiology ’87) has been appointed professor and chairman of the Department of Cardiovascular Medicine at the Tohoku University Graduate School of Medicine, Sendai, Japan.

Sandra Taler (MMS ’83) was elected to a three-year term on the Board of Directors of the American Society of Hypertension.

1980s

Charles Crutchfield III (MMS ’94) was given the 2005 Editor’s Award from the Dermatology Nurses Association in recognition of contributions to the journal and to dermatology nursing education.

Laura Dean (MMS ’92) was elected Fellow-at-Large to the American College of Obstetricians and Gynecologists.

Yasuko Fukuda (MMS ’91) was elected president of the American Academy of Pediatrics, California Chapter.

2000s

Maher Abbas (General Surgery ’02) received the American College of Surgeons Young Surgeon Travel Award.

Ives de Chazal (Critical Care Medicine ’01) joined Pulmonary Associates of Southern Arizona in Tucson.

William Suggs (General Surgery ’02) was appointed director of the Surgical Weight Loss Center in Decatur, Ala., after completing a laparoscopic bariatric fellowship at Princeton University.

Staff news

Stephen Carmichael received the American Association of Anatomists’ Exemplary Service Award.

Steven Eckert was re-elected to the American Academy of Maxillofacial Prosthodontics Board of Directors.

W. Bruce Fye was elected to The Johns Hopkins University Society of Scholars.

Peter Gloviczki received a diploma and medal from the Mayor of Paris, France, acknowledging him as the Honorary President of the French Society of Angiology and for his many years of contributions to French-speaking vascular societies.

Peter Gloviczki received the Merit Medal in grade of Grand-Master from the Brazilian Society of Angiology and Vascular Surgery, in recognition of his contributions to the development of the Brazilian Angiology and Vascular Surgery.

Andrew Good was elected president of the Society for Humanism in Medicine.

Nicholas LaRusso was elected vice president of the American Gastroenterological Association and will become president of the association in two years.

Victor Mahaffey was awarded the New Horizons Award from the Foundation for Genetic Technology.
James Malec received the Elinor D. Hands Outstanding Achievement Award from the Brain Injury Association of Minnesota.

Ashutosh Mangalam received the Best Poster Award at the second annual FOCIS Center of Excellence Trainee Satellite Symposium.

Christopher McGregor was awarded an honorary Doctorate in Medicine by the University of Pavia, Italy, for contributions to transplantation.

Ronald Petersen received the Potamkin Award from the American Academy of Neurology.

Gregory Poland gave the commencement address at Illinois Wesleyan University and was awarded an honorary doctoral degree, honoris causa, during the ceremony.

A. Jamil Tajik received the 2005 Ellis Island Medal of Honor from the National Ethnic Coalition of Organizations.

Eric Tangalos received the fourth annual Award for Excellence in Dementia Care from Johns Hopkins University. Dr. Tangalos also presented the keynote address at the 11th Annual Update on the Treatment of Alzheimer’s Disease and Related Disorders.

Robert Waller received the Joseph M. Juran Medal from the American Society for Quality.

Russell Wiesner received the American Society of Transplantation Fujisawa Clinical Science Established Investigator Award for 2005.

Jeffrey Winters was elected to the Board of Directors of the American Society for Apheresis.

Gilbert Wong received the John C. Liebeskind Early Career Scholar Award.

### Obituaries

#### 1940s

Charles Evans Jr., 90, died Aug. 26, 2003. Dr. Evans received his medical and master of surgery degrees from McGill University in Montreal in 1937. After his internships and residency training, Dr. Evans came to Mayo Clinic, where he completed a fellowship in general surgery in 1944. He moved to Findlay, Ohio, and eventually founded the Findlay Clinic in 1950. He was the community’s first board-certified surgeon. He received the Silver Beaver Award from the Boy Scouts of America. Dr. Evans was president of the Northwest Ohio Medical Association and was president of the medical staff at Blanchard Valley Hospital in Findlay. He retired in 1986.

Keith Sheldon, 85, died Oct. 12, 2004. Dr. Sheldon received his medical degree from the University of Nebraska College of Medicine in Omaha in 1943. After residency training, Dr. Sheldon began fellowships in orthopedics (1944) and in general surgery (1945) at Mayo Clinic before being inducted in the U.S. Naval Reserves. He joined a medical practice in Omaha, Neb. And later moved to Del Norte, Colo., where he lived at the time of his death.

#### 1950s

Donald Alcott, 89, died Sept. 7, 2004. Dr. Alcott received his medical degree from Rush Medical College – University of Chicago in 1942. After an internship in St. Paul, he joined the U.S. Army and served in U.S. Army hospitals until 1946. He completed his residency training in pathology in Tacoma, Wash., in 1947, before coming to Mayo Clinic where he did his fellowship training in pathology. After completing his fellowship at Mayo Clinic in 1950, he began practicing in California. Dr. Alcott was director of laboratories for Santa Clara County Hospital in San Jose, Santa Cruz Hospital and Sisters Hospital in Santa Cruz. He also was a clinical instructor in pathology at the University of California – San Francisco. He later retired and continued living in California.

Lila Elveback, 88, died April 30, 2004. Dr. Elveback received her Ph.D. degree in statistics at the University of Minnesota while completing a fellowship at Mayo Clinic in 1955. She joined the faculty at Tulane University in New Orleans, becoming a professor of biostatistics and director of graduate education in biostatistics. From 1960 to 1965, Dr. Elveback was head of the statistics section, Public Health Research Institute in New York City. She returned to Mayo Clinic in 1965, serving as head of the section of medical research statistics in the Department of Medical Statistics and Epidemiology, while also serving as a professor of biostatistics. She started the statistics teaching program in Mayo Graduate School of Medicine, assisted in the development of the Mayo Medical School courses in her field and shared responsibility and credit for creation of the Rochester Epidemiology Project. Dr. Elveback was a consultant to the World Health Organization and was editor of the *American Journal of Epidemiology*. She retired in 1983.

Ray Gifford, 80, died May 4, 2004. Dr. Gifford received his medical degree from the Ohio State University School of Medicine and continued with a residency at Ohio State. He later came to the Mayo Clinic for a fellowship in internal medicine, which he completed in 1952. He joined the Medical Corps of the Navy Reserve and served as assis-
tant attending physician to Congress, during which time he treated then-Sen. Lyndon B. Johnson when he suffered a heart attack. Dr. Gifford joined the Mayo Clinic staff in 1953, becoming an assistant professor of medicine. He was at Mayo Clinic until 1961 when he joined the Cleveland Clinic. At the Cleveland Clinic he led the Department of Hypertension and Renal Disease and later was chairman of Regional Health Affairs and Physician Outreach from 1986 to 1993. He was an expert in hypertension and, while at Mayo Clinic, published a study that showed treatment of hypertension with medications brought higher survival rates among patients treated. He helped found the National Hypertension Association in 1977. Dr. Gifford also was president and chairman of the board of the Academy of Medicine of Cleveland, was president of the American Society of Clinical Pharmacology and Therapeutics. He first retired in 1993, but came back because of demand by patients and worked until 1999.

Kamal Kuwayti, 78, died April 13, 2004. Dr. Kuwayti received his medical degree from American University of Beirut in 1951. After an internship at Ottawa Civic Hospital in Canada, he came to Mayo Clinic where he completed a fellowship in internal medicine in 1956. He began medical practice in Ottawa and in the 1980s moved his practice to California in the Los Angeles area. He later retired and lived in Ottawa at the time of his death.

1960s

Manuel Bonnemaison, 73, died July 4, 2004. Dr. Bonnemaison received his medical degree in Peru and completed residency training at Georgetown University Hospital and Northwest University’s Wesley Memorial Hospital in Chicago. He came to Mayo Clinic and completed a fellowship in orthopedics in 1965. He returned to his home country where he became one of the most prominent orthopedic surgeons in Peru. He was a professor at the University of San Marcos, the oldest medical college in Latin America. Dr. Bonnemaison was a fellow of the American College of Surgeons and was a member of many other medical societies. He retired in 1990 and moved to Arlington, Va., where he lived until his death.

Thomas Comer, 69, died in 2003. Dr. Comer received his medical degree from the New York Medical College in 1959. He joined the U.S. Air Force, serving through 1962. After further training, Dr. Comer completed a fellowship in general surgery at Mayo Clinic in 1966. He was living in Encino, Calif., at the time of his death.

1970s

Donald Braun, 56, died in March 2003. Dr. Braun received his medical degree from the University of Minnesota in 1972 and completed a fellowship in orthopedics at Mayo Clinic in 1977. He was retired and living in Pierz, Minn., at the time of his death.
Resources to help you stay connected with Mayo Clinic and Mayo Clinic Alumni Association

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

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

Mayo Clinic Arizona
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

Debbie Oscarson
507-538-1663
www.mayo.edu/alumni

The Doctors Mayo Society
Robert Giere
800-297-1185

Physician Referral Information
Rochester 800-533-1564
Jacksonville 800-634-1417
Arizona 800-446-2279

Executive Health Program
Rochester 507-284-2288
Jacksonville 800-634-1417
Arizona 480-301-8088

Mayo Medical Laboratories
800-533-1710
www.mayoreferenceservives.org/mml/

Mayo Clinic MedAir, Mayo One
800-237-6822
www.mayomedicaltransport.com

Regional Visiting Faculty Program
Rochester 507-284-2242
Jacksonville 904-953-2944
Arizona 480-301-7348

Visiting Clinician Program
Rochester 507-284-3432
Jacksonville 904-953-2944
Arizona 480-301-4338

Continuing Medical Education
Rochester 800-323-2688
Jacksonville 800-462-9633
Arizona 480-301-4580
www.mayo.edu/cme/

Employment Opportunities

Mayo Clinic Human Resources
For information about employment opportunities at Mayo Clinic visit:
www.mayo.edu or e-mail:
careers@mayo.edu

You will be asked to specify Rochester, Jacksonville or Scottsdale for employment opportunities.

Mayo Health System
John Shonyo
507-284-9114
www.mhs.mayo.edu

Medical Journal

Mayo Clinic Proceedings
800-707-7040
www.mayo.edu/proceedings
### STATEMENT OF FINANCIAL POSITION
As of December 31, 2004

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<th>ASSETS</th>
<th>Amount</th>
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<td>Cash and cash equivalents</td>
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<td>Prepaid expenses</td>
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<td>Investments, at fair market value</td>
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<th>LIABILITIES AND NET ASSETS</th>
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### STATEMENT OF ACTIVITIES
For The Year Ended December 31, 2004

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<td>Meeting registration fees</td>
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<td>Receptions</td>
<td>93,252</td>
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<tr>
<td>Regional meetings</td>
<td>12,779</td>
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<tr>
<td>Specialty meetings, net of reimbursements</td>
<td>11</td>
</tr>
<tr>
<td>Mayo Alumni memorabilia</td>
<td>42,386</td>
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<tr>
<td>Mayo School of Graduate Medical Education</td>
<td>13,210</td>
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<tr>
<td>Mayo Graduate School</td>
<td>5,770</td>
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<td>Mayo Medical School</td>
<td>14,294</td>
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<tr>
<td>Heritage program</td>
<td>3,584</td>
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<tr>
<td>Humanitarian program</td>
<td>3,342</td>
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<tr>
<td>Group Associations:</td>
<td></td>
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<tr>
<td>Eye Fellows</td>
<td>8</td>
</tr>
<tr>
<td>Coventry Orthopedics</td>
<td>15,732</td>
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<tr>
<td>Urology</td>
<td>1,413</td>
</tr>
<tr>
<td>Orthopedic Surgery</td>
<td>11,246</td>
</tr>
<tr>
<td>Philip K. Hench Society</td>
<td>238</td>
</tr>
<tr>
<td>Plummer Society</td>
<td>49</td>
</tr>
<tr>
<td>O’Leary Society</td>
<td>9,961</td>
</tr>
<tr>
<td>Priestley Society</td>
<td>15,231</td>
</tr>
<tr>
<td>Mayo Fellows’</td>
<td>51,835</td>
</tr>
<tr>
<td><strong>Total Program Services</strong></td>
<td><strong>$315,576</strong></td>
</tr>
<tr>
<td>Supporting Services:</td>
<td></td>
</tr>
<tr>
<td>Operating expenses</td>
<td>56,348</td>
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<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>$369,924</strong></td>
</tr>
<tr>
<td>Change in Net Assets:</td>
<td></td>
</tr>
<tr>
<td>Net Assets, beginning of the year</td>
<td>$195,888</td>
</tr>
<tr>
<td><strong>Net Assets, end of the year</strong></td>
<td><strong>$946,398</strong></td>
</tr>
</tbody>
</table>
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