Transplant Patient Given Gift of Life From Teenage Donor

By Katy Casse
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Amy Pannell was no stranger to doctors or medication. In 1984, she was diagnosed with Crohn’s disease, a form of overactive immune response that leads to chronic inflammation of the intestines.

When she was 25, she was diagnosed with primary biliary cirrhosis, an impairment in the flow of bile that blocks the flow of bile and leads to the scarring known as cirrhosis.

Still, she said she was shocked in the spring of 2007, when doctors told her she would need a liver transplant.

Pannell, then working as a gate agent at Comair, assumed her symptoms were reactions to her Crohn’s medication.

But, in reality, she was jaundiced and in need of a new liver. Within a few days, she was admitted to UC Health University Hospital, where doctors attempted to open her liver’s blocked ducts and drain the bile.

She was placed on the transplant list that July and had two close calls within a month. Rushed to the hospital for one possible transplant, she was told the available liver wouldn’t fit in her petite, 5-foot-2-inch frame. A second possible donor was found to have previously undetected cancer.

“You learn lots of things in the transplant process,” she says, “and I learned patience. There are things you have to be patient for, and that was one of them.”

On Sunday, August 19, Pannell got a third call about a possible organ. She arrived at the hospital with her husband, daughter Ashley and sister at 11 a.m.

“By 3 p.m., they told me it was a good liver, and it was a go,” she says. She also learned that her donor was a teenage girl. Years later, she still tears up talking about it.

“It’s an awful feeling, because you know that somebody lost their baby,” she says. “Yet, they gave me the gift of life.”

The United Network of Organ Sharing estimates there are 110,327 people in the U.S. waiting for an organ. Amidt Tevar, MD, director of the liver transplant program at University Hospital, says liver transplant in particular suffers from an “ever-present” organ shortage.

Pannell’s transplant allowed her to enjoy a new, healthy life with her family. In the years since, she’s traveled to Europe with her husband and watched her daughter graduate from Butler University and begin studies at UC’s College of Law.

“I know the donor family will never get to see their child do those things, and that’s hard,” she says. “I can’t imagine how they felt, but they really are my heroes.”

By Angela Keong
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Today’s young people operate in a near paperless society, and communication platforms like email, texting, Twitter and Facebook rule when it comes to spreading the word far and wide.

“It’s all about connection, connection, connection,” says UC researcher Devon Berry, PhD, who touts social media as the solution to finding study participants for an ongoing research project on whether religiosity affects risky behaviors in students transitioning from high school to college.

Berry, an assistant professor in the UC College of Nursing, and his research team originally took the traditional approach to recruitment—such as handing out fliers at student events. That method, requiring numerous man hours and the expense of paper fliers, failed a whopping 17 participants. But Berry needed 120 participants and had a timeline to follow as a requirement of the research grant—$350,000, funded by the Robert Wood Johnson Foundation.

His team, Berry says, decided to hone its approach based on a previous phase of the research, asking “How is it that college students are communicating these days?” It seemed obvious to turn to electronic communication, through which students could email, text or Facebook their interest in the study.

And the replies started pouring in, Berry says—some from campuses as far as 500 miles away.

“Viral is probably too big of a word, but participation actually began to build very rapidly,” DEVON BERRY, PhD

adding that within four weeks, 49 students had enrolled via text and 55 via email.

To keep up with the rapid pace of enrollment, especially by texting, Berry turned to Google Voice, a free service which can convert texts into email as a means to read, track, and respond to multiple texts.

“That way, we were able to use the keyboard because it would be impossible to text back that many people and expensive to purchase mobile devices for one phone number,” he says.

An additional benefit was that Google logs all of the interactions, which is essential to research.

“The only downside: Many of the responses came in between 11 p.m. and 1 a.m., when the students are wide awake and faculty are fast asleep, so one lucky team member burned the midnight oil in order to respond to the inquiries.”

FINDINGS

RESEARCHER survey: We Need You!

Please take a few minutes to visit a short researcher survey at surveymonkey.com/s/findings11 and share your thoughts on findings with us.

Please note that this survey will close at 5 p.m. on April 15, 2011. Thank you for taking part.

One Third of Graduating Class ‘Matches’ in Tristate

UC’s graduating medical students got a peek into their future Thursday, March 17, 2011, during the annual Match Day celebration. This event is when students find out where they’ve matched for residency—the next stage in their medical careers.

Of the 156 graduating medical students, most of whom were clad in green in observance of St. Patrick’s Day, 53 (34 percent) will remain in the Tristate for their residency positions, with 20 students matching at UC Health University Hospital and nine at Cincinnati Children’s Hospital Medical Center. Two students will go to St. Elizabeth Medical Center in Edgewood, Ky., nine to Jewish Hospital, 11 to Christ Hospital and two to Good Samaritan Hospital. Nearly half of the students will remain in Ohio.

To see photos from Match Day, visit facebook.com/uchalthnews.
Mother to Share Journey of Mood Disorders Event Has Sessions for Both Health Professionals and Public

By Keith Herrell
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The Mood Disorders Program at the UC Neuroscience Institute is holding two special events Saturday, April 30, at Xavier University’s Cintas Center. The morning event (9 a.m. to 12:15 p.m.), “Depression in Special Populations,” is for health care professionals. It requires registrations and offers continuing medical education credits.

The afternoon event (1 to 5 p.m.), “Depression and Suicide: What Should You Know,” is free and open to the public. In addition to the panel discussion with Karen Troup and her husband, Dave, it will feature a presentation by Eric Hippel, former NFL quarterback, who has devoted his life to building awareness of depressive illness since the suicide of his 15-year-old son, Jeff.

Seating for both programs is limited. Please RSVP by calling (877) 263-2882.

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Chick-fil-A Lectureship Event May 6

The UC College of Nursing and Sagegate Partners are co-hosting the second annual Chick-fil-A Lectureship event from 7:30 a.m. to 4:30 p.m. Friday, May 6, at Fifth Third Arena. The event features 11 speakers, including Muhtiar Kent, chairman of the board and chief executive officer of the Coca-Cola Co., and University of Texas head football coach Mack Brown.

The event is open and available to all professionals, and 5:30 continuing education contact hours for nurses are approved by the Ohio Board of Nursing.

Register at cincyleadercast.com.

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New External Faculty Awards Website

A new website has been developed to facilitate applying for or nominating faculty for awards. Login is required using our central login with password, and awards are listed by name, deadline and college. Web links with additional information about each award and the application process is provided. If you have questions or recommendations for additions to the awards list, email Dawn O’Neill at dawn.oneill@uc.edu.

Keshavan to Speak at Nasrallah Series

Matcheri Keshavan, MD, Stanley R. Cobb Professor of Psychiatry at Harvard Medical School, will be the featured speaker for the Nasrallah Schizophrenia Lecture Series from 11:30 a.m. to 1 p.m. Wednesday, April 20, in Suite 2108 of the State Building. His topic will be “Advances in Diagnosing Schizophrenia.” For details, visit this event’s Google+ page.

Keshavan’s areas of research include the neurodevelopment of pediatric schizophrenia, neuromaging and early intervention.

The event is a continuing medical education activity, made possible by the Henry A. Nasrallah, MD, Endowed Lectureship Fund. Pre-registration is not required, and there is no fee to attend.

For more information, contact Angela Olive at (513) 558-5326 or angela.olive@uc.edu.

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University of Cincinnati Academic Health Center
By Amanda Harper

Financially endowed chairs are a vital resource for funding for the UC Academic Health Center and higher education in general. “Endowed chairs are a testament to our ability to attract world-class, nationally recognized experts to lead our programs. They provide a strong signal to prospective faculty candidates that our institution is strong and stable,” explains Andrew Filak, MD, interim dean of the College of Medicine. “This funding also provides security during the ebbs and flows of NIH (National Institutes of Health) research funding so that progress is not hindered.” Financially endowed chairs are created as a permanent source of funding for the person appointed to the position. The principal amount of the gift is not spent; only the income earned on the endowment—generally 5 percent of the chair’s market value annually. This support is for use in developing research, teaching or patient care programs and is considered a sign of prestige in higher education.

Current endowed chairs span the College of Medicine’s departments of anesthesiology, cancer and cell biology, environmental health, emergency medicine, family medicine, internal medicine, molecular genetics, neurology, neurosurgery, obstetrics and gynecology, ophthalmology, orthopedic surgery, otolaryngology, pathology, pediatrics, pharmacology, physical medicine and rehabilitation, physiology, psychiatry and behavioral neuroscience, radiation oncology, radiology and surgery, as well as the College of Medicine Dean’s Fund and Cincinnati Cancer Center. The College of Nursing also holds two endowed chairs.

The UC College of Medicine has 75 endowed chairs to date, including the most recent: Henry W. and Margaret C. Neakle Endowed Chair of Plastic & Reconstructive Surgery, the Advancement of Academic Emergency Medicine Endowed Chair, the Harold C. Schott Endowed Chair in Brain Tumor Molecular Therapeutics and the Ward E. Bullock Endowed Chair in Infectious Diseases.

Ward E. Bullock Endowed Chair in Infectious Diseases

The Ward E. Bullock Endowed Chair in Infectious Diseases was established in January 2011 due to gifts from Charlotte Brooks, who is Bullock’s widow, friends of the family and colleagues as well as the department of internal medicine. UC received a $1 million endowment from Bullock in 2007 with hopes of meeting the goal of the endowed chair Bullock died that same year, following a 45-year career in medicine. At UC, Bullock headed the infectious diseases division and was Arthur Russell Morgan professor of medicine from 1988 to 1994, was the associate chair for research in the department of internal medicine from 1988 to 1999 and then again from 1999 to 2004, was senior associate dean of the College of Medicine from 1999 to 1991 and was adjunct professor of molecular genetics, biochemistry and microbiology from 1980 to 1994.

George Smulian, MD, associate professor of medicine, has been appointed chief of the infectious diseases division and will be the first recipient of the Bullock endowed chair, pending approval by the UC Board. Bullock was involved in Smulian’s recruitment to UC and his training. In addition, one of Smulian’s research focuses is in histoplasmosis, a fungal infection that affects the lungs and is the same disease that Bullock studied throughout his career. “I know how much [Ward] loved UC’s College of Medicine, and it was important to him to make sure that basic science research in infectious diseases be supported,” Brooks says. “It is important to me that he be remembered for his generous contribution to this cause, both professionally and financially.”

Harold C. Schott Endowed Chair in Brain Tumor Molecular Therapeutics

UC has launched a comprehensive bench-to-bedside translational research and patient care initiative—the Brain Tumor Molecular Therapeutics Program—aimed at understanding the biological mechanisms of cancer’s spread to the brain and developing more effective ways to treat the condition. A total of $6.5 million—a $2 million gift from the Harold C. Schott Foundation and $4.5 million in additional funds from the UC College of Medicine and its departments of cancer and cell biology, internal medicine (hematology oncology division), neurosurgery and radiation oncology—has been committed to build the interdisciplinary translational research and patient care program.

The Harold C. Schott Foundation gift was made to establish an endowed chair of molecular therapeutics in brain tumors, creating a permanent source of funding for the program. The new molecular therapeutics program will allow UC to build a specialized research team that collaborates with existing multidisciplinary brain tumor clinicians and surgeons to address the problem of brain metastases through translational research and original clinical trials. The College of Medicine is currently recruiting for three new faculty positions to conduct laboratory and preclinical research studies aimed at understanding the biology of brain metastases. In addition, the molecular therapeutics program will provide a new patient support program that pairs patients recently treated for brain metastases with a mentor who has a similar diagnosis and age. For more, visit healthnews.uc.edu.

The UC Brain Tumor Molecular Therapeutics Program was launched with a $2 million gift from the Harold C. Schott Foundation and support from both the UC Cancer Institute and UC Neuroscience Institute. Pictured here at the announcement are (left to right): George Atweh, MD, director of the UC Cancer Institute; Olivier Rice, MD, PhD, director of experimental therapeutics at UC; John Tew, MD, clinical director of the UC Neuroscience Institute; Francie and Thomas Hiltz, trustees for the Harold C. Schott Foundation; and Ronald Warnick, MD, medical director of the UC Brain Tumor Center.

**FUNDINGS**

**April 2011**

**University of Cincinnati Academic Health Center**
Critical Care Specialists Team Up With Cardiologists

By Focusing on Priorities of Care Rather Than Hospital Needs, Interdisciplinary Team Enhances Patient Outcomes

By Katie Pence
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When the sickest patients are admitted to the hospital with potentially fatal heart conditions, cardiovascular intensive care unit (CVICU) staff and physicians are on hand to make sure everything is being done to help. But when other critical health issues arise, patients sometimes get moved to other intensive care units and away from the CVICU team that was there to help them from the beginning.

With this scenario in mind, cardiologists at U.C. Health University Hospital have teamed up with critical care physicians to create a collaborative CVICU team, improving patient outcomes and satisfaction.

Steven Lisco, MD, director of critical care in the department of anesthesiology and in the CVICU at U. C. Health University Hospital, says the benefit is simple: patient-focused, not hospital-focused, care.

“Patients get admitted to the CVICU because their primary problem is cardiac disease,” he says.

“With this collaboration, they’ll get all critical care needs met and still be able to stay in the unit where their admitting cardiologist is close at hand, rather than being transferred to another ICU with a whole new team and a different rounding cardiologist.”

Steven Lisco, MD

There is a genetic component to the illness, and it tends to run in families. Genes that are responsible for the production of collagen, an important protein that helps to glue tissues together, are susceptible to play a role.

“Soath’s vertebrae in her neck were unstable due to this condition and were believed to cause these headaches.”

Brad Tinkle, MD, PhD, a physician at Cincinnati Children’s Hospital Medical Center and a specialist in joint hypermobility syndrome, recommended a surgery to help fuse the vertebrae, and Soath says she notices an improvement in her neck pain as well as headaches. She was even able to find another job this January.

“There may be an additional surgery, but at least I know what the problem is,” she says. “I’ll also have to see what this means for my 6-year-old daughter, who also has joint hypermobility syndrome.”

South is the norm, according to a new study by Martin, Tinkle and colleagues published in the February 2011 edition of the journal Cephalalgia that showed people with this severe form of double jointedness have a greater chance of suffering from migraines.

“Preliminary studies suggested that headache disorders are more common in patients with joint hypermobility syndrome,” says Martin, who is not only a headache specialist at U.C. but also lives with the syndrome and experiences migraines. “We wanted to determine if the prevalence, frequency and disability of migraine differ between female patients with the syndrome and a control population.”

Using interviews and written questionnaires, researchers compared 28 women with the syndrome with 232 women from two primary care practices.

They found that 75 percent of patients with joint hypermobility syndrome also got migraines while only 43 percent suffered from migraines in the comparison group. After assessing age and gender differences in the groups, those with joint hypermobility had three times the risk of migraines.

Women in this group also experienced migraines nearly twice as many days each month and were more likely to experience visual disturbances called “aura” preceding the pain of a migraine attack.

“The results show that this common clinical disorder is strongly associated with an increased prevalence, frequency and disability of migraine in females,” he says. “The patients in the study were selected from a specialty connective tissue clinic so our next step is to test whether or not this is the same in less severe cases.”

“In bringing attention to this link, we hope that patients can be diagnosed earlier, leading to quicker treatments.”

Future Physicians Raise over $13K by Going Bald

In July, says Steven Lisco, MD, UC Health University Hospital will have a critical care attending physician within the hospital at all times, overseeing the numerous critical care teams on the floors.

“With someone in this role, we’ll be further increasing collaboration, communication and improving patient care,” he says.

In-House Critical Care Manager in the Works

In July, says Steven Lisco, MD, UC Health University Hospital will have a critical care attending physician within the hospital at all times, overseeing the numerous critical care teams on the floors.

“With someone in this role, we’ll be further increasing collaboration, communication and improving patient care,” he says.

University of Cincinnati Academic Health Center

FINDINGS April 2011