DONNING A TRADITION

The White Coat Ceremony continues to inspire

ALSO FEATURED: 200 YEARS YOUNG • PATHWAYS TO MEDICINE • IMBASCIANI INTERVIEW
FROM THE DEAN

In a world that is especially troubled right now, I wish you and your families peace and good health. I also hope that this issue of Vermont Medicine provides a modicum of hope, as you learn about and celebrate the positive impact of the Larner College of Medicine. The past few months have seen the fulfillment of our mission played out here on campus. In May we sent out more than 100 new physicians to begin their careers in Vermont and states across the nation. In August we welcomed 124 members of the medical school class of 2027—a highly qualified, talented, and diverse assembly of individuals recruited from among 8,500 applicants.

We also greeted both new and returning graduate students in our master’s and doctoral programs, as well as the returning medical classes of 2024–2026. Our Dean’s Celebration of Excellence in Research week in September allowed us to highlight and celebrate our many scientific discoveries and accomplishments and hear from upcoming and distinguished scientists representing an array of research disciplines.

In addition, on a gorgeous autumn day in October, the milestone of our White Coat Ceremony reminded us of the covenant we enter into upon joining the medical profession. That same weekend, I had the honor of welcoming back to campus hundreds of our dedicated graduates at Medical Reunion. Our College’s legacy was perfectly exemplified by celebrations on the very same day as the Class of 2027 receiving their white coats and members of the Class of 1973 donning the medallions that commemorate their Golden Reunion.

In keeping with our focus this year on the bicentennial of our first graduating class, this issue of Vermont Medicine features an article reflecting on the journey to our 200th anniversary and a vision for our future. You will find contributions to highlight and celebrate our many scientific discoveries and accomplishments and hear from upcoming and distinguished scientists representing an array of research disciplines.

There is a story about the legacy of Cynthia Forehand—who, after a decades-long career in neuroscience and more than 35 years of service as a biomedical scientist, educator, mentor, and leader at the University of Vermont, officially retired as of July 1, 2023. Please take a look at the feature about work by Sean Diehl, Ph.D., associate professor of microbiology and molecular genetics, and colleagues, that has contributed to the development of a newly approved antibody drug that offers protection against the respiratory syncytial virus (RSV).

Finally, we present an interview with a dear friend and indefatigable supporter of our College, Vito Imbasciani, M.D.’85, Ph.D., an erudite, decorated physician and public servant who embodies the principles of professionalism, cultural humility, kindness, and respect—core values here at the Larner College of Medicine.

With warmest regards for your continued health and safety,

RICHARD L. PAGE, M.D.
Dean
UVM Faculty Awards

The University of Vermont (UVM) recently announced the recipients of the 2023 Faculty Awards, and four Larner College of Medicine faculty were among the honorees. Mary Cushman, M.D., M.Sc., Stephen Higgins, Ph.D., and Gary Stein, Ph.D., have been recognized with the University Distinguished Professor Award—the highest academic honor that UVM bestows upon a faculty member. Holders of this title are recognized for having achieved international eminence within their respective fields of study and for the truly transformative nature of their contributions to advancing knowledge. On May 21, Cushman, Higgins, and Stein were officially recognized as University Distinguished Professors at the University Commencement Ceremony. All three of the new University Distinguished Professors are UVM Cancer Center members.

Sarah Heil, Ph.D., was named a 2023-24 University Scholar in the category of Basic and Applied Science. This award recognizes sustained excellence in research, creative, and scholarly activities as well as the encouragement of a climate of scholarship at UVM. Heil is being honored for her excellence in her field and her ability to foster academic achievement in others.

Celebrating Research

The University of Vermont and UVM Larner College of Medicine recently hosted the Dean’s Celebration of Excellence in Research, a weeklong celebration dedicated to showcasing the exceptional research endeavors of faculty, research fellows, and graduate students.

This year’s event series was an inspiring platform for academic discovery and collaboration and included a signature event each day, as well as an awards ceremony celebrating the outstanding dedication of researchers to advancing medicine and science. While all nominees demonstrated significant commitment to their work, a select few were honored for their exceptional contributions.

The College also hosted its first Research Rally. Featuring a slate of Larner and UVM experts, these Ted-style talks were designed to appeal to a broad audience—each segment lasted only seven minutes, giving the presenters a chance to prove their elevator-pitch skills. University of Vermont Provost and Senior Vice President Patricio Prelock, Ph.D., kicked off the event, and Senior Associate Dean for Research Kate Tracy, Ph.D., closed out the Research Rally with a talk of her own.

“Sharing and celebrating research is not just integral to our mission at the Larner College of Medicine; it’s the heartbeat of our academic community,” stated Dr. Tracy. “By showcasing our discoveries, we hope to inspire curiosity, foster innovation, and create a culture of continuous learning.”

UVM Commencement Weekend

The sun shone brightly all weekend on students, family, friends, faculty, and staff who gathered to celebrate both the next generation of biomedical scientists and health professionals, as well as the exceptional academic achievements of several Larner College of Medicine faculty, during the University of Vermont’s Commencement Weekend.

Larner community members figured prominently in three separate ceremonies during the weekend’s events. On Saturday, May 20, master’s degree and doctoral degree recipients were hooded at the Graduate College Ceremony in the Gutterson Fieldhouse. On Sunday, May 21, honorary degree and University Distinguished Professor recipients were recognized at the University Commencement Ceremony on the University Green, and more than one hundred of UVM’s newest medical degree recipients were honored at the Larner College of Medicine Ceremony later that afternoon in Ira Allen Chapel.

Class of 2023 graduate Cyrus Thoms-Walker, M.D., served as Student Marshal, and led his classmates into the ceremony, where Larner Dean Richard L. Page, M.D., delivered the first remarks. Praising the new physicians on the grace and professionalism with which they adapted to new learning modalities and upheaval during the pandemic, he said, “Class of 2023, you are the clearest indicators of better times ahead—you are the best promise for our future.”

The ceremony also featured a moving vocal performance of Vermont’s state song, “These Green Mountains,” by Class of 2023 graduates Michael Kolbas Lowler, M.D., and Noami Kolbis Lowler, M.D., remarks from Stephen Lefrak, M.D.’90 and chief medical officer, president, and chief operating officer of the University of Vermont Medical Center, and a keynote address by Gaurab Basu, M.D., M.P.H., 2020 Larner medical alumn and founding co-director of the Cambridge Health Alliance Center for Health Equity Education and Advocacy.
ARTICLE 1: EAT, SLEEP, CONSOLE: CLINICAL TRIAL IDENTIFIES MORE EFFECTIVE WAY TO CARE FOR OPIOID-EXPOSED NEWBORNS

Research led by Leslie Young, M.D., demonstrates that the “Eat, Sleep, Console” care approach (ESC) for newborns exposed to opioids in the womb results in shorter hospital stays and decreased need for morphine and methadone. Funded by the National Institutes of Health, the trial examined the impact of ESC, which emphasizes parent involvement, skin-to-skin contact, breastfeeding, rocking, and a calm environment as a first-line treatment. The findings are published in New England Journal of Medicine.

ARTICLE 2: IMPROVING DIVERSITY IN HEART DISEASE CLINICAL RESEARCH

Black adults in the U.S. experience a disproportionate burden of heart disease but are typically underrepresented in cardiovascular disease-related clinical trials, a problem that could compromise their health outcomes. A new study led by Tim Plante, M.D., M.H.S., assistant professor in the Division of General Internal Medicine, is exploring whether inviting Black people to help design digital recruitment approaches will better engage Black adults and increase participation in clinical trials.

ARTICLE 3: LYME DISEASE VACCINE TRIAL LAUNCHES

Anyone who spends time outdoors can be at risk for Lyme disease. This common illness is caused by bacteria found in ticks that live in wooded areas or fields with tall grass and brush. There are currently no approved vaccines available to prevent Lyme disease in humans, but one may be on the way. UVM’s Vaccine Testing Center recently launched a clinical study to investigate the efficacy, safety, and immunogenicity of a Lyme vaccine. Kristin Pierce, M.D., an assistant professor in the Division of General Internal Medicine, is exploring whether a Lyme vaccine can help prevent Lyme disease in Black adults and increase participation in clinical trials.

CORRECTION

In the 2023 Spring Vermont Medicine, page 11, there was an error in the Class of 2023 Residency Match List. We apologize for any confusion. The following students should have been listed under “Internal Medicine” not “General Surgery.”

- Grace Eisenbiegler, Helen Gandler, Luke Hallgarth, Tess Hickey, Liam John, Michael Lawler, Kearac Lynn, Alexandra Novelli, Samantha Dinkar
- Ahuja, Raj Aurora, Niveditha Badrinarayanan, Jacob Bernknopf, William Brown, Jett Choquette, Lauren Coritt, Kevin DiBona, confusions. The following students should have been listed under “Internal Medicine” not “General Surgery.”

ARTICLE 4: THE ROADMAP TO BUILDING DIGITAL TWINS

Recent research by Gery An, M.D., and colleagues centered on developing digital twins of the human immune system. An is a coauthor of the article, “Building digital twins of the human immune system: Toward a Roadmap.” The roadmap involves taking multi-scale biological data—at the body, organ, tissue, cellular, and molecular levels—and entering that information into a digital model that conducts data integration, analysis, and modeling, and performs computer-based simulations, which can then provide personalized diagnoses, prognoses, and optimal therapies.

ARTICLE 5: MORE EFFECTIVE WAY TO CARE FOR OPIOID-EXPOSED NEWBORNS

When Cliff Reilly graduates from the Larner College of Medicine in May, he envisions leaving Vermont—temporarily—to pursue an emergency medicine residency, perhaps followed by fellowship training. His dream, however, includes returning to his beloved Green Mountain State to settle down and practice emergency medicine. As the inaugural recipient of the David and Eleanor Ignat Medical Student Incentive Scholarship/Loan Forgiveness program, that dream is within Reilly’s grasp. The incentive scholarship will forgive Reilly’s medical school loans, if he returns to Vermont within a year following his residency and fellowship programs. Endowed by David and Eleanor Ignat, longtime philanthropic supporters of the University of Vermont, the incentive aims to strengthen the physician workforce pipeline into Vermont as the state competes nationally and globally to attract and retain an appropriate and geographically distributed physician workforce.

An avid backcountry skier, canoeist, rock climber, and farm-to-table enthusiast, Reilly and his fiancée spend as much time as possible exploring Vermont’s forest, slopes, waterways, and farmers’ markets. The couple feels at home in Vermont’s rural regions, including Chester, where he enjoyed visiting his grandparents, her Middlebury alma mater, and the Norwich community where the couple lived before moving to Burlington. During Reilly’s third year of medical school, he participated in a longitudinal clerkship at the Central Vermont Medical Center primary care clinic in Waterbury, where he built relationships with patients and their families. This is the lifestyle Reilly wants for himself, and for his future patients.

“I would love to build a life here and raise my future family in Vermont. It’s a great state and has a wonderful patient population,” Reilly said. “Seeing families multiple times, and getting to know the moms, dads, and kids was a nice experience.”

In rural communities nationwide, lower rates of pay make it challenging to recruit young physicians. In Vermont, an aging population has increased the demand for health care providers, and, as older physicians retire, Vermont’s physician shortage continues to rise. “Physician workforce shortages are well-documented and chronic, especially in rural areas,” said Elizabeth Cote, director of the Larner College of Medicine Office of Primary Care and Area Health Education Centers (AHEC) Program, established in 1996 to improve health care access through workforce development. “Philanthropy can have a tremendous impact on workforce development and provides the greatest opportunity to innovate.”

Offering to pay the medical school tuition for students who commit to practice in Vermont after their medical training is one strategy to attract more young doctors to the state. “The Ignat family’s gift removes barriers for me, and other doctors, to come back to practice in Vermont,” Reilly said. “I have a preference toward rural emergency departments and smaller community hospitals. Having the option to have my loans forgiven makes that decision easier.”

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“I would love to build a life here and raise my future family in Vermont. It’s a great state and has a wonderful patient population,” Reilly said. “Seeing families multiple times, and getting to know the moms, dads, and kids was a nice experience.”
Dixon, a University Scholar, was recognized by UVM as a recipient of the Asthma and Allergy Community Award from the New England Chapter of the Asthma and Allergy Foundation of America in 2021. In 2022 she was recognized by UVM as the Larner College of Medicine Research Laureate. Her contributions to the field of Pulmonary Medicine, including serving as the right person to lead our largest department, stated UVM Larner College of Medicine Dean Richard L. Page, M.D., as the Larner College of Medicine’s goal: to create a balanced system while remaining mindful of the imbalance while remaining mindful of the lack of minority representation in medical schools and in our profession.”

A graduate of the University of Rochester School of Medicine & Dentistry, Williams completed a family medicine residency at the UVM Medical Center and joined the UVM Faculty in 2016. Based at the UVM Health Network’s Family Medicine-Primary Care office in Colchester, Williams oversees many facets of patient care, including preventive care and end-of-life care. Her clinical expertise also extends to knee, shoulder, and hip injections, as well as treatment of skin conditions.

In addition, Williams is a proud champion of diversity in practice. He continues to serve as the co-chair for the Diversity, Equity, and Inclusion Committee.

“As an African American physician, I am well aware of the data regarding the lack of minority representation in medical schools,” Williams said. “As assistant dean for admissions, I seek to challenge this imbalance while remaining mindful of the Larner College of Medicine’s goal: to create a thoughtful, diverse student body. This role affords me the opportunity to directly support our mission of improving medical student diversity and retention.”

NEWEST STUDENTS RECEIVE WHITE COATS

Amid the autumn foliage on October 13, medical students in the Class of 2027 gathered at UVM’s historic Ira Allen Chapel to receive their first white coats. This rite of passage officially welcomes students into the medical profession and emphasizes the responsibility they carry.

Senior Associate Dean for Medical Education, Christa Zehle, M.D., ‘99, welcomed the students along with the audience of nearly 600 people, including the students’ families, loved ones, and mentors, Larner faculty and staff. Dean Richard Page, M.D., M.P.H., professor of emergency medicine, UVM Medical Center President and Chief Operating Officer, and University Distinguished Professor of Medicine Mary Cushman, M.D., ‘89, M.Sc., president of the Larner College of Medicine Alumni Association, shared their reflections.

“As your white coat is a sign to the world that you are a healer and are committed to making people’s lives better. Wear it proudly but humble,” advised Leffler from the podium. “As a Fellows of the American Thoracic Society and currently chairs the Pulmonary Examination Committee for the American Board of Internal Medicine and serves on the Scientific Advisory Committee and Board of Directors for the American Lung Association.

Dixon has received a number of awards and recognitions, including the UVM Health Network Medical Group’s Senior Investigator of the Year award in 2016, the American Thoracic Society Distinguished Achievement Award in 2021, and recognition as the Larner College of Medicine Research Laureate. Her contributions to asthma and allergy research were acknowledged with the Champion of the Asthma & Allergy Community Award from the New England Chapter of the Asthma and Allergy Foundation of America in 2021. In 2022 she was recognized by UVM as a University Scholar.
I'm not so different
from Lionel Messi
and neither are you

In the United States, 16,783,000 viewers watched the 2022 World Cup final. That number doesn't include me, who inconspicuously watched the match over the shoulder of a stranger sitting one row ahead of me on a flight—a traveler who had the means to purchase the plane’s Wi-Fi, while I, a student surviving on loans, do not. So, let’s set the record straight and revise the number to 16,783,001. I became interested in the dynamic between mega stars Lionel Messi of Argentina and Kylian Mbappe of France. They had just faced off in a heated and emotionally exhausting World Cup final. That number doesn’t include me, who had the means to purchase the plane’s Wi-Fi, while I, a student surviving on loans, do not.

Tensions were so high, I almost forgot that Messi and Mbappe play exponentially more games as teammates than opponents! For those who don’t know, Messi (perhaps the greatest of all time) and Mbappe (who has the potential to eclipse Messi’s greatness) are teammates on the Paris Saint-Germain football club team.

This switch from teammates to rivals had me thinking a lot about identity. For most of his professional life, Messi wears a club team jersey. He was a player for Paris Saint-Germain, and now Inter Miami, but for one month every four years, Messi dons an Argentinian jersey at the World Cup. And with that change of jerseys, Messi becomes a different player representing his country, Argentina. He must adjust to become National Champions.

I do wear different “jerseys,” each with its own motivations and reasons. When I assume a particular identity, the others become less prominent. Like Messi, my priorities and mannerisms change with the seasons.

The Medical Student. I go to class, come home, and study more, which makes me feel like my whole life is medical school. This can be demoralizing, especially when “The Medical Student” is by far the most mentally and emotionally taxing of my identities. When I feel particularly discouraged, I reflect on what I have accomplished in my life and the people who love me with or without medical school. I am defined, not by my exam scores, but by all the other important things that cannot be graded. Don't get me wrong, I love being “The Medical Student,” and I am extremely proud of where I am now. But look at all the other lives I have lived!

I would call on my colleagues to evaluate who they are beyond whatever they perceive to be their primary identity. How do your conversation topics change when you’re speaking to your parents compared to when you're talking to other medical students? Do your friends call you a funny nickname that no one else in the world would recognize? It's a beautiful privilege and skill to transition from one identity to another, to subtly modify your mannerisms and motivations to fit where you are needed at any given moment. One day, you will be able to switch languages to accommodate a non-native English speaker or create a bond with a patient over a shared love of guitar. The jerseys I wear are not the same as yours, which is exactly what makes medicine beautiful. This diversity of identities makes us more interesting and unique as individuals and allows us to connect with those who don’t wear our jersey. This adaptability makes us malleable and resilient as future physicians.

Often, it’s hard to realize that I am more than “The Medical Student.” I hand off the class, come home, and study more, which makes me feel like my whole life is medical school. This can be demoralizing, especially when “The Medical Student” is by far the most mentally and emotionally taxing of my identities. When I feel particularly discouraged, I reflect on what I have accomplished in my life and the people who love me with or without medical school. I am defined, not by my exam scores, but by all the other important things that cannot be graded. Don't get me wrong, I love being “The Medical Student,” and I am extremely proud of where I am now. But look at all the other lives I have lived!

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The Legacy of Cynthia Forehand: Research, Education, Leadership

As a young math and science whiz, first-generation college student Cynthia Forehand admits she felt unsure of how the subjects she loved could translate into a career. On July 1, 2023, Forehand retired from the University of Vermont after a decades-long career in neuroscience and more than 35 years of service as a biomedicai scientist, educator, mentor, and leader.

Forehand’s scholarly journey began at the University of Nebraska-Lincoln as a zoology major, where she conducted research and coauthored her first publication, on thermoregulation in Arctic fish. For graduate school, she switched to neurobiology and earned a doctoral degree at the University of North Carolina (UNC) studying spinal cord development and regeneration. She secured a postdoctoral position at Washington University in St. Louis, investigating innervation patterns in autonomic neurons.

Forehand’s work caught the attention of Rodney Parsons, Ph.D., professor of molecular medicine at the University of Vermont (UVM) LARNER COLLEGE OF MEDICINE, and he recruited Forehand for a faculty position in 1987 and tasked her with directing a neuroscience course for first-year medical students.

“Forehand describes herself as ‘an early adopter’ of the concept of integrating a curriculum around systems instead of disciplinary courses. In 1996 she joined the Curriculum Task Force working to transform the old Vermont Generalist Curriculum into the Vermont Integrated Curriculum (VIC) for medical students. She served as VIC Foundations level director from 2000 to 2011. In the lab, Forehand’s research sought to understand how connections in the nervous system are made and altered by disease and injury. She examined mechanisms that control how neuron connections develop and regenerate, focusing on the spinal cord and autonomic nervous system.”

Forehand has advised five postdoctoral fellows/research associates, served as dissertation advisor for four doctoral students, served on 19 dissertation committees, and supervised research rotations for 13 doctoral students. She has been an advisor for 10 undergraduate Honors College theses and a research supervisor for more than 20 additional UVM undergraduates and six summer research students from outside UVM.

“The flash of recognition in a student’s eye when a difficult concept crystallizes for them” brings Forehand great joy, mentorship, explains Forehand, is that it fosters independence—a key achievement in any scientist’s career.

Forehand was actively involved in UVM’s Faculty Senate and in 2010 became associate dean, then dean in 2014, of the Graduate College. Her contributions include achieving a 25 percent increase in graduate student enrollment at UVM—with a 186 percent increase in graduate students of color—as well as increases in tuition assistance and benefits for graduate students and postgraduate learners.

In January 2023, the Larner Teaching Academy honored Forehand with the Frederick C. Morin III, M.D., Educational Leadership Award, which recognizes an exemplary and sustained record of service in educational leadership, committee service, and administration.

Nearly 300 academic medicine faculty, residents, fellows, and students from 55 Association of American Medical Colleges-affiliated institutions throughout the northeastern U.S. gathered at UVM April 15–13 for the Northeast Group on Educational Affairs (NEGEA) annual conference. This was UVM’s first time hosting the annual event since 2010 and the NEGEA’s first in-person gathering since 2019. UVM was slated to host the 2020 conference, but plans were altered due to the pandemic.

The conference provided an opportunity to showcase the university’s world-class education and research facilities and adjacent teaching hospital while invigorating medical educators with opportunities to connect with colleagues, share innovations, and obtain resources for training the next generation of physicians.

“This is the premier medical education conference in our region, for educators across the continuum of medical education,” said conference host chair Kathryn Huggert, Ph.D., assistant dean for medical student education and director of The Teaching Academy. “It was on honor for Larner to host this conference, and our colleagues were grateful to meet in person after three years of virtual meetings.”

Plenary speaker Joseph A. Tyndall, M.D., M.P.H., professor and dean, Morehouse School of Medicine, addressed the theme, “In the blink of an eye: A common concept of the pandemic’s impact on medical education.”

Session topics included incorporating diversity, equity, and inclusion in the curriculum, using simulation technology for teaching, and leveraging students’ personal well-being to assist patients in achieving health goals. According to Huggert, 52 percent of attendees were students, residents, or fellows.

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NEGEA is a regional group of the Association of American Medical Colleges, serving member institutions in Connecticut, Maine, Massachusetts, New Hampshire, New York, Pennsylvania, and Vermont.
Sean Diehl, Ph.D., investigates antibodies to respiratory syncytial virus, dengue virus, Zika virus, norovirus, and other pathogens in his research in UVM’s Vaccine Testing Center.

IN 2022, ABOUT ONE IN 500 BABIES ages six months and younger was hospitalized due to respiratory syncytial virus (RSV). An upper respiratory virus marked by cough and difficult breathing, RSV is the second leading cause of infant mortality in the U.S. This fall, the Centers for Disease Control and Prevention approved the first RSV vaccine to protect infants from severe RSV illness. Sean Diehl, Ph.D., associate professor of microbiology and molecular genetics at the University of Vermont, is a co-inventor of the patented technology that led to this preventative treatment—a process that began through research started in 2003.

“Previously, there had been failed or dangerous RSV vaccines,” said Diehl, who was working as a postdoctoral fellow with immunology research pioneer Hergen Spits, Ph.D., at the University of Amsterdam in the Netherlands from 2003-2008. Their team’s research led to the development of a method for discovering antibodies against infectious diseases.

When they began their research 20 years ago, Diehl and colleagues understood that after age two, people recover from RSV and have antibodies in their immune system. By adulthood, all healthy adults have antibodies against RSV. “Antibodies are like magnets that attach to viruses and render them unable to replicate, sort of like a lock and key specific to one virus,” Diehl explained.

The researchers determined that it might be possible to harvest antibodies from adults. They recruited a healthy adult daycare worker and drew samples of their blood, from which they extracted B cells, a type of white blood cell that produces antibodies. B cells are not stable outside of the body, so Diehl and colleagues introduced a process to trick the cells into behaving like they were back in the immune system’s germinal centers, where the B cell activates and divides rapidly.

After developing their unique process for growing B cells, the researchers determined that they could take cells from any adult and use high-throughput sequencing technology to screen for various cellular activities. This process could be used to “immortalize” B cells—manipulating them so that they reproduce in culture for up to a year, which was “enough time to find good antibodies,” explained Diehl. “With this technology, we were able to grow lots of them and find an antibody that was really good at blocking RSV.”

The antibody drug, known as Beyfortus (nirsevimab), will be incorporated into the vaccination schedule for infants at an estimated cost of $600 for a single long-acting dose. It will be included in the CDC’s federally funded Vaccines for Children program for winter 2023.
The Larner College of Medicine recently celebrated the 200th anniversary of its first class of medical graduates. As the seventh oldest medical school in the United States, it has witnessed significant changes not only in medicine and science but also in the dynamics of America and the world. BY ANGELA FERRANTE
It wasn’t until the mid-nineteenth century that UVM, home to the Larner College of Medicine, opened its doors to any person of color. The College’s history, like that of the nation, bears the scar of a tumultuous past. While the earliest female UVM student walked to class in the spring of 1872, women were not admitted to medical school here until 1920. While the history of the Larner College of Medicine includes such jarring disparities, it is also punctuated by remarkable achievements and advancements; Thaddeus Stahbulo, a survivor of six Nazi death camps and author of the book "Siedem Piekark (Seven Hells)," a detailed memoir of his life during the Holocaust, entered the class of 1953 at what was then known as the UVM College of Medicine. In 1962, during the height of America’s Civil Rights Movement and only a mere two years after a court-ordered integration in New Orleans, Louisiana admitted Ruby Bridges—the first African American child to attend an all-white elementary school in the South—into William Frantz Elementary School, J.W. Clemons, Ph.D., M.D., emeritus professor of pathology, joined the College as the second African American faculty member. An invaluable member of the community, Clemons taught and conducted research at UVM for more than 30 years.

Embracing Change for Two Centuries

While cherishing its traditions and history, Larner is not chained to the past, but is an institution that embraces change as an essential part of its identity to advance its mission. The College understands that health care is ever-evolving, with advances in medical science, patient shifting demographics and changing societal norms to name but three dynamics continuously moving the goalposts. To excel in this landscape, Larner is committed to innovation.

In a time of rapid change, Larner is determined to develop alongside the communities it serves, recognizing the importance of diversity in health care. The institution aims to reflect the changing demographics of its patient populations, understanding that inclusivity is a top priority that ultimately improves patient care and outcomes.

A Gift Fueling Innovation

A generous gift in 2016 from Dr. Robert Larner, a Class of 1942 graduate, and his wife, Helen, accelerated the College’s transformation and enabled investments in cutting-edge technology, human capital, infrastructure, teaching methods, and curriculum. Their donation provided the College with the means to launch several key initiatives, including the digitization of the curriculum, the creation of innovative classrooms to facilitate active learning, the establishment of an advanced simulation center for clinical skill development, and the recruitment of an endowed Professor of Medical Education to lead the Teaching Academy. Their philanthropy has empowered countless aspiring physicians and biomedical researchers, emphasizing the transformative power of generosity.

Moving Forward

The Larner College of Medicine’s investments in education have produced impressive outcomes. Vermont ranks first in the nation for active patient care primary care physicians per capita and fifth in all physicians per capita, according to the AAMC State Physician Workforce Data Book (2019).

Admission to the Larner College of Medicine is highly selective. In the class of 2027, only 124 students were enrolled from a pool of 8,569 applicants, ensuring that the institution continues to attract the best and brightest minds.

As the Larner College of Medicine concludes its bicentennial celebration, it not only commemorates a rich history but also embraces a dynamic and evolving future. This journey carries the wisdom of the past and in a health care landscape marked by continuous transformation, the College has charted a visionary path forward, captured in four strategic priorities. They form the foundations upon which a future defined by clinical excellence, innovation in education, pioneering research, and unwavering community health will be built.

Clinical Excellence

The Larner College of Medicine prioritizes clinical excellence through partnerships and collaborations with the UVM Health Network. The College integrates research and education into network departments, focusing on public health, population health, and value-based care. The HEALthy Brain and Child Development Study collects vital brain imaging data, focusing on public health, population health, and value-based care.

Clinical Collaboration

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UVM LARNER COLLEGE OF MEDICINE

Embracing Diversity, Equity and Inclusion

The Larner College of Medicine, the University of Vermont, and the UVM Health Network are deeply committed to diversity, equity, and inclusion (DEI). DEI is an integral part of their core values, with programs designed to support and retain students from diverse backgrounds and establish connections with diverse communities.

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Commitment to the Community

Larner’s community ties underscore its long-standing commitment to Vermont and New England’s well-being, drawing from the University of Vermont’s land-grant legacy. The College prioritizes accessible health care for all socioeconomic groups, using institutional knowledge to support local communities.

The University of Vermont Cancer Center demonstrates its commitment through initiatives like the annual Women’s Health and Cancer Conference, a free educational event promoting cancer prevention, detection, treatment, and survivorship. Additionally, the Cancer Center provides free skin cancer checks at public events and collaborates with local partners, such as the Lake Monsters, a summer baseball team, to promote sun safety.

Larner’s focus on improving healthcare delivery includes strengthening partnerships with the UVM Health Network and advocating for policies that advance public health and health equity. The College’s dedication to addressing social conditions, particularly in rural and racial health disparities, is ingrained throughout the institution, making community engagement more than just a mission; it’s a profound calling.

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A Continuing Journey

Tackling the biomedical challenges of the future will continue to drive the College forward to fulfill its mission. As the Larner College of Medicine embarks on a third century of clinical service, education and research, it remains committed to innovation shaping its direction; a future channeled from the past, filled with enthusiasm, ingenuity, resilience and determination for the journey ahead. ■
Student-led programs expand the pool of medical school applicants underrepresented in the profession.

BY JANET ESSMAN FRANZ

Looking up in a majority Hispanic neighborhood in the Bronx, Aissata Samake saw no Latinx or Black physicians, nor any who understood her ethnicity and traditions. Samake, a woman of color, intends to go to medical school, but she admits to past feelings of doubt about her career choice. Having mentors who look like her has fostered her decision, she says. “A Black woman in medicine motivated me to keep proceeding on the path of medicine, even when I felt it was too hard,” Samake said, recalling an influential cell biology class professor. “It’s important that we have people of color supporting other, younger people of color, saying ‘you can do this, because I did it.’”

Samake was one of 28 people participating in the third annual Look at Larner event at the University of Vermont September 7–9, 2023. This medical student-led outreach program aims to serve aspiring medical students from populations underrepresented in the profession of medicine, to help them envision their experience in medical school. Participants are in various phases of the medical admissions cycle, from undergraduate pre-med coursework, to preparing for the Medical College Admissions Test, to submitting applications. They interact with current medical students who are from backgrounds underrepresented in medicine, meet medical faculty, attend classes, receive admissions advice, and explore living in the Burlington area. First- through third-year medical students open their homes to host attendees.

The event allows participants “to see themselves as part of our community, and practicing medicine in Vermont,” said Larner Class of 2026 medical student Shani Legore, one of three co-leaders of Look at Larner 2023 along with classmate Shrey Patel and Aina Rattu. Legore, who identifies as Afro-Caribbean, was a participant in the inaugural Look at Larner in 2021. At that time, she was in the process of applying to medical schools and “feeling frustrated with the cycle,” she said. Look at Larner offered support and direction she needed to complete the process and put her on the path to UVM. “I felt like I could see myself participating in active learning sessions, and I would be heard and seen. My vision of myself as a medical student became clearer.”

Look at Larner is one of several programs designed to strengthen the pathway of students attending medical school for students from populations underrepresented in the profession of medicine. The Association of American Medical Colleges defines Underrepresented in Medicine (URiM) as racial and ethnic populations that are underrepresented in the medical profession relative to their numbers in the general population. Larner College of Medicine expands this definition to include sexual and gender minorities, those identifying as transgender or non-binary, and individuals from financially disadvantaged backgrounds.

A similar program, URiM Pathway to Pediatrics, focuses on undergraduate students from underrepresented groups considering careers in pediatric medicine. Created by Class of 2024 medical students, this one-day event includes hands-on rotations in UVM’s Clinical Simulation Laboratory, with interactive simulations to practice colonoscopy, laparoscopy, and point-of-care ultrasound skills, care for a newborn baby, treat a child in respiratory distress, understand vital signs, and perform lumbar puncture.

Current students guide participants through sessions, provide advice for pre-med coursework, and answer questions about applying to medical school.

“Participants gain so much from hearing stories from those who are just a few steps farther along on their journey and how they overcame various challenges to get where they are now,” said L. E. Faricy, M.D., assistant professor of pediatrics, who serves as faculty organizer.

Pathways to Pediatrics also includes a “Clinical Mystery Case” session led by Lewis First, M.D., M.S., professor and chair of the Department of Pediatrics. The department offers Pathways in Pediatric Education, a year-long preceptorship for interested pre-medical students from URiM backgrounds to continue their engagement with pediatric faculty. “Being able to introduce undergraduate college students who self-identify as under-represented to the field of child health is a meaningful experience for all involved. Many of these students stay in touch with people they met from our department, potentially helping to build a diverse pathway for future pediatricians and child health professionals,” First said.

College graduates from URiM populations may be eligible for the Dean’s Medical Scholarship, which annually supports two students to participate in a 30-credit master’s in medical science program, designed to foster aspiring medical students in becoming stronger applicants. These students have completed all medical school admissions requirements but may need personalized advising to ensure success. Participants take graduate-level courses that parallel the Foundations Level curriculum, with option to complete the 30-credit program in person or online. Scholarship recipients are guaranteed admission to Larner if they maintain a minimum 3.0 GPA.

The Visiting Scholars Student Elective Scholarship Program is a pathway to residency program providing scholarships for visiting fourth-year medical students from URiM backgrounds to attend a multi-week elective rotation at Larner and participate in a range of cases at UVM Medical Center, mentored by faculty. The $3,500 stipend supports scholars’ travel and housing. Currently offered to students interested in matching into emergency medicine or orthopedics, the scholarship aims to increase awareness of training opportunities in these fields and encourage students from diverse backgrounds to apply for residency at UVM Medical Center.

For Shani Legore, the personal connections she made during Look at Larner were the major reason she chose to attend UVM, and the experience inspired her to share her passions for mentorship as a Look at Larner leader. “As someone who was pulled up, I want to help pull others up as well, especially those who are from under-represented in medicine and minority backgrounds,” she said. “If I can help give opportunities to those who identify as such and help them get a foot in the door, I feel I will be doing my life’s work.”

“Being able to introduce undergraduate college students who self-identify as under-represented to the field of child health is a meaningful experience for all involved.” – LEWIS FIRST, M.D., M.S.
I want to apologize
THUYMY-MICHELLE NGUYEN
Class of 2026, She/They
Katherine Walsh, M.D., PCR Advisor

I want to apologize
At this intersection, you are dazed
The treatment from your fall gained you a new knee
I ask for your story but
At this intersection, your words elude you
What only escapes instead is
“You speak really good English”

I want to apologize
We are only meeting in passing
The impact of your words run deeper than our interaction
“You speak really good English”
I used to wear that with pride.
By age seven, I chased this sensation—
Acceptance by exception.

I want to apologize
You will heal from this juncture
But I can’t help to think
At age sixteen, a white woman screaming
“Speak English or leave!”
My mom was just asking.
What it was I wanted for dinner

How was my mother not shaking?
Being told off caused by her native communication
How did I not see
“You speak really good English”
Was an affront to our family?
It brought tears to my mother’s eyes—
Another way to lose her old tale
I want to apologize
My life has always been defined by red. I remember the red hamper when I was young. I remember being dropped out of it and hitting my head. And then I don’t remember. My world is now on fire. Yellow and crimson flames lick at the house I grew up in, the only home I had known until this point. The nightmares about the heat and smoke have not stopped, even 50 years later. I have been running from the fire my whole life, and now my son runs toward it, braver than I will ever be. My children astonish me every day with their strength, despite how they grew up. I stayed with their mother longer than I should have, longer than I could have. Sickness was no excuse for the searing abuse hurled at my children. I stayed to protect them. Farry, red anger fills me now. This fire is different from what keeps me from what I love doing most in this world. The rush of pinning my opponent to the mat is unlike any other. Feeling the tension of a joint as I twist it, almost to the breaking point. But the pain. Every joint, every muscle aching, keeping me from my passion. I clutch at my chest, the burning now inside of me. Ruby blood pumps through my arteries, blocked from where needed most. I can leave soon and will continue my scarlet-tinged life. But soon I will be defined by blues, browns, and greens. I will go home to my farm and my animals and my plants. And no more red.
Summer Scholars:

Medical Students Dive into Research

By Janet Essman Franz

Khadija Moussadek
Avery Campbell
Tyler Hastings
Muhammad Haaris Zeb
Wendy Memishian
Susanna Schuler
Khadija Moussadek
Health Care Provider Education: Preventing Suicide in Adolescents

In 2019, Khadija Moussadek lost a close friend to suicide. Although he already had a history of mental illness, just before he died, I went to her family’s house, and her mother told me her friend had just seen the pediatrician. The pediatrician said, “How did I miss this?” said Moussadek, recalling a statistic she had seen that one-third of those who die by suicide had seen a physician in the month immediately preceding their death. “That stuck with me. I thought, we have to do better.”

Moussadek’s project aims to help physicians prevent suicide by identifying and intervening in patients’ self-harming behavior, which is an upstream response to suffering. Self-harming behaviors can include intentional self-poisoning, cutting, and burning. While mental health professionals are typically trained to identify these behaviors, other health care professionals may not be prepared, Moussadek said.

To address these deficits, Moussadek developed a learning module with a screening tool providers can use to identify self-harming behaviors and designed a script for broaching a potentially difficult conversation with a patient suspected of expressing self-harming behaviors. It also includes clinical scenarios where self-harming and instructional quizzes that assess providers’ preparedness for recognizing suicidal ideation. After piloting the toolkit with local primary care providers, Moussadek devised a dissemination plan for statewide distribution.

Avery Campbell
Hepatocyte Growth Factor and Cognitive Impairment

Growing up in North Carolina, Avery Campbell knew people affected by stroke and cognitive impairment. The southeastern U.S. is known as the ‘stroke belt’ because of the high incidence stroke, related cardiovascular disease and cognitive impairment. For Campbell, this is personal: His maternal grandfather suffered a stroke, and both paternal grandparents had severe dementia.

“It was devastating to our family,” Campbell said, “and stories like mine will only become more common. The prevalence of cognitive impairment is expected to balloon with increasing life expectancy, and it disproportionately affects minority communities.”

For his project, Campbell investigated cognitive impairment among Black versus White adults, among pre- versus post-menopausal women, and among men younger than versus older than age 50. He focused on the hepatocyte growth factor (HGF), which plays a role in organ and vascular repair after injury.

HGF level correlates with inflammatory conditions like vascular disease, and higher HGF levels are associated with stroke risk.

Campbell examined data from an ongoing national study, Reasons for Geographic and Racial Differences in Stroke (REGARDS), which follows more than 30,000 Americans to understand why Americans have higher rates of cardiovascular diseases affecting brain health. Campbell used HGF measurements in a nested case-control study of 1000 REGARDS participants, half with cognitive impairments and half without. He hypothesized that the association of HGF with cognitive impairment is greater in Black than White adults, greater among younger than older men, and greater in premenopausal versus postmenopausal women. Using the REGARDS data, he created regression models to test each hypothesis.

“Identifying and characterizing the relationship between HGF and cognitive impairment is an important opportunity to explore the ability in prevention, prognostication, and treatment,” Campbell said.

Tyler Hastings
Examining Challenges, Eluding Perspectives on Mental Health Emergency Care in Pre-Hospital Settings

Before attending medical school, Tyler Hastings worked as an advanced emergency medical technician in Vermont. It disturbed him that so many patients he transported to the hospital were experiencing mental illness events that could have been resolved on-site, rather than in the emergency department (ED). “Mental illness is on the rise everywhere, among all age groups,” Hastings said. “People see a family member or friend experiencing an episode and they don’t know what to do, so they call 9-1-1. The ambulance can’t just leave the person there, so we tax them to the ED. It’s straining for the patient, the family, and the ED staff who may have seen the same patient previously for the same thing.”

The costs of ambulance transport and ED care create additional burdens for patients and families. To help change this pattern, Hastings evaluated training of emergency medical technicians (EMTs) and paramedics in Vermont for encounters involving patients with mental illness and discussed the issue with area EMT and paramedics.

He developed a training module for EMTs and paramedics in Vermont to familiarize them with the signs and symptoms of mental health crises, how to approach and assess a patient, and provide initial intervention. Hastings worked with Vermont Emergency Medical Services (EMS) Office to recruit EMTs and paramedics for interviews. He developed questions to assess whether they feel their training prepared them to care for patients with psychological conditions. He looked for gaps in scope and ability of EMTs and paramedics, and presented his findings to the Vermont EMS Office.

His goal is to catalyze change locally, and spark interest in prevention, treatment, and rethinking the approach to mental illness in the pre-hospital setting.

Wendy Memishian
Cerebral Blood Flow Autoregulation in Adult Offspring from Preeclamptic Mothers and Effects of Sevoflurane

Wendy Memishian feels at home in a laboratory with her research on cerebral blood flow, animals. While an undergraduate biology major at Bates College, Memishian investigated the effects of sevoflurane on cerebral blood flow in embryonic quail, measuring changes in their brain while she adjusted oxygen levels inside egg incubators. Post-graduation, she conducted cancer research with mice. Now she wants to know more about brain health, using animals and human subjects.

For her project, Memishian investigated cerebral blood flow autoregulation—the ability of brain vessels to maintain blood flow over a range of blood pressures—during surgery under a commonly used anesthetic called sevoflurane.

Preeclampsia is a serious hypertensive disorder of pregnancy with long-term cardiovascular effects for mothers and offspring across their lifespan, including organ damage and increased risk of stroke. Preeclampsia pregnancies affect one in seven hospital births, representing 16 percent of human births. It is known that sevoflurane affects cerebral blood flow autoregulation. In most people this is easy to control, but in adults born from preeclamptic mothers, sevoflurane can cause cerebrovascular dysfunction that persists adulthood. The impacts are poorly understood.

To examine the impacts, Memishian performed surgery on adult rats born from preeclamptic mothers. She used sevoflurane anesthesia and provided ventilation to maintain a normal oxygen input and carbon dioxide output. As she administered a drug to increase blood pressure, she monitored blood pressure and oxygen levels. Memishian wrapped up her project by comparing brain blood flow between preeclamptic and non-preeclamptic offspring, writing a report, and preparing a poster for a presentation. She’s working toward getting her research published and presenting at a national conference.

Muhammad Haaris Zeb
Supporting Culturally Appropriate Assessment and Response to Mental Health Challenges in Afghan Refugees Populations in Vermont

Mental health and suicide are difficult topics for many people. Hawking certain cultures, these subjects are taboo. Within many central Asian cultures, talking about suicidal feelings is frowned upon, so individuals who need help typically hide their feelings.

Muhammad Zeb understands this well. His uncle committed suicide, and his family, who are Pakistani, avoided talking about what happened. “It was a big lesson for me. This problem can happen to anyone, and we need to talk about it.”

At UVM, Zeb has an opportunity to explore this issue among Afghan refugees. An increasing number of individuals forced to flee their homelands are resettling in Vermont. Post-traumatic stress, social isolation, racism, unemployment, and language barriers elevate refugees’ risk for depression and suicidal ideation. Afghanistan and Pakistan cultures parallel, and Zeb can support health care providers in understanding their Afghan patients’ cultural norms.

“Many of refugees aren’t literate, so existing screening methods done in the primary care office are useless,” Zeb said. “The language screens can be too unfamiliar, or the patient may be scared to check boxes because they fear it creates an issue for their staying in the U.S.”

Zeb assessed gaps in mental health resources and identified cultural barriers among Afghan refugees, via literature reviews and interviews with experts in the field of refugee care. With this information, Zeb designed an interactive, web-based, educational module on mental health for providers working with Afghan refugees.

Susanna Schuler
Connectional Silence in Telemedicine-Facilitated Palliative Care Conversations

Susanna Schuler investigated palliative care conversations between clinicians and patients receiving dialysis treatments for kidney failure. Palliative care conversations take place when patients have serious illness, to help them think through important decisions and focus on what matters most to them.

“It’s not so common to have these conversations with patients who have kidney disease,” Schuler said, “because it is often thought ‘dialysis is life saving.’” She added that the three- to five-hour process occurs up to four times weekly and can leave patients feeling exhausted and powerless.

Schuler’s research followed prior studies that identified “connectional silence” within palliative care conversations and concluded that silent moments in conversations were associated with the patients feeling heard and understood, which is associated with better outcomes. Schuler’s project was novel, in that the conversations occurred during telemedicine visits, rather than in person. Her project aimed to provide insight into how serious illness conversations via telemedicine may be different, how patients receiving dialysis engage with palliative care, and how clinicians can help patients feeling heard and understood.

She examined videos in which palliative care clinicians spoke with the patients while they received dialysis. She listened for pauses in their conversations and looked for gestures including smiling, laughing, and eye contact, which can facilitate connection and empathy. Schuler concluded that patients enjoyed having meaningful conversations during dialysis treatment, and they valued feeling listened to and understood.

“They seemed excited to have someone to talk to while getting dialysis,” she said, noting that the conversations touched on the patients’ thoughts about ending dialysis, which will lead to death. “For someone who has been on dialysis for many years, it is powerful for them to be able to make informed decisions for themselves.”

For Larner College of Medicine students, scholarship and inquiry take place year-round. During summer, many rising second-year students participate in a research fellowship. They choose their research topics based on personal passions and, under the guidance of expert faculty, immerse themselves in tackling medical puzzles and unmet health needs among marginalized communities.

Read about their research.

Summer research fellowships are supported by the Larner College of Medicine Fund, Cardiovascular Research Institute, UVM Cancer Center, and Four Pines Foundation in Suicide and Self-Harm Prevention.
Where art and science meet.
An interview with Vito Imbasciani, M.D.’85, Ph.D.

In 2014, Vito D. Imbasciani, M.D.’85, Ph.D. and George Disalvo made a gift to create the first endowed lectureship in the United States focused on preparing culturally competent physicians who can provide medical care and prevention services that are specific to LGBTQ populations. This fall was the tenth annual Imbasciani/Disalvo lecture and the featured speaker was Dallas Ducar, M.S.N., APRN. As Dr. Imbasciani and Mr. Disalvo were able to attend in person, we took the opportunity to sit down with Dr. Imbasciani to reflect on his life and career.

Where are you from and how did you end up at UVM to get your medical degree?
VI: I was born in the Hudson Valley, but my four grandparents came from Italy. After World War I, one of my grandfathers discovered a passion for music and joined John Phillips Sousa’s military band. He settled at West Point, where I later worked during high school and college summers. I attended Cornell for my master’s and doctorate degrees, initially as a pre-med student but eventually pursuing a music major. Both degrees focused on music, leading to a Fulbright in Rome. I later taught music at Middlebury College, but my interest in medicine persisted.

Taking a chance, I drove 35 miles to the University of Vermont and had a transformative interview with the dean of admissions. Despite my unconventional humanities background, she accepted me. Today, I’m here—thanks to that chance she took on me.

Any early career decisions / speed bumps that you had to navigate?
VI: Deciding to pursue medicine after a humanities-focused academic career, I had to catch up on the science. I took a post-baccalaureate year to meet the admissions requirements, alongside a position in the pathology department focusing on neurodegenerative diseases. While I didn’t choose pathology, my work there influenced my role as the chairman of the board of the California Institute of Regenerative Medicine, which addresses degenerative and other processes of the brain and spinal cord, among many other diseases.
How did these early career choices affect where you studied and your path through medicine?

VI: Initially, I considered combining my music Ph.D. with neurology. I planned a rotation abroad with a prominent neurologist but couldn’t, due to his unexpected death. This led me to explore urology, where I fell in love with the field. My journey continued with an urologic surgery residency at Yale, and shortly after, I found myself in Saudi Arabia during the Gulf War as an Army Medical Corps captain.

Following the war, I started practicing urology in Los Angeles. A few years later, an earthquake destroyed my rental property, making me humorously consider myself a Californian by virtue of natural disasters, including the Gulf War and eventually, COVID-19.

Have you found a way to incorporate music into your medical practice?

VI: It’s very difficult to translate what I did in my doctoral research working with 11th century Latin manuscripts in the depths of the Vatican archives, into clinical practice. However, this academic journey brought me two significant benefits. Firstly, my Fulbright experience in Italy ignited a passion for travel, for respect for diverse cultures, and for a love for languages. I now speak eight languages and can read four more.

Secondly, a Ph.D. equips you with the skills to conduct high-level research, assess existing knowledge, and ask critical questions. You’re taught to analyze the materials and apply to a critical apparatus to solving problems. And it works. People can use that advanced degree to do many, many different things. So, while I may not use music in my waiting room, I bring the valuable skills and experiences gained from my academic pursuits with me.

Do your wartime deployments and experiences change you as a person and as a physician?

VI: I felt a strong commitment to serve my country, a tradition passed down through generations in my family. My journey began with medical training at UVM College of Medicine and Yale, followed by a rewarding career as a combat surgeon in the military. I continued my service even during the “Don’t ask, Don’t tell” era, driven by the desire to provide the best medical care to our nation’s finest.

My military experience paved the way for a diverse career, including leadership roles in medical associations, the California Army National Guard, and government advisory committees. Notably, I served as Secretary of Veterans Affairs under Governor Brown, a position continued by Governor Newsom. In total, I spent eight years in California’s Governors’ cabinets and currently chair the Institute of Regenerative Medicine under Governor Newsom.

Out of those horrors of war, there’s a good that came out of it?

VI: Yes. As California’s Secretary of Veterans Affairs for eight years, I had the privilege of serving the needs of 1.6 million veterans. My combat experience revealed the profound impact of modern warfare on the human brain, contributing to the challenges faced by returning veterans. While not all veterans return with physical injuries, many carry emotional and psychological burdens.

The demand for care is substantial, especially as this is the first war since the American Revolution where the leading cause of death is not thoracic or abdominal injuries, but combat injuries “above the clavicles,” including PTSD, chronic brain aneuploidy, traumatic brain injury, spinal cord injury, and limb loss.

“Do you feel that those inclusive advances that were made in the military are being maintained and built upon or going in another direction?”

VI: With 27 years of service in the Army Medical Corps, including combat deployments, and now a decade as a retired colonel, I have a unique perspective. I worked behind the scenes to end the discriminatory policy against gay and lesbian individuals serving in the military. Despite initial resistance, significant progress was made, with the military now, in many ways, more inclusive than general society. Since the policy shift under President Obama, professional sexual orientation, and, to some extent, your sexual identity, no longer impact your eligibility to serve the country in uniform.

A defining moment in my career came during President Obama’s 2012 reelection campaign when he publicly acknowledged and thanked me. I introduced him to a large audience, emphasizing that he was not just the president but also my commander-in-chief. In his speech, he exten- sively thanked me for my contributions to ending the discrimi- natory policy, effectively concluding it for the military.

You’ve held academic teaching positions as well as continuing to practice medicine. Do you enjoy one over the other or is it kind of a tie?

VI: The age-old question of whether practicing or teaching medicine is more enjoyable is a challenging one. I happen to love both. When I’m not practicing, I miss teaching, and the reverse is also true. William Osler, a prominent American physician, wisely said, “To practice medicine without studying it is like going to sea without nautical charts. But to study medicine without practicing is not to go to sea at all.” I hold a profound passion for teaching, and even at an age when many physicians retire or consider it, I do not anticipate giving up clinical practice as long as I am able.

Knowing what you know now, what’s the one piece of advice you’d give a medical student who’s about to graduate?

VI: You are all intelligent and blessed individuals, ready to embark on your journey into the world. However, isolation isn’t the path. You are assets to your community, your state, and your nation. You have a duty to engage in public health discussions, whether it’s vaccinations, women’s health, or other crucial topics. Early involvement is key. Join your local and state medical societies. Remember, practicing medicine isn’t simply because you’re intelligent, your parents desired it, or you earned an M.D. from Larner or finished a prestigious residency. It’s your state legislature that allows you to practice medicine. To practice at your best and serve more patients, you must influence the legislative process, achieved by raising your voice and actively participating at county and state medical society levels.

Why is giving back so important, so meaningful for you?

VI: Supporting the College of Medicine brings me immense satisfaction, and as a token of my gratitude, I went to give back. I’m deeply thankful to the late Dean of Admissions Carol Phillips, M.D., who admitted me with a humanities Ph.D., recognizing something special in me. I thank her, the faculty, and the College of Medicine for adding those two letters, “M.D.,” after my name.

My significant life achievements, from becoming a surgeon and war surgeon to serving in government and treating entire populations, all stem from earning my M.D. from UVM College of Medicine. From caring for California’s veterans to my role as the Stem Cell Agency director, responsible for funding research into genetic and stem cell cures for millions of Californians and potentially all Americans, none of this would have been possible without my medical education. So, I give back while I’m still alive to savor the joy over the years.

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Have you found a way to incorporate music into your medical practice?

VI: It’s very difficult to translate what I did in my doctoral research working with 11th century Latin manuscripts in the depths of the Vatican archives, into clinical practice. However, this academic journey brought me two significant benefits. Firstly, my Fulbright experience in Italy ignited a passion for travel, for respect for diverse cultures, and for a love for languages. I now speak eight languages and can read four more.

Secondly, a Ph.D. equips you with the skills to conduct high-level research, assess existing knowledge, and ask critical questions. You’re taught to analyze the materials and apply to a critical apparatus to solving problems. And it works. People can use that advanced degree to do many, many different things. So, while I may not use music in my waiting room, I bring the valuable skills and experiences gained from my academic pursuits with me.

Do your wartime deployments and experiences change you as a person and as a physician?

VI: I felt a strong commitment to serve my country, a tradition passed down through generations in my family. My journey began with medical training at UVM College of Medicine and Yale, followed by a rewarding career as a combat surgeon in the military. I continued my service even during the “Don’t ask, Don’t tell” era, driven by the desire to provide the best medical care to our nation’s finest.

My military experience paved the way for a diverse career, including leadership roles in medical associations, the California Army National Guard, and government advisory committees. Notably, I served as Secretary of Veterans Affairs under Governor Brown, a position continued by Governor Newsom. In total, I spent eight years in California’s Governors’ cabinets and currently chair the Institute of Regenerative Medicine under Governor Newsom.

Out of those horrors of war, there’s a good that came out of it?

VI: Yes. As California’s Secretary of Veterans Affairs for eight years, I had the privilege of serving the needs of 1.6 million veterans. My combat experience revealed the profound impact of modern warfare on the human brain, contributing to the challenges faced by returning veterans. While not all veterans return with physical injuries, many carry emotional and psychological burdens.

The demand for care is substantial, especially as this is the first war since the American Revolution where the leading cause of death is not thoracic or abdominal injuries, but combat injuries “above the clavicles,” including PTSD, chronic brain aneuploidy, traumatic brain injury, spinal cord injury, and limb loss.
As a scientist and faculty member at the UVM Larner College of Medicine, I was delighted to attend the College’s recent “Dean’s Celebration of Excellence in Research.” The event is a weeklong celebration dedicated to honoring the extraordinary research accomplishments of our students, faculty, and research fellows, and our graduates at UVM and Larner, including an awards ceremony. As members of the core of our academic community, we stand together at UVM to support and nurture the most diverse discipleship of our time.

One example of the impactful alumni support is the Martin E. Bloomfield, M.D. ’60, and Judith S. Bloomfield ’59 Early Career Professorship in Cardiovascular Research, which was awarded this year to Osama Harraz, Ph.D., assistant professor in the Larner College of Medicine. This professorship allows us to easily collaborate across disciplines and to attract outstanding new faculty and students focused on discovering new insights and treatments.

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The integration of research into our medical mission is vital to the long-term success of our College as we support the next generation of world-class researchers on major scientific and health issues. This is good for UVM, the Larner College of Medicine, the UVM Health Network, and our community. It allows us to bring cutting-edge care to our patients, and to support our Vermont economy through development of a skilled workforce in our labs.

I am pleased to announce that our Larner Alumni Executive Committee continues to grow its representation of and connection to our graduate alumni and graduate students. We are all contributing to the advancement of our shared mission. The more we collaborate and support each other, the more we will collectively achieve in the near- and long-term.

I hope you will join me in supporting our research efforts and the education of our students in whatever way is most meaningful for you. Thank you for everything you do to support your biomedical community, patients, profession, and Larner College of Medicine.
NEW LEADERSHIP

Dan LeClair was recently named to the position of Executive Director of Alumni and Donor Relations for the UVM Larner College of Medicine. Previously, Dan spent five years serving as the Director of Donor Relations for Middlebury College. Prior to his time at Middlebury, Dan also served as the Director of Development for 1% for the Planet, an international environmental nonprofit headquartered in Burlington, Vermont. Earlier in his career, Dan was a development professional with Kimball Union Academy (Meriden, New Hampshire) and with the George Washington University (Washington, DC). Originally from Lebanon, New Hampshire, Dan is also a 2005 graduate from George Washington University. He and his wife, Addy, live in South Burlington with their dog, Onyx. The couple enjoy cycling, hiking, and otherwise staying active through travel and outdoor recreation.

MEDICAL DEVELOPMENT AND ALUMNI RELATIONS

FELLOWSHIP EXPANDS SUICIDE PREVENTION AND TREATMENT EXPERTISE

Millions of Americans experience symptoms of a mental health condition each year, and the number of people seeking care is trending upward. With this backdrop, UVM has created a fellowship to provide suicide prevention-specific training and research opportunities to emerging health care providers.

The Four Pines Fellowship for Excellence in Suicide Prevention and Treatment was envisioned by Thomas Delaney, Ph.D., associate professor at the Larner College of Medicine and mental health researcher, and created with philanthropic support from the Four Pines Fund, and is the first of its kind. Both Dr. Delaney and the Four Pines Fund see this fellowship serving as a model for others across the nation.

“Recent studies show that as many as 80% of individuals who went on to die by suicide saw a health care provider in the months before dying, and strengthening providers’ skills around identifying and responding to suicide risk is a crucial public health strategy for reducing suicide attempt and death rates” said Delaney. “The Four Pines Fellowship is an opportunity for medical and other health care students at UVM, to develop knowledge and skills for addressing suicide and self-harming behaviors, gaining research and clinical experience that will prepare them to be leaders in suicide prevention as they become independent practitioners.”

Reunion 2023 Fall Fun!

Alumni returned to campus for Reunion 2023, where they caught up with classmates and college news through many events including the 50th Reunion Medallion Ceremony and luncheon, medical student led tours of the College and the Firestone Medical Research Building, the 2023 Larner College of Medicine Alumni Association Awards Ceremony, a celebratory picnic, and discussions with College staff, faculty, and leadership.
A. BRADLEY SOULE AWARD

Presented to an alumnus/a whose loyalty and dedication to the Larner College of Medicine most emulate those qualities as found in its first recipient, A. Bradley Soule, M.D.'29.

DR. JOHN MCGILL is the second generation UVM medical alumnus who remembers his dad, Dr. J. Bishop McGill, a 1946 graduate of the UVM College of Medicine, hunting over the Hill from his home on East Avenue to make rounds on his surgical patients. John also remembers “Bish,” after answering several phone calls about a new admission, cursing the resident. “When all else fails, go back and re-examine the patient.”

As a pre-med at Williams College, John envisioned following his father’s footsteps in surgery. At the beginning of his senior year, however, he and his two roommates decided to travel rather than proceed directly to graduate education. They worked construction to pay for what became a year and a half trip swinging as far north as the Arctic Circle in Norway and descending south to the Cape of Good Hope in South Africa. It was the greatest learning experience of his lifetime, opening up his mind to the world at large and setting the stage for much that followed.

Back in Burlington and joining his UVM medical class of 1978, John was looking forward to the study of medicine. In short, his class, and the total experience, was exemplary. A special attribute was a curriculum flexibility which allowed John and a classmate to spend the last months of school rotating in clinics in rural Jamaca and the high mountains of Peru.

Emergency medicine was emerging as a specialty in the Midwest and it’s variety and unpredictability attracted Dr. McGill to the county hospital residency in Minneapolis (HCMC). Dr. McGill finished his residency and stayed on at faculty, but soon joined a small group of EM trained physicians from the U.S. to address the rising toll of highway deaths in Saudi Arabia. While there, he heard about a French group, Medecins Sans Frontieres, that was providing medical care to rural Afghanistan devastated by the terror and destruction of the Soviet military.

After trips to the Pakistan-Afghan border and Paris, Dr. McGill joined MSF on a mission to resupply and treat Afghans at one of their clinics near the Soviet border, becoming the first American physician to work with the relief organization. Returning to Pakistan, Dr. McGill led a committee to standardize basic medical education and medical supplies given to selected Afghans returning to their villages. When the Soviets withdrew, he returned to Minnesota as an attending in the EM residency and in 1990 helped launch the U.S. Department of Veterans Affairs without Borders. He was president of the board of directors when the international organization received the 1999 Nobel Peace Prize.

Dr. McGill was awarded an honorary Doctorate of Science degree from the University of Vermont in recognition of his work with MSF. He gave the UVM College of Medicine’s 1999 Commencement Address in which he emphasized the irreplaceable value of compassion and the importance of doctor-patient interaction in every setting. In addition to teaching and patient care, Dr. McGill developed an interest in airway management. While writing a textbook chapter, he saw a reference to a simple device—the bougie—that had been used successfully by the British to intubate for decades but was unheard of outside the Commonwealth. In the ensuing 20 years, Dr. McGill studied it in detail. Using the bougie with a videolaryngoscope, Hennepin published first pass intubation success rates far higher than any reported in the literature.

Dr. McGill followed emergency medicine at UVM as it grew in size, expertise and responsibility, pivotal in establishing the EM residency in 1999. In 2022, after many years of support for the College of Medicine, Dr. McGill honored his father by establishing the J. Bishop McGill, M.D.'46 Chair of Emergency Medicine. Dr. McGill championed two innovations that became standard-of-care: a simple device—the bougie—that had been used successfully by the British to intubate for decades but was unheard of outside the Commonwealth. In the ensuing 20 years, Dr. McGill studied it in detail. Using the bougie with a videolaryngoscope, Hennepin published first pass intubation success rates that were higher than any reported in the literature.

Dr. McGill followed the lead of his father in surgery. At the UVM Larner College of Medicine, John’s father, Dr. J. Bishop McGill, inspired a new generation of surgeons to give of themselves to their patients first. Dr. McGill has done what he can to continue Bish’s legacy by focusing on innovative practices that improve patient outcomes while maintaining patient privacy and promoting the growth of each individual patient. He has diverted from the path of tradition to transform himself into a new type of surgeon, a teacher dedicated to the care of the doctor-patient relationship.

Distinguished Academic Achievement Award

Presented to alumnus/a in recognition of outstanding scientific or academic achievement.

Jared D. Christensen, M.D.'03, MBA
Professor and Vice Chair, Department of Radiology, Duke University; Founder and Imaging Director, Duke Lung Screening Program; Chair, American College of Radiology–Lung RADS Committee

Meagan Costedio, M.D.’03, FACS, FACSRS
Chair of Surgery and Medical Director of Colorectal Surgery, University Hospitals Ahuja Medical Center, Beachwood, OH; Associate Professor of Surgery, Case Western Reserve University

Early Achievement Award

Presented to alumnus/a who have graduated within the past 15 years in recognition of their outstanding community or College service and/or scientific or academic achievement.

Eric P. Cahill, M.D.’13, MS(c)
Clinical Associate Professor of Obstetrics and Gynecology and Cancer Family Planning, Stanford University

William E. Damsky, Ph.D.’11, M.D.’13
Assistant Professor of Dermatology and Pathology, Yale School of Medicine

Ryan D. Winters, M.D.’08, MPH, FAAP, FACS, FRACS
Staff Specialist - Department of Otolaryngology - Head and Neck Surgery, John Hunter Hospital, New South Wales, Australia; Associate Professor of Otolaryngology - Head and Neck Surgery and Plastic and Reconstructive Surgery, Tulane University School of Medicine; New Orleans, LA; Assistant Professor, University of Queensland, Queensland, Australia

2023 UVM LARNER COLLEGE OF MEDICINE ALUMNI ASSOCIATION AWARDS

The UVM Larner College of Medicine Alumni Association Awards are presented every year at the Celebration of Achievements Awards Ceremony during reunion weekend. More details about the awardees can be found at go.uvm.edu/lcomawards

DISTINGUISHED GRADUATE ALUMNI AWARD

Presented to an alumnus/a from the UVM Larner College of Medicine’s Ph.D. or M.S. programs who has demonstrated outstanding achievement in basic, clinical or applied research; education; industry; public service; humanism/and/or outstanding commitment to the Larner College of Medicine community.

Andra S. Stevenson, Ph.D.’01
Senior director of global medical affairs for Merck & Co., Inc., presented the Distinguished Alumni Award at last year’s Lalorre College of Medicine. She especially recognized the outstanding impacts and contributions of alumni who have gone on to lead successful careers in research and medicine.

DISTINGUISHED ACADEMIC ACHIEVEMENT AWARD

Presented to alumnus/a in recognition of outstanding scientific or academic achievement.

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STUDENT AWARD

Presented to a current student(s) for their outstanding leadership and loyalty to the College and one who embodies Dr. Larne’s dedication to not only supporting his medical alma mater, but to inspiring others as well.

Anneliese Lapides
UVM Larner College of Medicine, Class of 2024

ROBERT LARNER, M.D. ’42 STUDENT AWARD

Presented to a current student(s) for their outstanding leadership and loyalty to the College and one who embodies Dr. Larne’s dedication to not only supporting his medical alma mater, but to inspiring others as well.

Robert Larnes
UVM Larner College of Medicine, Class of 2024

SERVICE TO MEDICINE AND COMMUNITY AWARD

Presented to alumnus/a who have maintained a high standard of medical service and who have achieved outstanding recognition in community service or assumed other significant responsibilities not directly related to medical practice.

Morris Earle, Jr., M.D.’83, M.P.H.
Assistant Professor of Pediatrics, UMASS Chan Medical School

Victor C. Herson, M.D.’73
Neonatologist (Retired); Professor of Pediatrics, University of Connecticut School of Medicine

Paul C. Rutkowski, M.D.’63
Retired Private Practice, Ophthalmology, Harrison, NY, 2022

2024 NOMINATIONS!

Do you know a class member deserving of recognition? Learn more about how to send your nominations at go.uvm.edu/lcomawards

VERMONT MEDICINE FALL 2023

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Lucien J. Côté, M.D.*54

Leading Parkinson’s disease specialist Dr. Lucien Côté died in December 2022 at age 74. A native of Quebec, Canada, he earned his medical degree from the University of Montreal College of Medicine in 1954 and was inspired to pursue a career in neurology when he first encountered Parkinson’s patients during his time as a U.S. Army surgeon in Morocco in the 1950s—an era that offered few treatments or specialists. He made it his life’s work to fill gaps in research and care, serving on the neurology faculty at Columbia University Irving Medical Center, a Parkinson’s Foundation Center of Excellence, for more than 60 years. His work led to a genetics research program at the Parkinson’s Foundation named in his honor and a Lifetime Achievement Award from the foundation in 2014. Côté’s commitment of medical leaders in the field, and a deep love for exploring the world and a legendary knowledge of how to pack a suitcase. Dr. Côté’s generosity extended to causes he held dear, including the Desert Arboretum Project and The Redwood Society.

Donald F. Shea, Jr., M.D.
Dr. Donald Francis Shea Jr. passed away on June 11, 2023, at St. Mary’s Hospital in Amsterdam, N.Y. A general surgeon trained at SUNY Downstate Medical Center, Shea was born in Sheffield, England, in 1927. His medical education included studies at the University of Edinburgh, UK, and he held a PhD in cardiac surgery. Shea was a member of the United States Air Force Medical Corps and was honorably discharged in 1955. He returned to SUNY Downstate Medical Center, where he dedicated himself to surgery. Shea practiced general surgery and served as commissioner of mental health for the city of New York, passing away in February 2023.

Mark Michael Maslack, M.D.
Mark Michael Maslack, M.D. was a retired diagnostic radiologist with a passion for travel and music. Maslack was born in Rochester, New York, and attended the University of Rochester and the University of Pennsylvania, where he completed his medical degree in 1955. He passed away in Phoenix, Arizona, in 2023. Maslack was a dedicated member of the medical community and a tireless advocate for his patients. He will be deeply missed by all who knew him.

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Larner Dean Richard L. Page, M.D., has his blood drawn by Chloe-Mae Rushford (right) during the Larner College of Medicine’s first annual blood drive. The inaugural event was a collaborative effort with the American Red Cross. Over sixty members of the College’s community joined Dean Page in the Larner Classroom to donate blood.

PHOTO: CEILIDH KEHOE

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