

Events to Know

October

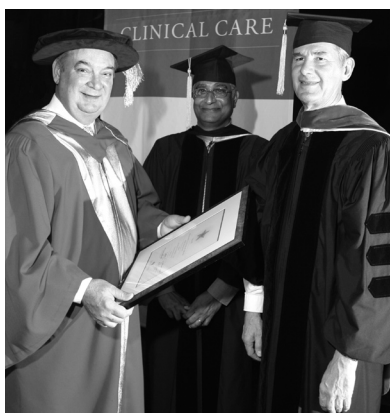
30 Biochemistry and Molecular Biology Seminar: Dr. Ann-Bin Shyu to present "Mechanisms and Regulation of mRNA Turnover in Mammalian Cells." Noon, MSB 6.200.

31 Cultural Humility in Medicine series: "Treating Physically Disabled Patients." Noon-1 p.m., MSB 2.006.

Halloween Open House at HAM-TMC Library

Join the HAM-TMC Library staff for a Halloween Open House to celebrate National Medical Librarians Month from 9 a.m.-2 p.m. Tuesday, Oct. 31 in the Jesse H. Jones Library Building.

- Register to win \$5 copy cards, two USB memory sticks, or a \$20 gift card to Half Price Books.
- Pick up a \$5 amnesty coupon for accrued library fines for the month of November (one per visitor).
- Buy books from the library's book sale. Choose from a large number of medical and leisure paperbacks for \$.50 and hardback leisure reading for \$1.50.



Three Medical School professors, Drs. Ferid Murad, Ponnada Narayana, and Henry Strobel (L-R), were honored with President's Scholar Awards in the categories of teaching and research at the Faculty Honors Convocation, Oct. 18. Photo by John Everett.

Schultz settles back in at Medical School

Former Dean **Stanley Schultz** never thinks about retirement, or more specifically, the 'R' word.

"The 'R' word is not part of my vocabulary," said Schultz, when asked if he ever considered retiring from the Medical School, during his recovery from emergency coronary artery bypass surgery.

Schultz went through a long recovery process since his surgery Nov. 29 that included recuperation at Memorial Hermann Hospital and a laryngectomy at M. D. Anderson Cancer Center necessitated by radiation therapy he received 15 years ago. He was able to return home May 23, and after the Labor Day holiday, he returned to his second home – the Medical School.



Dr. Stanley Schultz

The Medical School is a place near and dear to Schultz's heart, and he said he was determined to come back.

"There were times I didn't think I would be back, and there were times when I couldn't even think of anything – my mind was a blank. I was very sick," Schultz said. "But, I decided if I'm still alive and can be useful, I'll come back."

Every afternoon, Schultz can be spotted working in temporary office space at the Jesse H. Jones Library Building, and he is driving himself to work. He said being back at the school has been "wonderful."

"I'm excited that I came back at a time when this Medical School is really undergoing a tremendous growth spurt," said Schultz, who celebrated his 75th birthday this week. "It's always had that potential, but I think we're now being recognized as an outstanding medical school with a terrific future."

(Cont'd. on back)

Clip allows less invasive treatment of mitral regurgitation

Avoiding open heart surgery to treat mitral regurgitation is the goal behind a less invasive technique, which allows an interventional cardiologist to repair a patient's heart with a clip known as a mitral valve clip or MitraClip™.



Mitral valve clip or MitraClip™

The mitral valve separates the left atrium from the left ventricle, and it has two leaflets that open to allow blood passage only from the left atrium to the left ventricle. Mitral regurgitation occurs when the heart's mitral valve does not close properly, causing blood to leak backward from the left ventricle into the left atrium.

"You should not have any blood passage from the left ventricle into the left atrium," said **Dr. Catalin Loghin**, assistant professor of internal medicine in the Division of Cardiology. "If there is such a passage, the valve is called incompetent or regurgitant, and the process is called mitral regurgitation. It means that the main pumping chamber of the heart – the left ventricle – instead of pumping all the blood into the aorta and into the rest of the body, sends some of it backward into the left atrium. From the left atrium, blood goes backward into the lungs."

The primary symptom of mitral regurgitation is shortness of breath. "That's due to regurgitation of the blood back into the left atrium and from the left atrium into the lungs," Loghin explained. "There are degrees of regurgitation, from mild to severe."

Left untreated and if severe enough, mitral regurgitation will inevitably lead to intractable heart failure. "It's a mechanical problem," Loghin said. "You can't fix it with medications. Medications are only partially helpful."

In the past, mitral regurgitation was treated with open heart surgery to repair or replace the mitral valve. Today, because of an ongoing mitral valve clip study, a heart can be fixed with a less invasive procedure that clips the mitral valve's leaflets together.

Loghin's role is to guide the interventional cardiologist who actually performs the procedure

(Cont'd. on back)



Buy a book – help a Medical School student’s education

Buy a book and help support UT Medical School scholarships during the Fourth Annual University of Texas Health Science Center at Houston Holiday BookFair, Thursday, Nov. 29 through Saturday, Dec. 2 at the Barnes & Noble Booksellers, 3003 W. Holcombe Blvd.

A voucher found at www.uthouston.edu/community/barnesnoble/ ensures that your purchase of books, CDs, calendars, games, DVDs, and other items will result in financial help for those students with the greatest needs at The University of Texas Medical School at Houston. (Vouchers also will be available at the checkout counter.)

If total in-store sales during the BookFair exceed \$10,000, the scholarship fund will receive a 25 percent donation from Barnes & Noble Booksellers.

Those who make purchases at the Holcombe Boulevard store must identify themselves as supporting the drive and designate the UT Medical School on the voucher as the beneficiary of their scholarship support. For more information, contact **Elise Jenkins**, Office of Institutional Advancement, at Elise.P.Jenkins@uth.tmc.edu or 713.500.3035.

IMM to host scientific symposium, Nov. 2

The Brown Foundation Institute of Molecular Medicine for the Prevention of Human Diseases (IMM) will host a symposium titled “Molecular Strategies to Prevent Human Diseases” from 9:30 a.m.-4 p.m. Thursday, Nov. 2 in the Beth Robertson Auditorium, Faye S. Sarofim Research Building. The symposium will be held in conjunction with the dedication of the new Sarofim Research Building.

Admittance is continual, and guests may attend all or part of the symposium. Boxed lunches will be provided. Limited pay parking is available in the University Center Tower garage. The building also is accessible via the Metro light rail or “Blue” Metro shuttle bus.

For information on keynote presentations, speakers, and topics, see www.uth.tmc.edu/uth_orgs/imm/seminars/symposium-invitation.pdf.

Mitral valve clip, cont’d.

and deploys the device. As part of the EVEREST II clinical research study, the procedure has been performed at the Memorial Hermann Heart and Vascular Institute, where Loghin assists **Dr. Richard Smalling**, holder of the Jay Brent Sterling Professorship in Cardiovascular Medicine, in positioning the mitral valve clip.

“Transesophageal echocardiogram (TEE) is the technique that gives a three-dimensional evaluation of the spatial position of the clip in the left atrium, on top of the mitral valve,” Loghin said. “For the duration of the procedure, which is two to four hours currently, an ultrasonic probe is positioned into the patient’s esophagus and stomach and is continuously acquiring images of the heart. This real time imaging method guides the interventional cardiologist in positioning the device. TEE allows me to know whether the clip was placed right or if it has to be repositioned.”

Only patients with Grade 3 (moderate to severe) or Grade 4 (severe) mitral regurgitation may be eligible for the EVEREST II study. For that reason, Loghin said a relatively small number of patients have been selected for the mitral valve clip study at the Memorial Hermann Hospital site.

“In selective patients who meet certain criteria, to be able to fix their mitral regurgitation with a clip and not have their chest open, that’s the huge benefit of it,” Loghin said.

For more information on this procedure, contact **Mary Vooletich** at 713.500.6550.

-C. Webb

MSI offers November lecture series

Treating children with both developmental disabilities and behavioral and emotional concerns will be the topic of a lecture series beginning Nov. 1 offered by the Mental Sciences Institute (MSI).

Dr. Deborah Pearson, professor of psychiatry and behavioral sciences, will speak on “An Introduction to Mental Health Issues in Children and Adolescents with Intellectual and Developmental Disabilities,” Nov. 1.

Dr. Maria Quintero, assistant deputy director of the Mental Retardation Services Division at Mental Health and Mental Retardation Association of Harris County (MHMRA), will lecture on “Trends in the Management of Dual Diagnosis,” Nov. 8.

Drs. Linda Schmalstieg, Lynn Malseed, and Sarah Flick, staff psychiatrists at MHMRA, will present “A Psychiatric Approach to Individuals with Developmental Disabilities and Mental Illness,” Nov. 29.

All lectures are free and scheduled for 11 a.m.-noon in the Mental Sciences Institute Auditorium (Room 110 MSI), 1300 Moursund St.

Schultz, cont’d.

“I still go to physical therapy in the mornings, but I hope when that’s over soon, I’ll be here full time,” Schultz continued.

Because he has had a laryngectomy, he now speaks primarily with a device known as an electronic larynx. “There are some other ways that I speak, but this is the easiest for me, and most listeners get the ‘hang of it’ after a short while,” he said.

He said he had excellent care during his stay in the hospital but being a patient for six months was still a life-changing experience.

“It’s absolutely dehumanizing, and it’s like reverting to infancy,” Schultz said. “You become dependent on others for everything. And, for someone as independent as me, that’s not good. You lose control over your whole body. I think this has little to do with the people taking care of you. I was fortunate to have a wonderful team of physicians and, for the most part, good-to-excellent nurses and support staff. Dehumanization, I think, is inherent in the nature of long-term hospitalization of the very sick. I think every one in the health care professions should be sensitive to that fact.”

He’s been asked to write an essay based on his experience as a patient, and this is one of the many things that keeps his afternoons busy at the school.

“I’m still catching up with a lot of correspondence and the biomedical literature,” Schultz added. “I’m writing some manuscripts, including one on medical education. I’m still called upon to review papers for journals, and I’m still on several editorial boards. I hope to be involved in the new Center for Clinical and Translational Sciences.”

And, beginning in January, Schultz hopes to teach again.

“I will try my best,” he said, adding that he has an amplifying system for his electronic larynx that’s designed for lecturing. “Teaching is something I love, and as long as I can do it without disadvantaging the students, I will.”

Schultz welcomes visitors. “My door is always open,” he said. After Interim Dean **Jerry Wolinsky** moves to his new office at the Medical School, Schultz will occupy his former office in the Jesse H. Jones Library Building.

Schultz is grateful for all the thoughts and prayers he received from his Medical School family, while he was in the hospital recovering.

“It’s one of the things that was very important in my recuperation process,” he said. “I can’t thank everyone in person, but I’ll try. People don’t realize how important it is to feel embraced by the community where you’ve devoted 27 years of your life.”

-C. Webb