H1N1’s Warning

I called my wife and said, This could be it.

A new flu virus had surfaced in Mexico. The first reports were ominous. People were dying. Its antigens—proteins on the viral surface that spark an immune response in people—weren’t familiar, meaning this was a new strain of the influenza virus. So perhaps no one would have immunity to it. It was April 28. Like most everyone else, I was terribly worried.

Stock up on food and water, I told her.

What concerned me the most was that this new H1N1 virus appeared to have a very high case-fatality rate. However, it later became clear that in the early days Mexico was just counting severe cases, not all cases. Thus, the proportion of reported cases who died seemed very high. The denominator (the number of everyone infected) is important too, as Epi 101 students can tell you. Data from the outbreak in New York City revealed H1N1 didn’t cause high numbers of secondary cases, nor were there any deaths initially.

Though any loss of life is tragic, we were fortunately this spring. However, this is no cause for complacency. Our immune system can protect us when it has previous experience with the proteins on the surface of a virus. But influenza viruses are notorious for changing their proteins. They are sloppy gene copiers when they replicate, so they mutate prodigiously. This results in antigenic drift (small changes in surface proteins that occur over time). Antigenic shift, usually from swapping genes between different viruses to create a new combination, causes a major change in the virus. These changes can sometimes make a mild virus more lethal and more transmissible.

Will this happen this fall? We don’t think so, but we don’t know for sure. We do know that this is a virus with surface proteins that humans haven’t seen before, so more individuals will be susceptible to infection from it.

When the world faces a new and unpredictable threat such as the H1N1 influenza virus, a robust public health infrastructure is essential for an effective response.

As John M. Barry chronicles in his terrific book, The Great Influenza, the 1918 flu epidemic began with a spring outbreak that returned in the fall with horrific lethality. That virus circled the world, claiming tens of millions of lives.

As our School first opened its doors to students in October 1918, our first dean, William Henry Welch, was helping lead the nation’s response to the flu—until he too fell ill. He fortunately survived after weeks of recuperation.

We have to view the latest H1N1 pandemic as a warning. Our greatest fear of a pandemic with high case fatality and high transmissibility did not happen but we have to be ready in case this virus does become more transmissible and more deadly. And we have to be ready against other pathogenic threats in the future. This means we must have strong surveillance methods in place that serve as disease early warning systems. We must have shoe-leather epidemiologists who are trained to quickly ascertain viral attack rates and case-fatality rates. We must have educated public health leaders who can marshal good data and interpret it for policymakers and the public. We must have a robust preparedness infrastructure that can respond quickly to epidemics with timely and accurate guidance on infection control, social distancing and other preventive measures.

In the long term, we must also hasten our ability to create vaccines using methods that are not dependent on the decades-old, cumbersome process of replicating the virus in chicken eggs. This kind of a quantum leap is achieved only through strong basic science programs, which deliver an ever-improving armamentarium of new tools and strategies to be wielded against pathogenic foes like viruses. Andrew Pekosz, a virologist here at the Bloomberg School, and his quest for a universal flu vaccine provide an excellent example. Influenza is too crafty, too quick to mutate for us to accurately predict every spring what deadly strain will challenge humanity the following autumn. We need a vaccine that will be effective against all strains of influenza. This requires a different approach than we have taken with seasonal flu vaccine. Only painstaking basic science can give us the kind of intimate knowledge of the virus that will show us its critical weakness.

We know that, when the world faces a new and unpredictable threat such as the emergence of H1N1, a robust public health infrastructure is essential for an effective response. In the early 21st century, the cost of inadequate support for public health is all too evident in many places of the world (including parts of the U.S.). Public health is not a light switch to be turned on only after a grave threat emerges.

The greatest lesson of H1N1 is a reminder of the centrality of public health to maintain the health of the population and the necessity to invest continually in our ability to meet societal threats head-on.
Thomas Hartung has taken leadership of the Center for Alternatives to Animal Testing (CAAT) at an interesting time. Thirty years ago, finding alternatives to animal testing was still a fringe idea. Its foundational concept called the 3Rs—reduce the use of animals, refine experiments to minimize distress and pain, and replace animals with alternative techniques—was just beginning to find an audience. Today, alternatives are widely accepted. Fewer animals are now required for regulatory tests, which examine the safety of a product or chemical for human use and which account for the vast majority of animal tests. But CAAT still faces skepticism from industry experts and regulators, as well as animal rights activists. The Center is now working internationally to speed the shift from decades-old animal tests to the use of “modern science to evaluate modern products.” Hartung, MD, PhD, who replaced CAAT’s founding director, Alan Goldberg, in March, recently shared insights about his field and the challenges ahead with Johns Hopkins Public Health editor Brian W. Simpson.
What does animal testing actually mean?

There are three different types of animal-based research. You have basic research where you want to understand the organism and its reactions, as is typically done in universities. Then there is a very targeted type of animal experimentation where you use it to identify new agents, drugs … And the last is regulatory testing, which means testing products to fulfill certain safety assessments before they can go to the market.

Give us an example of a regulatory test.

Let’s take the very famous rabbit eye test. In 1928, a cosmetic product for dyeing eyelashes called Lash-Lure led to five cases of blindness and one fatality. This “Lash-Lure scandal” led to regulation. And an FDA toxicologist, Mr. Draize, developed the rabbit eye test [which requires placing a substance into an albino rabbit’s eyes to measure the reaction]. So since the early ’40s, we have a standardized rabbit eye test that is used for all chemicals, not only those used in cosmetic products. This is quite typical for toxicology. You have a scandal. And this scandal leads to a certain solution with the technology of its time. In all other areas of science, you would have an evolution and the methodologies would change over time. But the fact is that here we have a little bit of island outside of the normal stream of sciences.

Why?

There’s very many reasons for it. Among them, international agreements, which [establish] a certain methodology for a long period of time. They actually often inhibit the advancement of new methodologies.

Where do you find the greatest resistance to new methods?

There’s a certain alliance of the regulators and the regulatory community. For them, the drive to change appears to be mainly motivated by ethics, motivated by animal welfare activism. They have forgotten that it is also about the best possible type of assessment. And it is my strong belief that we need to apply modern science to evaluate modern products—nanoparticles, biological types of drugs, genetically modified organisms and their products—all these are things that we cannot address with methodologies that are simply outdated.

What are some alternative methods to animal testing?

For the cosmetic area, the most important developments have been the use of artificial human skin. Human artificial skin has originally been developed to treat patients with burns but has never made it to clinics.

Can the U.S. and Europe coordinate regulatory testing?

Actually we have a mechanism for this. The OECD, the Organization for Economic Collaboration and Development, has a program where agreements for individual tests to be applied are done and after this agreement, every member country has to accept the other’s test. The big advantage is that this has almost abolished duplicate testing … . And in the end, science is global. Science does not know borders. We’ve had a milestone in the U.S. with the vision document of the National Academy of Sciences’ National Research Council, which in 2007 published “Toxicity Testing for the 21st Century.” And this is having repercussions at the moment worldwide because this vision put forward the concept of moving away from animal testing to a human cell-based toxicology … . This was really a fire for dry wood. Toxicology was waiting for something like this … not changing small patches but really rethinking toxicology. I think this is also one of the attractions for me to be part of this process here.

How do you respond to scientists who say we need more animal testing and more animal facilities to attract top scientific talent?

I think the only thing to ask ourselves is what is the question we want to answer, and what do we want to sacrifice for this? Nobody likes to do animal experiments, and I think that every sane person would agree that doing harm to an animal without need is not acceptable … . Medical research is certainly the area where animal experimentation is best justified if there is no other approach. It’s extremely important to reflect regularly on its necessity. I know a lot of people who have a certain animal model running, and then after they publish, they look for the next problem they can solve with this animal. And this is not what should be driving research.

How reliable are mouse models?

That’s an extremely interesting point. For pharmaceuticals, we go to humans after the whole toxicology test toolbox has been passed. And still up to 30 percent of the substances have side effects that lead to stopping, not marketing the product. And we also have certain problems of repeat experiments. Typically reproducibility of 85 percent is reached when repeating a test in the same animal species—and it is much less when conducting the test in different animal species. So it is a very imprecise tool.

What are your priorities for CAAT?

We are, first of all, the most important center for alternatives in the U.S. CAAT is an extremely important information hub among science, industry, regulators and also, increasingly, animal welfare groups. It is a place of exchange, of understanding, of information. I aim at this moment to develop it further, to be an intellectual center for the paradigm shift in toxicology, a think tank. The vision of the National Academy of Sciences’ document requires quite a dramatic change of approaches in toxicology. And as I said this cannot be done by small changes. You need a quite substantial change, and this requires an out-of-the-box thinking.

That sounds very interesting and hugely ambitious, too.

Yeah. I mean I thought nothing less is expected at Johns Hopkins!
A Simple Way to Save Neonates

What’s the best way to reduce Bangladesh’s high neonatal mortality rates? Many researchers would target health facilities to improve newborn survival, but Abdullah Baqui looked for simpler strategies closer to home.

Baqui, MBBS, DrPH ’90, MPH ’85, an associate professor of International Health, has worked in India, Nepal and his native Bangladesh since 2000, searching for ways to reduce neonatal deaths.

He notes that Bangladesh has many traditional birth attendants, with little to no training, who provide up to 90 percent of delivery care in rural communities. So he and his fellow researchers recruited local women with no previous training and taught them about maternal and newborn care for six weeks. These community health workers (CHWs) offered a starting point for a pilot program launched with funding from USAID and the Bill & Melinda Gates Foundation.

“In a community you can’t do everything,” Baqui says, “but you can do a lot.” He and his fellow researchers worked with an NGO named Shimantik and the Dhaka-based Disease Research, Bangladesh (ICDDB). The researchers spent several months “observing what people do,” he says, “before designing the intervention.”

The resulting intervention first focused on developing “behavior-change messages” for the CHWs and families that showed them how to provide essential newborn care, identify an infant vulnerable to infection, and treat them. Baqui’s team also considered how to deliver the message so that the families would embrace it. He calls this “creating an awareness bridge.” A simple diagnostic tool allowed CHWs to identify infections and treat nearly half of them with injectable antibiotics. They referred urgent cases to facilities, where another third were treated successfully. The interventions also involved working with the Ministry of Health to improve response at primary care facilities.

The result: a community-based initiative that reduced neonatal mortality by a stunning 34 percent in 30 months. Baqui involved community workers in a rigorous evaluation of the program. That study was recognized by The Lancet as Paper of the Year for 2008, one of three so honored.

USAID-Dhaka, excited by the results, authorized $15 million for Jhpiego and Save the Children to adapt the approach elsewhere in Bangladesh. Baqui and his coworkers assisted the ministry in crafting a neonatal strategy that was adopted in March 2009.

Since 2008, Baqui has taken these lessons to countries in Africa. “The interventions are simple and scalable,” he insists, but first you must understand the epidemiology and context of a place. “We [act] on the consensus that this is something good to take to scale,” says Baqui.

—David Taylor

Peter Agre, MD, director of the Johns Hopkins Malaria Research Institute, professor, W. Harry Feinstone Department of Molecular Microbiology and Immunology (MMI), and Nobel laureate, began his one-year term as president of the American Association for the Advancement of Science on February 16. He also was awarded the “Annual Prize for Outstanding Contribution to Lung Research” by the Will Rogers Motion Picture Pioneers Foundation for his groundbreaking work in aquaporins and potential benefits to lung research.

Miriam Alexander, MD, MPH, assistant professor, Population, Family and Reproductive Health (PFRH), was named president of the American College of Preventive Medicine and will begin serving a two-year term on February 1, 2011.

Charles Boul, MD, MPH, MBA, director of the Roger C. Lipitz Center for Integrated Health Care, and the Eugene and Mildred Lipitz Professor in Health Care Policy, Health Policy and Management (HPM), received the 2008 UCLA David H. Solomon Award in recognition of his leadership in the field of geriatrics, and the 2008 Archstone Foundation Award for Excellence in Program Innovation by the Archstone Foundation and the Gerontological Health Section of the American Public Health Association for his work on Guided Care, a new model of comprehensive health care for people with multiple chronic conditions.

Josef Coresh, MD, PhD, MHS ’92, professor, Epidemiology, was selected to serve as director of the George W. Comstock Center for Public Health Research and Prevention in Hagerstown, Md.

Britt Ehrhardt, an MHS student in International Health, was named a Luce Scholar.
for 2009–2010. The prestigious Luce award is endowed by the Henry Luce Foundation to promote American understanding of the Far East by supporting young professionals through a paid internship in the region.

Lynn Goldman, MD, MPH, professor, Environmental Health Sciences (EHS), has been selected as one of Maryland’s Top 100 Women of 2009 by The Daily Record in Baltimore, Md.

Elizabeth Golub, PhD ’01, MPH, assistant scientist, Epidemiology, was recognized by the CDC as co-investigator on two studies listed in their 2008 Compendium of Evidence-Based HIV Prevention Interventions.

Diane Griffin, MD, PhD, the Alfred and Jill Sommer Professor and Chair of MMI, was inducted into the Maryland Women’s Hall of Fame on March 12.

Adnan Hyder, MD, PhD ’98, MPH ’93, associate professor, International Health, and Mathuram Santosham, MD, MPH ’75, professor, International Health, were named Ambassadors in Research!America’s Paul G. Rogers Society for Global Health Research.

Judith Kasper, PhD, professor, HPM, is principal investigator in a national study that has been awarded $24 million over the next five years by the National Institute on Aging.

Joanne Katz, ScD, MS, professor, International Health, was inducted as an Association for Research in Vision and Ophthalmology Fellow, and she was awarded the American Academy of Ophthalmology Recognition of Outstanding Service to the Profession of Ophthalmology.

Michael J. Klag, MD, MPH ’87, dean of the Bloomberg School, was named a member of the Health IT Policy Committee by the Health and Human Services Department.

Thomas LaVeist, PhD, the William C. and Nancy F. Richardson Professor in Health Policy, HPM, was named the recipient of the 2008 Health Disparities Innovation Award.

Jonathan Links, PhD ’83, professor, EHS, has been awarded a five-year, $7.6 million grant from the CDC to study disaster preparedness risks and needs for vulnerable populations.

Luke Mullany, PhD ’05, MHS ’02, assistant professor, International Health, won a Johns Hopkins Center for Global Health Faculty Grant for his project “Impact of iron and zinc supplementation on development in Nepalese children.”

Jean Nachega, MD, PhD, MPH ’99, associate scientist, International Health, was elected a member of the Academy of Science of South Africa.

David Paige, MD, MPH, professor, PFRH, was award the Child Advocacy Award by the American Academy of Pediatrics, Maryland Chapter.

Ellen Silbergeld, PhD ’72, professor, EHS, was named one of the “Women Taking the Lead to Save Our Planet” by Library of Congress Women’s History Month.

Alfred Sommer, MD, MHS ’73, dean emeritus and professor, Epidemiology and International Health, was awarded the 2009 Fries Prize for Improving Health during the 20th National Conference on Chronic Disease Prevention and Control: Cultivating Healthy Communities.

Pamela Surkan, PhD, assistant professor, International Health, won a Johns Hopkins Center for Global Health Faculty Grant for her project “Impact of iron and zinc supplementation on development in Nepalese children.”


Magazine Goes for the Gold (Twice)

Johns Hopkins Public Health won top honors in two categories of a national awards program sponsored by the Council for the Advancement and Support of Education (CASE). The magazine’s 2008 issues, which featured sex and health, illegal guns, backpack health workers in Burma and other topics, won the gold award for Special Interest Magazines in the CASE Circle of Excellence competition. The Spring 2008 special issue about sex and health won the grand gold award in the Periodical Special Issues category, which included 45 entries from university and college magazines across the U.S. “A great school of public health deserves a great magazine. And these awards are a wonderful endorsement of our efforts to translate the School’s important work,” says Paul B. Seifert, associate dean for External Affairs and the magazine’s managing editor. “Kudos goes to editor Brian W. Simpson, art director Robert Ollinger, and the entire magazine team.”
1960s

Amelia Maglacas, DrPH ’68, ScD, honoris causa, was selected by Vanderbilt University (Nashville, Tenn.) as one of the 100 leaders in celebration of the 100th anniversary of its School of Nursing.

1970s

William Beckner, MHS ’75, retired in 1982 as a commander in the Medical Service Corps, U.S. Navy, to take a position at the National Council on Radiation Protection and Measurements (NCRP) as a staff scientist. He retired from that position in 2004 as executive director emeritus.

Deborah Valulick Dawson, PhD, ScM ’76, director of the Division of Biostatistics and Research Design at the University of Iowa College of Dentistry, was awarded the first Morris Bernstein Professorship in Dentistry.

Everette James, MD, ScD ’71, was inducted into the James B. Duke Society, is a member of the Order of the Long Leaf Pine, and is a board member of the Center for the Study of the American South. He authored the book Collecting American Paintings.

Trinidad Osteria, ScD ’71, is the president of Yuchengco Center, a policy research center in De La Salle University in the Philippines, commissioned by UNESCO Regional Office of Asia and the Pacific to produce 13 country monographs on adolescent reproductive health.

William Robinson, MD, MPH ’73, was recognized by Bloomberg School Dean Michael J. Klag for “Exemplary and Dedicated Service” while serving as President of the Alpha Chapter of the Delta Omega Public Health Honor Society (2006–2008).

Edgar Roulhac, PhD, MPH ’75, Johns Hopkins University vice provost for academic services, has been appointed as a commissioner and member of the Middle States Commission on Higher Education. The commission accredits institutions of higher education in Delaware, the District of Columbia, Maryland, New Jersey, New York, Pennsylvania, Puerto Rico, the U.S. Virgin Islands and other locations abroad.

1980s

Sonia Berg, MPH ’84, has begun full-time service with Volunteers in Service to America, on assignment in southwestern Michigan.

Janice Berger, MPH ’82, MSW, is a senior public health analyst for the Federal Health Resources and Services Administration, Maternal and Child Health Bureau. Recently she was awarded the Administrator’s Special Citation for producing “Depression During and After Pregnancy.”

Bette Gebrian, PhD, MPH ’81, RN, received the Global Health Council Best Practice Award in May 2008 for her work in community-based primary health care in Haiti for the past 22 years. She also received the Gordon Wyon Award from the International Section of the APHA.

Small Changes, Big Impact

Switzerland is a small country, Felix Gutzwiller reminds people—as small that it doesn’t have full-time politicians. That can be an opportunity.

That’s how Gutzwiller, MD, DrPH ’80, MPH, came to straddle two worlds: politics and public health. As head of Public Health at the University of Zurich’s medical school, he ran for a seat in the lower house of the Swiss legislature in 1997. He won, and in 2007 won again, this time gaining a seat in the Senate, where he’s the only physician.

“It’s great fun to introduce small changes in legislation that have great impact, greater than my academic papers,” says Gutzwiller.

For example, he introduced a law banning smoking in public indoor spaces, and felt great satisfaction when it passed. His work combines public health issues with legislative nuts-and-bolts, with a portfolio in three main areas: a standing committee on Health and Social Affairs; foreign affairs; and science and culture.

Besides tobacco use, public health issues in Switzerland include drug abuse and mental health problems. Gutzwiller says that the country also faces a rising epidemic of overweight young people. The rate is not as high as in the U.S. but there’s been a marked increase in recent years.

Then there’s the systemic issue of health reform. Like other countries, Switzerland faces a rising tide of health care costs and institutional choices. Gutzwiller discusses these with health professionals in other countries, and watches with interest U.S. health reform efforts.

Gutzwiller points to his years at the Bloomberg School as the time when he first encountered public health mixing with government. “The interaction between Hopkins and Washington was quite new for me,” he says, noting the policymakers who gave talks on campus, and professors who taught from policy experience.

Now his background helps to get laws passed. “I tend to think I have a certain amount of credibility on health issues,” he says. Fellow legislators listen when he advances arguments based on his expertise. On the smoking rule, for example, some were unconvinced, so Gutzwiller marshaled health evidence strong enough to demand action. “It benefited that I knew both sides,” he says. Since passage of the indoor smoking ban, he adds, smoking rates for Swiss men have begun to fall.

Gutzwiller’s senate term will keep him busy until 2011. Then he’s up for re-election.

—David Taylor

Uwe G. Goehlert, MD, MPH ’89, MBA, MSc, CM, FAAFP, FAEP, FACFEE, CHCQM, FAIHQ, former Bloomberg School Preventive Medicine Resident (1990), has expanded his consulting practice to include medical and legal ethics along with quality assurance and utilization review services.

Toby Gordon, ScD ’83, founder of Toby Gordon Advisory, a health care consulting practice, won a 2008 Top 100 Minority Business Enterprise Award. Previously, she worked at Johns Hopkins Medicine, most recently as vice president for strategic planning and market research.

Tee Guidotti, MPH ’81, retired from his position as chair of the Department of Environmental and Occupational Health at the George Washington University School of Public Health and Health Services and professor of occupational and environmental medicine.

Janet Hiller, PhD ’87, is a professor of public health at University of Adelaide (Australia) and directs a health technology assessment group, Adelaide Health Technology Assessment. She was recently awarded a National Health and Medical Research Council grant to investigate disinvestment from existing health care interventions.

Isabelle Horon, DrPH ’80, is currently serving a two-year term as president of the National Association for Public Health Statistics and Information Systems.

Mark B. Johnson, MD, MPH ’85, is the new president of the American College of Preventive Medicine (ACPM). He follows fellow alumnus, Michael Parkinson, in this office, and he will be working with fellow alumna, Miriam Alexander, as the new president-elect.
Ping Ki, ScD '82, has finished postdoctoral studies at the School of Medicine and currently works as a consultant in chemical and life sciences in the Hong Kong–South China region.

Alan Lyles, ScD '86, MPH '81, was elected in 2008 to be a Fellow of the National Academy of Public Administration.

Lynn McQueen, DrPH, MPH '89, MS, BN, was recently appointed Director of Scientific Collaborations for the U.S. Department of Veterans Affairs (Washington, D.C.).

Angela Mickalide, PhD '85, CHES, was the recipient of the Society for Public Health Education's (SOPHE) “2008 SOPHE Trophy.” Residing in Kensington, Md., she is the Director of Education and Outreach at the Home Safety Council.

Larry Moulton, PhD '87, professor in the Bloomberg School’s Department of International Health, recently published Cluster Randomised Trials, with Richard J. Hayes.

Sylvie Muldooon (née Steber), MHS '80, is chief financial officer for Washington Regional Transplant Community, the federally designated organ and tissue donor agency for the Washington, D.C., region.

Susan Shochet-Abramson, MHS '82, is director of the Center for Public Health Policy with the American Public Health Association in Washington, D.C.

Susan Strand, ScM ’83, is a technical adviser at the Ministry of Education, Department of English Language Instruction in Dakar, Senegal, a post funded by the English Language Fellowship Program of the U.S. Department of State.

Martha Teitelbaum, PhD ’86, MPH, has begun a consulting business after almost 16 years as a health researcher for the Children’s Defense Fund in Washington, D.C.

Linda Wagner, MPH '83, director of Performance Improvement at Shands Jacksonville Medical Center, assisted the Shands Healthcare System to earn recognition as a Florida Governor’s Sterling Award Recipient 2008.

Holly Wieland, MPH '87, RN, currently works in the Office of Vaccines Research and Review at the Food and Drug Administration, mainly on bacterial vaccine submissions.

1990s

Doug Armstrong, MHS ’98, was recently promoted to Director of Policy Analysis at the BlueCross and BlueShield Association.


Rashid Chotani, MD, MPH '96, DTM, is the Scientific Director/Chief Science Manager at the Joint Project Manager Chemical Biological Medical Systems, U.S. Department of Defense. He is also an adjunct assistant professor at the Uniformed Services University of the Health Sciences in the Department of Preventive Medicine and Biometrics, and is a member of the Pandemic Influenza Coordinating Committee for the Office of the Maryland Governor.

Jeffrey Crowley, MPH ’94, former senior research scholar at Georgetown University’s Health Policy Institute, was appointed by President Obama as the Director of the Office of National AIDS Policy. He is coordinating the federal government’s efforts on HIV/AIDS policy and helping guide the administration’s development of disability policies.

Joan Dawson, MPH ’97, is leading a delegation to Guatemala to research violence against women and the sociopolitical context of femicide in Guatemala. The delegation is being sponsored jointly by the Guatemala Human Rights Commission and the Virginia Commonwealth University.

Alka Dev, MHS ’98, has led, since 2003, the implementation of tuberculosis control projects in Kosovo, Romania and Mexico focused on capacity building of the TB program and inclusion of minority areas. Her most recent work in Mexico was to develop a community tuberculosis care strategy for rural and ethnic minority communities.

Karla Eisen, MPH ’96, MSW, has worked in program evaluation and research, with an emphasis on qualitative research, mixed methods and survey operations at Westat (Rockville, Md.). Her latest project involves dietary and other health risk exposures among an American Indian population in the Pacific Northwest.

Angela Foehl, MPH ‘94, director of Private Health Plans Advocacy with the American Speech-Language-Hearing Association (Rockville, Md.), lobbies private health plans such as BlueCross BlueShield to provide equitable coverage and reimbursement for the services of speech-language pathologists and audiologists.

Louis Francescutti, MPH ’94, a professor at the School of Public Health at the University of Alberta recently founded the Coalition for Cellphone Free Driving and Injury Alberta. In 2005, he was selected as one of the hundred most influential physicians in Alberta in the past one hundred years. He is a Fellow of the Royal College of Physicians and Surgeons of Canada and the American College of Preventive Medicine.

Valerio Gennaro, MD, PhD ’95, recently published two articles in the International Journal of Cancer.

Francisco Gutierrez, MD, MHS ’95, MHA, was recently appointed senior vice president for medicine and health sciences for Laureate Education (Baltimore, Md.).

Lynne Jones, PhD ’97, is president of the Society for Biomaterials and was elected as a Fellow, Biomaterials Science and Engineering (International Union of Societies for Biomaterials Science and Engineering). She also was elected as a Fellow, American Institute for Medical and Biological Engineering.

Joel Levit, MD, PhD ’94, is an attending physician, Department of Emergency Medicine, Kaiser Santa Clara Medical Center, with a Clinical Instructor appointment at the Stanford University School of Medicine. He co-authored the textbook Clinical Emergency Medicine Casebook, published in April (Cambridge University Press).

Nanit Mishori, MD, MHS ’99, is on faculty in the Department of Family Medicine at the Georgetown University School of Medicine. She continues to write about health and medicine and was recently named Contributing Health Editor at Pasadena Magazine.

Jacqueline Patterson, MPH ’98, MSW, was recently elected co-chair of Health GAP (Global Access Project), which works on access to medicine, health care and treatment for AIDS globally.

Mikko Paunio, MD, MPH, MHS ’93, Senior Medical Officer, Ministry of Social Affairs and Health in Finland, co-authored the World Bank’s Environmental Health and Child Survival: Epidemiology, Economics, Experiences.

Melissa Perry, ScD ’93, MHS ’90, associate professor of occupational epidemiology, Department of Environmental Health, Harvard School of Public Health, has been elected to the Board of Directors of the American College of Epidemiology. At Harvard she is co-director of the Occupational Injury Prevention Training Program and the director of the MPH in Occupational and Environmental Health.

Meet Philippa

The Bloomberg School welcomes Philippa Moore, MA, as associate director for Alumni Relations. Philippa will be the School’s main point of contact for its 18,000 alumni. She comes to Hopkins from American University Washington College of Law, where she oversaw alumni relations for the International Legal Studies Program. She can be reached at pmoore@jhsph.edu; 410-614-5019. Ricky Fine, long-time Alumni Relations director, is moving up the ladder to concentrate on major gifts development.
Monique Petrofsky, MPH ‘95, a nurse-epidemiologist with the Coordinating Office for Global Health, CDC, was recently awarded Saint Anselm College’s Humanitarian Award in recognition of her contributions to global health improvement. She has worked with the UN, UN Foundation, International Foundation of the Red Cross and Peace Corps.

Ravi Rao, MD, PhD ’97, is a consultant and trainer of emotional intelligence for executives in the entertainment, financial services, public sector and health care industries. He also is a member of the Board of Directors of the Make-A-Wish Foundation of Los Angeles.

Marguerite J. Ro, DrPh ’99, MPH ’94, deputy director, policy and programs, oversees the health programming and the policy advocacy work for the Asian and Pacific Islander American Forum.

Sheila Weiss Smith, PhD ’96, was recently appointed director of the Center for Drug Safety at the University of Maryland. Currently on sabbatical at the National Cancer Institute, she is a professor at the University of Maryland and is an adjunct faculty member at Hopkins.

Richard Evan (Rick) Steele, MD, MPH ’90, PDC, BCSHPM, has recently published “A Novel and Effective Treatment Modality for Medically Unexplained Symptoms” in the Journal of Pain Management.

Molly Strachan, MHS ’98, accepted a position as director of monitoring and evaluation with Columbia University’s International Center for AIDS Care and Treatment Programs in Dar-es-Salaam, Tanzania.

Judith Weinstein, MPH ’91, MA, is associate director for Refugee Health Programs at Heartland Alliance for Human Needs and Human Rights, in Chicago.

Michel Youwakim, MPH ’98, MBCh, works with the Ministry of Health in Kuwait on hepatitis B transmission and risk factors, and in Egypt with USAID, the Ministry of Health and colleagues on maternal mortality.

2000s

Ali Alam, MPH ’06, launched “Helping Hands for Cancer Patients” this year in order to raise cancer awareness and foster diagnosis and management for patients in need at Shifa Foundation Falahree Clinic, H-8/4, in Islamabad, Pakistan.

Dara Antrum, MHS ’08, is the health advocacy regional manager at Community Catalyst, a national advocacy organization based in Boston, Mass., where she oversees the regional health care reform efforts of the 11-state Southern Health Partners program.

Tanya Barber, MHS ’00, JD, was admitted to the Maryland Bar in 2008 and is an attorney with the Maryland Commission on Human Relations.

Daniel Berg, MPH ’08, provides primary care at a local federally qualifying health clinic in St. Louis, while also coordinating local public health projects.

Mark Bittle, DrPH ’06, MBA, was promoted to vice president of Ambulatory Services for Johns Hopkins Medicine.

Michelle B. Cang, MHS ’06, has been accepted to an osteopathic medical school at AZCOM, Midwestern University.

Mireille Mpoudi Ngole Etame, MPH ’08, is a senior health specialist at the NIH, after working at Pneumon Adip.

Miryam Granthon, MPH ’07, a Congressional Hispanic Caucus Institute (CHCI) alumna, served on the HHS Spanish Heritage Month Committee and is the secretary for the HHS Hispanic Employee Organization.

Brendan Hanley, MPH ’03, is the Chief Medical Officer of Health in Yukon, Canada, where he is responsible for the public health of a region with a population of 30,000.

Matthew Kelley, MPH ’08, has been named HHS Program Analyst for the Office of the City Administrator, Executive Office of the Mayor, Washington D.C.

Christina B. Khaotham, MPH ’08, MSN, was appointed to the CDC’s Epidemic Intelligence Service. She is the fourth nurse graduate of the National Institutes for Occupational Safety and Health Educational Research Center’s Occupational and Environmental Health Nursing Program.

Somchai Laowattana, PhD ’05, authored Left Insular Stroke Is Associated with Adverse Cardiac Outcome, published by Verlag VDM, Germany.

Hong Li, MD, MPH ’06, worked at Johnson & Johnson as a senior clinical research scientist and manager, Safety and Risk Management, and is now at Osaka Pharmaceutical Development & Commercialization as Associate Director for Clinical Global Development, CNS.

Sara Lowther, PhD ’08, MPH, currently works in the CDC’s Epidemic Intelligence Service and is posted at the Minnesota Department of Health.

Eric Mah, MHS ’03, is the director of the human research protection program at the University of California, Davis.

Robert K. Musil, PhD, MPH ’01, Chairman of the Board of 2020 Vision: Environment, Energy and Socially Conscious Products from All Over the World.

Cindy Parker, MD, MPH ’00, co-authored Climate Chaos: Your Health at Risk (What You Can Do to Protect Yourself and Your Family), which may be the first book written specifically for a lay audience about the health effects of climate change.

Gita Pillai, PhD ’01, is in her fifth year at the Regional Director for MCH and Deputy Chief of Party for John Snow Inc. and the ZdravPlus Project in Central Asia.

Christina Polyak, MPH ’01, is completing her internal medicine residency at the University of Washington (Seattle) and will start her infectious diseases fellowship in July.

Lisa Purvis, MHS ’00, MBA, is a senior research program manager at Dartmouth Medical School, Department of Pediatrics. She is also a faculty member at Dartmouth’s MPH program, and she is an adjunct faculty at the University of New Hampshire’s MPH program and at the Bloomberg School.

Sandy Summers, MPH ’02, recently co-authored Saving Lives: Why the Media’s Portrayal of Nurses Puts Us All at Risk, which examines the global nursing shortage and its repercussions.

Jennifer Taillie, MHS-HFM ’05, continues to work for Stockamp, a Huron Consulting Group Practice.

A. Udaya Thomas, MPH ’04, MSN, is a senior program officer in the National Programs Operation Unit at Jhpiego. A registered nurse, she also holds an adjunct faculty member position at the Johns Hopkins School of Nursing.

Salim Al Wahaibi, MPH ’00, Director, Environment & Occupational Health, has been nominated as Chairman of Oman Public Health Association (OPHA) and as Vice Chairman of the National Committee in Occupational Health and Safety.

Erin Winstanley, PhD ’09, after completing a postdoctoral research fellowship at the Behavioral Pharmacology Research Unit at the Johns Hopkins School of Medicine, accepted a position as an assistant professor at the University of Cincinnati (UC) College of Medicine, Department of Psychiatry, and is also the Director of Health Services Research and Delivery at a mental health facility affiliated with UC.

Shana Yansen, MHS ’02, works for the Bloomberg School’s Center for Communication Programs on projects in Pakistan, and recently launched Jute and Jackfruit, a company that offers organic, sustainable and socially conscious products from all over the world.

Hung-Chieh Yen, MD, PhD ’07, ScM, is the director of the Department of Psychiatry, E-Da Hospital, Kaohsiung, Taiwan. He is also assistant professor at the College of Medicine, I-Shou University, Kaohsiung, Taiwan. The International College of Geriatric Psychoneuropharmacology (ICGP) awarded him the International Junior Investigator Award in 2008.

Elizabeth Yi, MPH ’08, MBA, is the clinical research site manager at the Children’s Hospital of Orange County’s research institute.
The Best Investment

No one needs to tell you that the economy has been rocky for much of the past year. Businesses have closed, people have lost jobs, corporate titans have tumbled, and belts have been tightened across the U.S. But let me share some good news. Even during hard economic times, people retain a instinctual desire to give. It may not be in the amounts they would like or the frequency they would want, but they still give.

As we entered the final phase of the University’s Knowledge for the World fundraising campaign, the Bloomberg School was substantially shy of its goal. Those of us in development drew a collective breath, worried that the retreating economy would close wallets and leave important parts of our mission unfulfilled. If not for the trust of our donors and their vision, we would not have come close to achieving our goal for the eight-year campaign, which concluded December 31st. In fact, we not only reached our goal of $500 million, we surpassed it by more than 16 percent. With our donors’ support, we have been able to endow three department chairs, seven professorships and 49 scholarships and fellowships. We also have been able to upgrade and expand the Wolfe Street Building to almost 1 million square feet.

The remarkable conclusion to the campaign is a great testament both to the vision of the Bloomberg School’s family of donors and their commitment to helping us provide lifesaving research, train public health leaders and advance public health practice. As Dean Michael J. Klag frequently reminds us, fundraising is not about the money but what we can achieve with it. I witnessed the most recent of our School’s achievements on May 20 as 776 students received their diplomas at convocation. This is one of our greatest legacies—a new generation of leaders who will change the future of public health.

Everyone who contributed to the School made the best possible investment: It not only will endure rocky times but will pay dividends for public health for decades to come.

We all owe you our deepest thanks.

Paul B. Seifert
Associate Dean, External Affairs
Johns Hopkins Bloomberg School of Public Health
pseifert@jhsph.edu


Letters to the Editor

Taking Stock of Comstock
Thank you for the remembrance of Dr. George Comstock (“Always a Teacher,” Fall 2008). This world has seen very few such giving persons. One could never overestimate the value of such a person. It would be difficult indeed to know how many lives his contributions have saved.

A. Thannisch, OD
Kingston, Okla.

Story Under Fire
“Cities Under Fire” [Fall 2008] was a most revealing article that clearly indicates where the Left in this country wishes to go … on a worldwide basis: Make all guns illegal. It will be as successful as the war on drugs.

H. Hall
via email

Reading the “Cities Under Fire” cover story, I was pleased to discover that the public health approach to “the gun problem” has undergone a much-needed maturation and a shift towards evidence-based policy. For too long, the public health community has relied on advocacy-generated “facts” and emotional anecdotes to drive firearm-related policy. The initiatives of Michael Bloomberg and the Mayors Against Illegal Guns coalition represent the new direction that public health must take in order to effectively address illegal gun-trafficking and violence. Such responsible use of evidence is critical for making future policy decisions, particularly when public funding will be even more limited.

Emily L. Evans, MPH ’09, MA
Pittsburgh, Pa.

In epidemiological terms, it is fair to argue that among certain segments of society, the ready availability of firearms may contribute further to an already significant risk more intrinsically linked to class and poverty. However, casting firearms as indiscriminate pollution is an oversimplification that risks detracting from a meaningful and productive public policy debate.

Remington Nevin, MD, MPH ’04
Baltimore, Md.

Rooting for “Grassroots”
I am a Nigerian presently in the MPH program. I cannot tell you how this article [“Grassroots Revolution,” Fall 2008] was an eye-opener for me to what is really happening in my home country. The extent of the problem of maternal and child mortality is one I have never envisaged, partly because I lived in the south all my life. This [Center for Communications Program] project is so powerful and will definitely have a great impact. I know this article will encourage a lot of Nigerians to head back home and pitch in to improve the depressing state of the health system in our country. It’s so sad [but] thanks for bringing it to our awareness.

Yewande Alade, MPH ’09
Ibadan, Oyo State, Nigeria

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