SOMnews has expanded! In addition to our features in Clinical Care, Research, Education, and Community Outreach, we have included a special section on the Culture Transformation Initiative.

DEAN’S MESSAGE

Women’s History Month affords us an opportunity to celebrate the significant roles women play in the School of Medicine’s longstanding and continuous record of achievements, milestones, and successes. Women represent almost half of our faculty population, and over half of our medical student population. These physicians, scientists, staff, students, and trainees are leading advancements in equality and inclusion in the biomedical, research, and education fields. In the words of the highest-ranking elected woman in the United States, the Speaker of the House of Representatives, Nancy Pelosi, “Women are leaders everywhere you look — from the CEO who runs a Fortune 500 company to the mother who raises her children and heads her household. Our country was built by strong women, and we will continue to break down walls and defy stereotypes.”

Last year, we received a significant opportunity to break down walls by launching the Culture Transformation Initiative (CTI). The leadership of Dr. Nancy Lowitt has enabled us to take great strides in promoting equal opportunity and improving behavior within our academic community. We take very seriously the concerns of women, equity, and professional conduct, which the CTI addresses through a multitude of methods. We expect our approach to equity in compensation, promotions, and opportunities to become a national model. Key to enforcing behavioral changes is recognizing — and honoring — the differences within our academic community. Dr. Margaret McCarthy recently conducted research, published in Neuron, which could ultimately help us understand the differences between women and men originating from early brain development. The School of Medicine’s mission requires the diversity of our team to ensure we have access to the potential of the most creative and varietal biomedical solutions and discoveries.

In addition to Dr. Lowitt and Dr. McCarthy, a number of women at the School of Medicine are leading critical initiatives. Dr. Carissa Baker-Smith is creatively spearheading efforts on the medical technology front through her utility of 3D printing for an infant patient’s defective heart. It takes courage to try something new or not yet commonplace, so I applaud this dedication to do whatever it takes to discover the best solution for her patient (see page 4). One of our medical students, Sara Lever, Class of 2020, is carrying the School of Medicine’s mission across borders and leading OB-GYN initiatives in Guatemala. Her work with the New York-based non-profit, Saving Mothers, is enhancing maternal and child health outcomes in Santiago Atitlan. She is empowering local community members to serve as leaders and be equipped with the medical tools and knowledge for the safe pregnancies and deliveries of their family, friends, neighbors, and colleagues (see page 9).

The School of Medicine aims to foster a culture in which we defy stereotypes, push breakthroughs and take risks. Our women faculty, staff, trainees, and students are helping us do just that. May we feel inspired and motivated to emulate the courage, creativity and compassionate spirit of our fellow colleagues and classmates.

In the relentless pursuit of excellence, I am Sincerely yours,

Dean, University of Maryland School of Medicine

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Given the many differences between men and women, it's no surprise that men and women experience disease and respond to medication in vastly different ways. Understanding these sex-based differences in physiology and responses to therapeutics could one day lead to advanced treatments designed specifically for women. Through clinical, preclinical, and basic research, researchers at the University of Maryland School of Medicine (UMSOM) are producing data that will improve our understanding of the unique physiology of women — and promote better options for treatment and healthier lives.

New Research in Postmenopausal Women
A major change in a woman’s life that affects many aspects of her health is menopause. Post-menopausal women often experience shifts in metabolism, as well as an increased risk of developing osteoporosis and obesity. Obesity, in particular, creates additional complications in a woman’s health, such as increased inflammation and increased risk of cancer. Whether weight loss alone is enough to correct these complications is unknown. To seek an answer, UMSOM’s Alice Ryan, PhD, Professor of Medicine, and Heidi Ortmeyer, PhD, Assistant Professor of Medicine, studied whether weight loss alone or weight loss combined with exercise was necessary to fix obesity-induced changes in postmenopausal muscle metabolism.

Altered muscle metabolism causes a condition called metabolic inflexibility, which occurs when the body cannot properly switch from using fats to sugar as an energy source. Consequently, there is too much sugar (glucose) in the circulation and the body responds by producing too much insulin, resulting in hyperinsulinemia. The women in the study had hyperinsulinemia, resulting from their muscles’ inability to properly switch from fatty acid metabolism to sugar metabolism in response to insulin. Some of the women in the study were placed on a weight loss program without aerobic exercise, while others were placed on a program that included aerobic exercise. The researchers found that weight loss alone was not enough to improve the muscle response to insulin, but six months of aerobic exercise, combined with weight loss, made a difference.

“This study provides critical insight into understanding the intersection between weight and metabolism in postmenopausal women and shows how lifestyle changes can profoundly affect health status,” says Dr. Ryan.
Sex-Based Differences in Response to Medication and Drugs of Abuse

Estrogen and progesterone — reproductive hormones found in women — control the onset of puberty, menstruation and fertility, along with the onset of menopause. These hormones also contribute to cancers in women’s reproductive organs and breasts, affect brain function, and influence sleep and behavior. Because of these hormones, women face significantly different health challenges than that of men. How women respond to medications and drugs of abuse is an understudied area, because many clinical trials involve men rather than women.

Jessica Mong, PhD, Professor of Pharmacology, recently studied sex-based differences in the response to medications and abused drugs using pre-clinical models. Aromatase inhibitors (AIs) block the enzyme that makes estrogen and are commonly used in the treatment of breast and reproductive cancers. Letrozole is an AI that is used in patients with estrogen-responsive breast and reproductive cancers. This therapy causes hot flashes, sleep disturbances, impaired memory, and mood changes. Sometimes the side effects are so unpleasant that the patient discontinues taking the drug.

Dr. Mong’s study used primate models to explore sex-specific effects of letrozole. She found that letrozole decreased estrogen outside the brain, as expected. The drug also increased estrogen within some parts of the brain. Dr. Mong specifically investigated the animals’ responses to the drug that related to the side effects reported by female patients. She examined the effect on memory and temperature regulation, which are controlled by different areas of the brain. In the region controlling memory, both males and females had a similar response to letrozole. However, in the region controlling temperature, the response was sex-specific. Only the female animals had disrupted temperature regulation.

“These results from this study show that letrozole has a counterintuitive impact on the brain and support the need to develop new therapies that minimize these adverse effects,” says Dr. Mong.

Another focus of Dr. Mong’s lab is understanding the effects of ovarian hormones on the brain’s response to drugs of abuse. Methamphetamine, highly addictive stimulant drugs, increase sexual urges, putting women at risk for unintended pregnancy, contracting sexually transmitted diseases, and depression. Using rodent models, Dr. Mong determined how methamphetamine and female sex hormones interact to change the brain. She found that methamphetamine changed the activity of enzymes that modify DNA. These DNA modifications happened in regions of the brain associated with sexual urges.

“Such DNA modifications change the expression of genes in the brain and cause changes in neuronal circuits. These modifications are also associated with mental health issues, and they tend to persist in the brain for a long time,” she notes.

Dr. Mong blocked the natural production of estrogen and progesterone, giving her control over the amount of these hormones in the rodent brains during a methamphetamine “binge.” Female rodents that went on a single three-day methamphetamine binge altered the amounts of the DNA-modifying enzymes. These changes varied if the rats were also given estrogen and progesterone. In the presence of these female hormones, methamphetamine enhanced the activity of the neuronal circuit that drives sexual behavior.

Understanding at the molecular level how the brain changes in response to drug abuse will help researchers develop new strategies for intervention and treatment of addiction that will in turn lead to treatments tailored for women.
When she held the small, life-sized model of her patient’s heart in her hand for the first time, Carissa Baker-Smith, MD, MS, MPH was astonished. “It was completely realistic in its detail,” recalls the pediatric cardiologist, who is an Assistant Professor in Pediatrics at the University of Maryland School of Medicine (UMSOM). “The model could even be opened to view the interior.”

Such 3D printed anatomical models, while novel, are rapidly gaining wider usage by today’s physicians and surgeons for the purposes of analysis and even practice in advance of complex procedures. Invented in 1984, 3D printing involves taking a digital model of an object and rendering an exact copy in a series of successive layers of material, usually a durable plastic. By the early 1990s, 3D printing was first used in medical applications such as dental implants and custom-made prosthetics. Today, this technology is being employed in a variety of ways, including the creation of bio-printed artificial tissue and organs, surgical tools, and in the case of Dr. Baker-Smith, patient-specific surgical models.

Dr. Baker-Smith’s own motive for employing 3D printing lay in her concern for her patient, Syah. The four-month-old has a rare congenital heart condition called double-outlet right ventricle (DORV). In cases of DORV, the two great arteries (e.g., aorta and pulmonary artery) of the heart are connected solely to the right ventricle, rather than in the normal anatomic position, with the aorta connected to the left ventricle.
UMSOM is a national leader in children’s health care research. Our highly respected and well-funded research activities allow us to search for cures to childhood illnesses.

Syah recovered well and is presently back home with her family. On the strength of this experience, Dr. Baker-Smith intends to use 3D printed modeling again. “I think there will be cases where it will be useful,” she says. “For patients who have complex intracardiac anatomy issues, I think it’s important to be able to hold an exact model of the heart in your hand and to look within it. The information it provides can save time and even improve morbidity.”

“Knowing what you are getting into before you go into the OR is key. That is what this 3D printed model was able to provide.”

and pulmonary artery connected to the right ventricle. Persons with DORV also typically have a large hole in the wall separating the ventricles, called a ventricular septal defect (VSD). This VSD is not always in close proximity to one of these great arteries, making repair challenging.

“Ideally, what you want to be able to do is to close the VSD so that there is one great artery connected to one ventricle,” says Dr. Baker-Smith. “To accomplish that, the attending surgeon will close the VSD while properly connecting, in some cases, the aorta to the left ventricle and the pulmonary artery to the right ventricle. But in the case of Syah, what was not clear was the proximity of the VSD to her two great arteries.”

Dr. Baker-Smith knew that this anatomical “blind spot” presented problems. As Syah would be on a heart-lung machine and her heart stopped during the operation, every moment counted. “I just wanted the surgeon to have all of the information he needed before he took my patient to the operating room.”

In conversation with her colleagues Stacy Fisher, MD, Associate Professor of Pediatrics, and Nicholas Pietris, MD, Assistant Professor of Pediatrics, along with the help of Jeffrey Hirsch, MD, Assistant Professor of Diagnostic Radiology and Nuclear Medicine, who is knowledgeable about 3D printing and has a printer himself, a 3D model of Syah’s heart was generated.

In short order, a CT scan was ordered and performed, and the data from the CT was then forwarded to Dr. Hirsch’s printer to produce the anatomical model. “It was perfect,” Dr. Baker-Smith recalls, “and the surgeon, Sunjay Kaushal, PhD, MD, Professor of Surgery, loved it. He said that when he went in, Syah’s heart looked exactly like the printed model.”

Because the model revealed the VSD’s position to be out of reach, Dr. Kaushal instead performed a bidirectional Glenn procedure, a less invasive surgery that did not involve opening Syah’s heart to complete the repair.
The School of Medicine would like to recognize our major grant makers. The following physicians and scientists are leaders in their field and the foundation for new research discoveries transforming the UMSOM.

**Investigators with 4 R01s or R01-equivalents**

1. Joseph Cheer, PhD  
   Professor of Anatomy and Neurobiology  
   Co-Director of the Lung Biology Research Program  
   Director, Basic Research, Division of Pulmonary and Critical Care Medicine

2. J. Marc Simard, MD, PhD  
   Professor of Neurosurgery

3. Jian-Ying Wang, PhD  
   Joseph and Corinne Schwartz Professor in General Surgery  
   Professor of Surgery

4. Peixin Yang, PhD  
   Professor of Obstetrics, Gynecology and Reproductive Sciences

**Investigators with >$1.3M in direct costs**

1. Owen White, PhD  
   Professor of Epidemiology and Public Health  
   Associate Director, Institute for Genome Sciences  
   Director of the University of Maryland Center for Health-Related Informatics and Bioimaging

2. Myron Levine, MD, DTPH  
   Simon and Bessie Grollman Distinguished Professor  
   Professor of Medicine  
   Associate Dean for Global Health, Vaccinology and Infectious Diseases, Center of Vaccine Development and Global Health

3. Marcelo Sztein, MD  
   Professor of Pediatrics  
   Associate Director for Basic and Translational Research, Center of Vaccine Development and Global Health

4. Jay Magaziner, PhD, MSHyg  
   Professor of Epidemiology and Public Health  
   Chair of the Department of Epidemiology and Public Health

5. Robert Gallo, MD  
   The Homer and Martha Gudelsky Distinguished Professor in Medicine  
   Co-Founder and Director, Institute of Human Virology

6. Margaret McCarthy, PhD  
   Professor of Pharmacology  
   Chair of the Department of Pharmacology

7. Joao Pedra, PhD  
   Associate Professor of Microbiology and Immunology

8. Claire Fraser, PhD  
   Dean’s Endowed Professor  
   Professor of Medicine  
   Director of the Institute for Genome Sciences

9. Eileen Barry, MD  
   Professor of Psychiatry  
   Professor of Medicine

**Investigators with 3 R01s or R01-equivalents**

1. Anna Birukova, MD  
   Professor of Medicine  
   Co-Director of the Lung Biology Research Program  
   Director, Basic Research, Division of Pulmonary and Critical Care Medicine

2. Thomas Blanpied, PhD  
   Associate Professor of Physiology  
   Director of the CIBR/Physiology Confocal Core Facility

3. Manhattan Charurat, PhD, MHS  
   Professor of Medicine  
   Division Director of Epidemiology & Prevention, Institute of Human Virology

4. Alan Faden, MD  
   David S. Brown Professor in Trauma  
   Professor of Anesthesiology  
   Director of the Shock, Trauma & Anesthesiology Research (STAR) Center  
   Associate Dean for Trans-Campus Research Advancement

5. Deanna Kelly, PharmD, BCPP  
   Professor of Psychiatry  
   Director, Treatment Research Program at the Maryland Psychiatric Research Center

6. L. Elliot Hong, MD  
   Professor of Psychiatry

7. Claire Fraser, PhD  
   Dean’s Endowed Professor  
   Professor of Medicine  
   Director of the Institute for Genome Sciences

8. Robert Schwarcz, PhD  
   Professor of Psychiatry

9. Joao Pedra, PhD  
   Associate Professor of Microbiology and Immunology

10. Robert Gallo, MD  
    The Homer and Martha Gudelsky Distinguished Professor in Medicine  
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**Data**

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**Direct costs**

- Direct costs are for FY18 only and are based on NIH Exporter data and include awards for which an NGA was issued during the Federal FY18 (October 1, 2017 through September 30, 2018). Thus, grants in a no-cost extension are not included in these totals. Multi-PI R01s are counted towards the PI R01 total, but supplements are not included. R01-equivalents are defined by the NIH as including: R21, ROI, R23, R29, R37, and RF1.
New Resource Investments Take CIBR to Next Level of Support

The Center for Innovative Biomedical Resources (CIBR) announced that it has made significant investments in new resources in order to provide the most effective support possible for UMSOM investigators conducting basic, pre-clinical, and clinical research.

The two newest additions are:

- A FEI Talos CryoElectron Microscope, which will advance structural studies of large macromolecular complexes and drug development initiatives.
- A Nikon QI Spinning Disk Confocal Microscope, which enables multicolor imaging of live samples. The new confocal microscope setup also includes a Hamamatsu sCMOS camera for capturing high-resolution images and software for performing automated image reconstruction.

Additional equipment and upgrades to existing equipment are pending through National Institutes of Health (NIH) shared instrumentation grants. These include a new Seahorse System for measuring cellular metabolism and upgrades to a confocal microscope.

New services are now available as well:

- A new CRISPR service for gene editing will initially be provided through the Translational Core Laboratory and may develop into a stand-alone core as demand for this service grows. Tami Kingsbury, PhD, Assistant Professor of Physiology, directs the CRISPR service.
- A new Virus Vector Core is currently under review. This core, directed by Ramesh Chandra, PhD, Research Associate in Anatomy and Neurobiology, will provide stock viruses, custom vectors, expression validation, and shRNA screening, among other services related to the use of viruses as vectors.

CIBR Metrics

FY 2018

- $123M: Total value of research supported by CIBR Cores (direct & indirect costs combined);
- 350 publications utilized the CIBR Cores, with 14 percent of these publications using more than one Core over an 18-month period;
- 365 different PI Labs, with 20 percent more labs using CIBR Cores;
- 465 different sponsored grants/contracts invested funds at CIBR Cores.

There are over 25 Cores available to support UMSOM faculty research, and most are accessible through CIBR’s online iLab portal. Researchers are encouraged to visit medschool.umaryland.edu/cibr and to contact CIBR Administration or Core directors for more information about how the Cores can support and strengthen their research.
From Dreams to Reality

Medical Students Embark on the Next Phase of Their Medical Training

After years of hard work, determination, and personal sacrifice, University of Maryland School of Medicine (UMSOM) medical students’ dreams finally came to fruition at the Match Day ceremony on March 15. At exactly noon, medical students at UMSOM as well as some 30,000 students across the U.S. received an envelope telling them where they will fulfill their residency training. It was truly a day filled with excitement and anticipation for UMSOM’s Class of 2019 at Baltimore’s famed Hippodrome Theatre.

During the Match Day celebration, students selected their own soundtrack that played as they walked onto the stage. Many students danced their way up to applause. This year, 162 UMSOM students matched at 73 different hospitals in 29 states. Fifty-seven members of the Class of 2019 will stay in Maryland for their residency training.

According to the National Residency Matching Program, this year’s Main Residency Match was the largest in history, exceeding the more than 43,000 applicants who registered for the 2018 Match and the more than 33,000 positions offered last year.

Among UMSOM’s graduating students is David Hurwitz. He arrived at the school after leaving a decade-long private business sector career in biotechnology. For years, he worked side-by-side with primary care physicians and felt an insistent call to join the front line of community care. He hopes to combine his medical training with his expertise in business for a career in geriatrics. “Being the ‘old man’ of my class with two school-aged children comes with some challenges, but also several unique advantages. I always have a willing volunteer to play the part of the standardized patient!” he says. He hopes that he has inspired others to appreciate that one is never too old to pursue their dreams. Hurwitz, who is set to earn his medical degree in May, matched at Johns Hopkins Bayview in internal medicine.

Kaylie Miller and Michael Miller loved math and science from a very young age. The brother and sister, two members of a set of triplets, grew up in Frederick County, Maryland. Their early exposure to science and mathematics sparked a fire in their aspirations that ultimately lit a path all the way to medical school. Michael is interested in epips and the role of palliative care in critical care-level settings, while Kaylie is interested in HIV and substance abuse. Interestingly, their sister Claire — the third member of the trio — is in medical school in New York and will be graduating this year. They were excited to find out that they both matched in internal medicine at the University of Pittsburgh Medical Center.

Some members of the class traveled far and wide to follow their dreams. Elise Ma moved from her hometown of Los Angeles to Baltimore to pursue an MD and PhD in neuroscience. She completed a few pre-med courses while pursuing her bachelor’s degree in psychology at UCLA, but it wasn’t until she began working in a research laboratory that she envisioned a career in medicine. She will be returning to UCLA, where she was matched with a competitive program in ophthalmology. She hopes to use her background in neurotrauma toward a career that includes both scientific and clinical investigations in neuro-ophthalmology.

Daniel Lee’s activism began in college, engaging in several community-based initiatives throughout Baltimore. Through these experiences, he began to understand the intersections among housing, health and gender. During his studies at UMSOM, he served on several student councils and groups and traveled to Nigeria to work on a prevention of mother-to-infant HIV transmission project. While 82 percent of doctors matching into obstetrics and gynecology (OBGYN) in the U.S. are women, Lee has decided to follow the same path. “A career in OBGYN will offer me unique opportunities to address gender issues both here in the U.S. and abroad,” he says. He matched with UCLA in obstetrics and gynecology.
The benefits of international health electives have long been identified by medical institutions. The University of Maryland School of Medicine (UMSOM) faculty recognize the increasing importance of global health training and have strategically integrated global health opportunities into the medical school curriculum. International rotations have shown to enhance students’ sensitivity to diverse populations and promote the acquisition of technical and clinical skills.

Sara Lever, a third-year medical student, recently served as a Research Fellow and Program Coordinator with Saving Mothers, a maternal and child health non-profit organization in Guatemala. The New York-based group manages programs in Kenya, Uganda, and the Dominican Republic, aiming to eliminate maternal mortality and morbidity.

“Like many who end up in medicine, I sought to find a path where I could feed my intrigue for physiology and pathology while also dedicating a lifetime to serving others,” she says.

Throughout her college and post-college years, Lever oscillated between the worlds of public health and medicine, spending summers working in clinics in downtown Baltimore and in a research lab studying pediatrics mood disorders. By the end of her second year in medical school, her interest in women’s health accelerated, with a particular focus on low and middle-income countries. “I thought it would be extremely helpful to have an immersive experience early in my career, to really understand the day-to-day barriers of care delivery and program implementation,” she notes.

According to the World Health Organization, over 300,000 women and girls die from complications of pregnancy and childbirth — with one mother dying every two minutes. Guatemala itself has one of the highest maternal mortality rates in Latin America. What’s more, access to any formal means of financial resources, health services, and education are often limited among indigenous populations.

“For years, the economy has been based in coffee, corn, and textiles, which has meant that men’s value has been working in the fields, but women’s at home with the children, embroidering, and weaving. This has meant that pathways that promise empowerment of indigenous women, especially in regards to reproductive health, are often non-existent,” says Lever.

Home to rural Tz’utujil Mayans, Santiago Atitlán sits on a bay in the highlands three hours west of Guatemala City. Nearly 75 percent of the home births in Guatemala are attended to by traditional Mayan birth attendants, known as comadronas. Saving Mothers in Guatemala has worked to develop, monitor, and evaluate a curriculum for Mayan traditional birth attendants, through their School of POWHER (Providing Outreach in Women’s Health & Educational Resources) program. This 16-week program teaches the comadronas the skills necessary to ensure safe deliveries, address complications, and refer for hospital delivery when appropriate.

In her role, Lever worked with health officials in the recruitment of comadronas, conducted homes visits, and assisted with both the monitoring and evaluation of the program. She also ran a pilot study working with new mothers to see if a liquid crystal technology in the form of a small stick-on thermometer could be a useful tool in helping families to identify danger signs in newborns.

“Having a long-term global health experience has been instrumental in my development as a student clinician,” Lever says. “It forces you to think back to physiology, think about what resources you have available, and use the critical thinking and analytical skills we’ve fostered through our education and training.”

Lever will return to Baltimore in June to finish her fourth year and hopes to complete her residency training in Family Medicine or Obstetrics and Gynecology.

For more information about Saving Mothers, visit savingmothers.org
MARGARET “PEG” MCCARTHY, PHD, IS INVESTED AS THE SECOND JAMES AND CAROLYN FRENKIL DEAN’S PROFESSOR

In front of a standing ovation at Westminster Hall on March 26, Margaret McCarthy, PhD, Professor and Chair of the Department of Pharmacology, became the second University of Maryland School of Medicine (UMSOM) faculty member to hold the James and Carolyn Frenkil Dean’s Professorship. The two professorships, made possible by the generosity of UMSOM Board of Visitors member and longtime philanthropist Carolyn B. Frenkil, were established to recognize distinguished faculty in the basic sciences. The ceremony followed the investiture of James Kaper, PhD, Professor of Microbiology and Immunology, in March.

“Endowed Professors are the gold standard for our faculty,” Ms. Frenkil said in her remarks. “And, basic science is the foundation of knowledge essential for developing cures for our most debilitating diseases.”

Along with Ms. Frenkil and UMSOM Dean E. Albert Reece, MD, PhD, MBA, friends, family and colleagues of Dr. McCarthy filled the hall, listening to several speakers provide compelling testimonies to her leadership, scholarship, teaching and mentoring over a distinguished 25-year career at the UMSOM. Three of her colleagues, reflected on their personal and professional relationships with Dr. McCarthy, highlighting her passion, creativity and advocacy for women in science. Jessica Mong, PhD, Professor of Pharmacology, who is serving as Acting Chair while Dr. McCarthy is on sabbatical, echoed a phrase from UNESCO, saying “The world needs science and science needs women,” adding that “Science especially needs women like Peg McCarthy!”

For the past three decades, Dr. McCarthy and her colleagues have been exploring gender differences in the brain. Dr. McCarthy has been awarded nearly $39 million in federal funding since 1994, currently has $6.75 million in NIH grants, and has had close to $4 million awarded to trainees under her immediate supervision. With over 200 scientific manuscripts published, Dr. McCarthy’s research is leading to new innovations in policy by the NIH and FDA. The impact of these policy shifts will establish new guidelines for the treatment of men versus women. In her acceptance remarks, Dr. McCarthy thanked numerous colleagues, past and present, as well as her husband, and family for their unwavering support.

THE UMSOM NOW HAS 84 ENDOWED PROFESSORS

Dr. Wei Chao, MD, PhD, FAHA, Professor of Anesthesiology, recently received the Anesthesiology Endowed Professor in Translational Research, made possible by the Department of Anesthesiology.

Dr. Rock, Dr. McCarthy, and Dean Reece

SOM Pride

UMSOM ANNOUNCED LEADERSHIP TRANSITION IN DEPARTMENT OF PSYCHIATRY

Dr. Jill RachBeisel to Continue Longstanding Leadership Assuming Role as Interim Chair

Jill RachBeisel, MD, Associate Professor of Psychiatry, who has served as the Department’s Vice Chair for Clinical Affairs for the past five years, and previously as Acting Chair of the Department, will assume the role of Interim Department Chair.

Dr. RachBeisel has increased the Department’s focus on population and community health, two areas of focus moving forward. The Department has several initiatives in addiction services and community outreach underway that are critical to the local community.

“We are working upstream to identify families at risk, to make interventions, provide access to care and ultimately to foster healthy mothers, healthy babies and healthy families,” she said.

Where’s the Buzz?

Our faculty, staff, and students are regularly sharing their successes! To better update these accomplishments, we have moved What’s the Buzz online.