We have all experienced some form of a letdown or setback by now in our lives. Disappointment is impossible to avoid, even if we try our hardest to manage our expectations and control our hopes and dreams. I want to encourage you, that although disappointment may have a negative connotation, it does not need to be a solely negative experience. Social reformer Henry Ward Beecher once said, “Our best success often come after our greatest disappointments.” Instead of simply a setback, I like to look at a disappointment as a setup for the the next achievement. On some level, we will always (as we should) have that one thing in the back of our minds that we envision achieving. When our visions don’t come to fruition, disappointment sets in and it can be difficult to move forward from there. Obviously the pandemic has funnelled in its fair share of disappointments, but let us remember that we had practice with this before COVID-19 as well.

I am encouraged when I hear stories like those of postdoctoral fellow, Jeremy Ardanuy, PhD, who won this year’s marathon at the Baltimore Running Festival. While this was certainly a great success, it was actually Dr. Ardanuy’s second time winning the Baltimore marathon. His exceptional achievements in running came only after underperforming, when only two years before his first win, his marathon time was four hours and 45 minutes. He ultimately improved his time by two hours and 19 minutes! Dr. Ardanuy likely never would have won the marathon, let alone winning it twice, if it hadn’t have been for that first almost five-hour time.

While we may be discouraged by our failures and shortcomings at the time, I hope we can remember the potential that they hold. Very few of us liked the idea of virtual meetings and events when they first became a necessity, but now that we are in the routine of holding and attending them, we have discovered several benefits, including higher attendance capacity and cost-savings. Unfortunately, we had to make the decision to hold this year’s Festival of Science virtually instead of in-person as I had announced just last month, but let us keep in mind the opportunity that this gives us. We will be able to open the invitation to an even broader audience now. The event will still take place on Tuesday, December 7, 2021 and it will still include a dynamic program with the theme of “Transplantation Science and Discovery.”

As always, I look forward to everyone’s thoughtful discussions and the insightful feedback from the esteemed Scientific Advisory Council, who will all join us virtually. I also look forward to the keynote address from Dr. Joel Cooper, Professor of Surgery at the University of Pennsylvania. As a highly regarded transplant surgeon, Dr. Cooper is known for leading the team who completed the first successful lung transplant in 1983.

While this fall may not look exactly how we would have hoped, yet again, we still have a fair amount to look forward to. I hope that everyone has settled into their routines and that the semester is going well so far. The weather is now getting colder again and we find ourselves congregating indoors more. We must maintain our precautions including wearing face masks, physical distancing, and getting booster shots as appropriate. Please continue to stay safe and healthy.

In the relentless pursuit of excellence, I am...
Deanna Kelly, PharmD, BCPP, Professor of Psychiatry at the University of Maryland School of Medicine (UMSOM), has been appointed to lead the prestigious committee of experts who review and approve all proposed research projects involving human participants for the Maryland Department of Health (MDH). She will chair the MDH Institutional Review Board (IRB) for the next four years, a position she started in July.

Dr. Kelly is currently Director and Chief of the Treatment Research Program at the Maryland Psychiatric Research Center (MPRC). She previously served as Vice Chair of the Department of Health’s IRB for the past four years.

“I am honored and thrilled to take the helm of this important safety board,” Dr. Kelly said. “The work we do is vital for ensuring the protection of the rights and welfare of those who are recruited to participate in research studies.”

The MDH IRB reviews human subject research that is funded with federal, state, or other funds available from or through MDH, involves patients or clients of MDH, or data held or compiled by MDH. The board also reviews studies conducted by researchers who are employees of MDH or students in a residency program at MDH, if they are conducting the research as part of their employment or training.

The University of Maryland, Baltimore (UMB) has its own IRB that serves UMSOM and the other UMB graduate schools. Faculty usually submit their paperwork to one board at a time in order to get input from the first before submitting to the second. “We are in frequent communication with the IRB at UMB,” said Dr. Kelly.

Much of her current work involves revamping the processes in order to meet new federal rules that have streamlined the IRB processes. The 21st Century Cures Act, enacted four years ago, allows for institutions to rely on another unrelated institution’s IRB for review of human participants in a research study.

Research conducted at multiple sites may depend on a single IRB to oversee the review of the research. This can be done with what is known as a reliance agreement or IRB Authorization Agreement. It has helped reduce paperwork for large studies, according to Dr. Kelly, but also needs to be fully incorporated into the processes used by the MDH IRB.

Researchers also can also apply for an IRB research exemption for certain types of research including some of those that involve educational purposes. “A lot of studies are exempt or can be expedited so the review process takes just a few weeks,” Dr. Kelly said. “Scientists, however, should not assume they will be granted an exemption and need to submit an exemption request.”

She advised faculty to reach out with questions before submitting their IRB paperwork to make sure they fully understand the process and its complexities. Questions can be directed to: gay.hutchen@Maryland.gov.

In her work as a researcher and principal investigator at MPRC, Dr. Kelly has led and been involved in numerous clinical trials in schizophrenia and severe mental illness and has been active in psychopharmacology research for nearly three decades. She has published over 200 peer-reviewed articles, presented over 250 scientific posters, and has given over 175 invited lectures to discuss her research.

“Dr. Kelly is extremely qualified to lead the IRB for the State of Maryland,” said UMSOM Dean E. Albert Reece, MD, PhD, MBA. “Her expertise as a researcher, and her previous work with the IRB for more than a decade, will bring exceptional value to this important research entity for the next four years.”
Dr. Crino was selected from a competing pool of applicants for the highly selective award upon the recommendation of the National Advisory Neurological Disorders and Stroke (NINDS) Council, an Institute within the National Institutes of Health (NIH). The award is given initially for a period of four years, after which, based on an administrative review, an additional project period of three years may be awarded. Awardees must have demonstrated exceptional scientific excellence and productivity in one of the areas of neurological research supported by the NINDS, have proposals of the highest scientific merit, and be judged highly likely to be able to continue to do research on the cutting edge of their science for the next seven years.

Senator Jacob Javits (R-NY)Mandated by the U.S. Congress, the Javits Neuroscience Investigator Award was established in 1983 to honor the late Senator Jacob Javits (R-NY), who for several years was a victim of amyotrophic lateral sclerosis (ALS), a degenerative neurological disorder also known as Lou Gehrig’s disease. Senator Javits was a strong advocate for support of research in a wide variety of disorders of the brain and nervous system.

“I am very humbled, honored, and grateful to be chosen for the Javits Award. I want to share the credit for the award with my laboratory staff, who have helped to drive our research program for the past two decades,” said Dr. Crino. “There is still so much work to be done to understand the causes of epilepsy and autism and to hopefully achieve new therapeutic strategies for individuals facing these challenges every day. The Javits Award will greatly augment our lab progress and productivity in these critical areas of research,” he said.

Crino is an internationally recognized physician-scientist specializing in developmental brain disorders. Over the last 20 years, his laboratory has had continuous funding from the National Institutes of Health, through which he has four grants totaling $4.1 million. His lab studies mechanisms of altered brain development associated with autism, intellectual disability, and epilepsy, defining developmental disorders associated with intractable epilepsy, including malformations of cerebral cortical development and tuberous sclerosis complex (TSC). He has collaborated on identifying several new genes associated with neurodevelopmental disorders, pioneered single cell mRNA and DNA sequencing analysis in resected human tissues, and has used mouse models to plumb the effects of mTOR regulatory genes on neuronal and cerebral cortical development. Dr. Crino also has coauthored over 170 peer-reviewed manuscripts, chapters, and reviews, and has been invited to lecture all over the world.

“I congratulate Dr. Crino for his spectacular achievement as the recipient of the Javits Award. This singular acknowledgment of his accomplished career is one in which we all can share a collective sense of pride, as another of our ‘best and brightest’ receives national recognition,” said UMSOM Dean E. Albert Reece, MD, PhD, MBA.

Dr. Crino’s grant research involves a collaboration with Dr. Andrew Crosby and Dr. Emma Baple at the University of Exeter in the U.K.
At the University of Maryland School of Medicine’s first in-person event since February of 2020, a gathering of family, friends and colleagues came together to celebrate legendary leaders in the field of trauma and surgery, past and present, as well as to recognize one of UMSOM’s generous benefactors, Mr. Howard S. Brown.

The event was the Investiture Ceremony for David T. Efron, MD, awarding him the inaugural Thomas M. Scalea, MD Distinguished Professorship in Trauma Surgery at UMSOM. The professorship was established with a gift from Mr. Brown, as a lasting legacy to his late daughter, Esther Ann Brown Adler and named in honor of Dr. Thomas M. Scalea in appreciation for his skilled and compassionate care.

Dr. Scalea, who is The Honorable Francis X. Kelly Distinguished Professor of Trauma Surgery at UMSOM, and Director, Program in Trauma, R Adams Cowley Shock Trauma Center at the University of Maryland Medical Center and Physician-in-Chief, R Adams Cowley Shock Trauma Center, served as master of ceremonies for the ceremony.

“Nothing speaks to the Power of Philanthropy, as much as the generous gift that establishes an endowed professorship,” Dr. Scalea said to open the ceremony. “This is a very special contribution that will leave a lasting legacy in the field of trauma and surgery, made possible by the generosity of Howard Brown.”

For Mr. Brown, who is Chairman and visionary of David S. Brown Enterprises, Ltd, the professorship is the latest in a series of significant gifts he has made to the University of Maryland, Baltimore. These include his $1.5 million gift in 2007, which established the first trauma research professorship in the United States, the David S. Brown Professorship in Trauma, named in honor of Mr. Brown’s late father, and held by Alan Faden, MD.

Mr. Brown also gifted $1.5 million to the Francis King Carey School of Law, his father’s alma mater. In addition to his support for UMBC, he also donated $1 million to the University of Maryland Medical Center in honor of his parents, David S. and Sara Brown.

“I will never forget the personal support our family received from Dr. Scalea,” he said. “He was always there, at every turn, in caring for our daughter. He is not just an outstanding surgeon; he is an exceptional human being.”

“Dr. David Efron is the ideal recipient of this professorship, in continuing the tremendous legacy of Dr. Scalea,” he added, noting that Dr. Efron’s parents were friends of his. “They are truly a remarkable family.”

E. Albert Reece, MD, PhD, MBA Executive Vice President for Medical Affairs, UM Baltimore, the John Z. and Akiko K. Bowers Distinguished Professor and Dean at UMSOM, stepped forward to recognize Dr. Scalea for his extraordinary career as a global leader in the field of trauma.

“As Dr. Scalea approaches his 25th anniversary as Physician-in-Chief of the Shock Trauma Center, we can use this opportunity to celebrate everything he has done,” he said. “His humanism and compassionate care are an inspiration to many. Thank you, Tom for your leadership and for serving as such a wonderful role model for all of us.”

Dr. Scalea then came to the podium to a rousing ovation from those in person and those attending virtually.

“When I look at what we have been able to do over these past 25 years, I can truly say that we changed the face of injury care in the world — it is about a disease, not a car crash,” he emphasized, noting that the UMSOM is the only medical school in the world that recognizes injury as a disease.

The program featured three of Dr. Efron’s colleagues at Johns Hopkins. Each spoke of Dr. Efron’s success, and referenced the connections between his late father, Dr. Gershon Efron, Dr. Efron, and his family.

“Working with Dave is a singular pleasure — he is smart, quick, and efficient. Always thinking about what is best for the patient, what is best for his team and supporting the faculty members,” said James H. Black, MD, FACS, who is The David Goldfarb, MD Research Professor of Surgery, Chief of the Division of Vascular Surgery and Endovascular Therapy, Department of Surgery, The Johns Hopkins University School of Medicine. “It is so great to see University of Maryland and the trauma group recognize Dave and to see his reputation here rise so quickly.”
Edward E. Cornwell III, MD, FACS, FCCM, The LaSalle D. Leffall Professor of Surgery, Department of Surgery, Howard University School of Medicine, emphasized the linkage between Dr. Scalea and Dr. Efron pointing out the humanism that bonds them together. “It is appropriate that Dave is going to be linked in perpetuity to my friend and colleague, Tom Scalea. Thank you for the joy of being able to celebrate my friend and colleague, Dave Efron at this pinnacle of his career,” said Dr. Cornwell.

John L. Cameron, MD, FACS, FRCS, FRCS, FRCSI, The Alfred Blalock Distinguished Service Professor of Surgery, Department of Surgery, The Johns Hopkins University School of Medicine, recognized the significance of the moment for Dr. Efron. “This honor caps a career, but David is really just at the beginning. I don’t think there is any position more prestigious in surgery in this country than the Tom Scalea Distinguished Professorship and the Chief of Trauma here at Shock Trauma.”

David Efron was then presented with the Investiture Medallion and shared his gratitude and appreciation. “This is a bit like holding the Neil Armstrong Chair in Space Travel,” he said to gain laughter from the audience. “Seriously, though, I am so truly honored by this opportunity. In carrying this professorship, I pledge to be worthy of this great institution, to the namesake that it honors, and to the spirit of the endowment that has been generously established.”

David T. Efron, MD joined the faculty of the University of Maryland School of Medicine as a Professor in the Department of Surgery in September of 2020 as professor of trauma surgery and Medical Director and Chief of Trauma in the Program in Trauma at the R Adams Cowley Shock Trauma Center. Dr. Efron maintains an active clinical practice in the field of Acute Care Surgery. His elective work includes primarily complex abdominal wall reconstruction for patients with failure of prior hernia surgery, those with healing disorders (transplant and immunosuppression) and connective tissue diseases (such as Marfan’s and Ehlers-Danlos).

Thomas M. Scalea, MD, FACS, MCCM completed his residency at the Upstate Medical Center in Syracuse, New York and Critical Care Fellowship at New York Medical College. Following his fellowship in 1984, Dr. Scalea began his career at the Kings County Hospital/Downstate Medical Center in Brooklyn, New York. He became Chief of Trauma and Critical Care and rose to the rank of Professor of Surgery in 1991. While directing the trauma center at Downstate he also founded the Department of Emergency Medicine at Downstate.

In 1997, Dr. Scalea became the Physician-in-Chief at the R Adams Cowley Shock Trauma Center at the University of Maryland Medical Center, the nation’s only freestanding trauma hospital. In 2002, he became the first medical school endowed Professor of Trauma, when he was appointed the Honorable Francis X. Kelly Professor in Trauma Surgery. A decade later, Dr. Scalea was named System Chief for Critical Care Services at the University of Maryland Medical System.
The Comprehensive Stroke Center (CSC) at the University of Maryland Medical Center (UMMC) has been recognized by the American Heart Association (AHA) as among the best in the nation for patient care. University of Maryland Medicine (comprised of UMMC and the University of Maryland School of Medicine) announced. The Center has received multiple accolades from AHA, including Gold Plus Recognition for 85% or higher rates of compliance with AHA’s rigorous, research-based stroke care guidelines. Target Stroke Honor Role Elite for rapid treatment of ischemic stroke patients; and 90 percent or higher compliance with guidelines for treating diabetics with strokes. The center’s lifesaving care is provided by faculty from the University of Maryland School of Medicine’s Department of Neurology and its Divisions of Neuroradiology and Neurosurgery.

“As a leading cause of adult disability, stroke can impact anyone. Where and when you receive is crucial to recovery. These latest honors from the AHA further show the UMMC Stroke Center’s national leadership for evidence-based treatment and recovery from stroke,” said Bert W. O’Malley, MD, President and CEO of UMMC.

Ischemic stroke occurs when a vessel to the brain is blocked, disrupting blood flow to the brain. It is the most common type of stroke. While most such blockages can be successfully broken up with certain drugs — a process known as thrombolytic therapy — time is of the essence to administer this treatment. As indicated by the AHA accolades, UMMC’s neurologists are among the most responsive in their field, providing thrombolytic therapy in under 60 minutes of arrival to the hospital by 85% or more of applicable acute ischemic stroke patients.

“The UMMC Comprehensive Stroke Center is nationally recognized as one of the premier centers dedicated to saving lives and restoring function to patients with acute strokes and complex cerebrovascular disease,” said UMSOM Dean E. Albert Reece, MD, PhD, MBA. “Our UMSOM faculty have pioneered innovations like the Brain Attack Team that rapidly evaluates and treats patients around the clock to ensure they get treated as soon as possible after their symptom onset, which can save lives and preserve speech and mobility.”

Going to “BAT” for Stroke Patients
UMMC’s Comprehensive Stroke Center is staffed by board-certified faculty from multiple specialties who can provide rapid evaluation and complex lifesaving interventions for patients. The Center’s Brain Attack Team (BAT) counts among its ranks highly skilled vascular neurologists, emergency physicians, neuro-

intensivists, neurosurgeons, vascular surgeons, interventional neuroradiologists, nurses, and other professionals.

“Providing top quality care to stroke patients is a team effort, and I am pleased to see the efforts of multiple neuro-departments within the hospital recognized with this award,” said Marcella Wozniak, MD, Associate Professor of Neurology at UMSOM and Director of the Comprehensive Stroke Center at UMMC. She is also a neurologist with the Baltimore Veteran Health Administration Medical Center.

Recovery from Strokes
Comprehensive stroke treatment, however, is not available at all hospitals. As such, UMMC’s Stroke Center is a major site for advanced stroke care in the Mid-Atlantic region, with treatments that range from thrombolytic therapy to treat ischemic stroke, to minimally invasive surgery to repair burst blood vessels in the brain (aneurysms) that cause hemorrhagic strokes. Emergency departments throughout Maryland routinely refer suspected stroke patients to UMMC.

In a recent example, Kristin Ernst, a 51-year-old woman who had participated in five half-marathons, was airlifted to UMMC after experiencing an ischemic stroke. Within 20 minutes of arrival to the medical center, a team of neuroradiologists and neurologists attended to Ms. Ernst. The team ultimately reestablished blood flow to the left side of her brain, completely reversing her neurologic deficits.

“I feel fantastic. I took a walk the same day I was discharged home. I don’t even have a scar, just a tiny mark. I’m just so grateful to be here, thanks to UMMC’s stroke team and my husband for quickly calling 911,” Ernst said.

Seemant Chaturvedi, MD, the Stewart J. Greenebaum Endowed Professor of Stroke Neurology at the University of Maryland School of Medicine, and Director of the Stroke Program at the University of Maryland Medical System, the parent health system to UMMC, praised the fast actions of both Ernst and her husband.

“It is always gratifying to our team when a stroke patient leaves the hospital on their way to full recovery, in many cases resuming most of their normal activities the day of discharge. We cannot emphasize enough how much this depends on quickly recognizing a likely stroke and getting the patient to treatment. In this case, Ms. Ernst and her husband did everything right and she has the recovery to show for it,” he said.
Medical school students who took a three-hour culinary medicine training course reported feeling more confident in their nutritional knowledge and in their abilities to counsel patients on healthy eating habits, according to a new study from the University of Maryland School of Medicine (UMSOM). The study involved 119 UMSOM medical students who participated in a class that includes a nutrition lecture and cooking lessons in a demonstration kitchen at the Institute for Integrative Health, a non-profit organization based in Baltimore. Culinary medicine training is now required as part of the new Renaissance Curriculum instituted last year at UMSOM. The study was published this summer in the *American Journal of Lifestyle Medicine*.

To conduct the study, UMSOM researchers asked first-year medical students participating in a core curriculum culinary medicine course to complete a survey both before and after taking the three-hour training. They found students were more than twice as likely to report being prepared for providing healthy eating recommendations to patients after taking the class, as compared to before taking the class.

“A robust two-thirds of medical school students felt prepared or very prepared to interact with patients to discuss healthy eating after taking this one class. This suggests that culinary medicine training in medical school is feasible, well accepted, and associated with improvements in nutritional knowledge,” said study lead author Christopher D’Adamo, PhD, Assistant Professor of Family & Community Medicine at UMSOM and Director of the Center for Integrative Medicine.

Guiding patients to pursue healthier eating habits can help prevent obesity as well as diseases that frequently result from poor diets such as heart disease, strokes, and cancer, he added.

The study found that 12 percent of students reported feeling “very prepared” for these interactions after taking the class, compared to 5 percent of those who had not yet taken the class; an additional 55 percent felt “prepared” after the class, compared to 34 percent before the class.

It also found that none of the students reported feeling “not at all knowledgeable” about nutrition after the course, compared with nearly 5 percent who felt that way before taking the class. Students also reported that the class gave them practical tools for providing advice to their patients, including how to address barriers to healthy eating such as living in a low-income area where fresh produce can be scarce.

Healthy eating and other self-care modalities can also benefit the medical school students themselves: Studies suggest self-care helps reduce stress among medical students and reduces symptoms of depression, burn-out, and other mental health challenges associated with the demanding coursework.

“The strategies for overcoming healthy eating barriers that were presented in our course — including time, taste, cravings, and cost challenges — are also applicable to medical students. They reported these strategies were relevant to their own lives,” Dr. D’Adamo said.

Study co-authors included Norman Retener, MD, Assistant Professor of Medicine at UMSOM, Bernadette Siaton, MD, Assistant Professor of Medicine at UMSOM, and Brian Berman, MD, Professor Emeritus of Family & Community Medicine at UMSOM.

“This study provides scientific evidence to support important aspects of the new curriculum that we instituted last year in our medical school,” said UMSOM Dean E. Albert Reece, MD, PhD, MBA. “Our coursework focuses on actualizing the Renaissance Physician. This kind of physician serves as an important guide for patients who are eager to feed themselves and their families with meals that are nutritious, delicious, and affordable.”

Christopher D’Adamo, PhD
Dean Reece Emphasizes UMSOM Compliance Policy on Academic Titles
Continued from page 1

The following are examples of correctly positioned titles:

**EXAMPLES**

<table>
<thead>
<tr>
<th>John Brown, PhD</th>
<th>Jane Brown, DSc.</th>
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<tr>
<td>Department of Biochemistry and Molecular Biology Scientist, UM Greenebaum Comprehensive Cancer Center</td>
<td>Associate Professor</td>
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<tr>
<td>University of Maryland School of Medicine</td>
<td>Department of Pharmacology Scientist, UMSOM Institute for Genome Sciences</td>
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<tr>
<td>John Doe, MBBS, PhD</td>
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All faculty members are urged to review how their titles are displayed and adjust them according to the aforementioned policy as appropriate. Should specific guidance regarding titles be required, please contact David Ingle at 6-2656 or dingle@som.umaryland.edu.

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Will you help fund the endless possibilities that stem from a good medical education? Your contributions support the House Advisory System, the White Coat Ceremony, essential wellness programming, mentorship activities, the Renaissance Curriculum, and more! No students graduate without somehow being impacted by private giving. When you [donate today](#), you enhance the quality of education for which UMSOM is nationally recognized. You may also mail your donation directly to the [UMSOM Office of Development](#) with a check made out to UMBF, Inc./2604 and sent to:

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