UPDATE: FORWARD PROGRESS

On behalf of everyone at Duke Health, thank you for your partnership this year.

We are pleased to share news about advances in research, health care, and education as well as stories about some of our most generous donors this year and the impact they

- **MARCH** Duke researchers administer a tetanus booster shot to patients being treated for glioblastoma, dramatically improving patient survival.

- **MAY** In studies using mice, Duke orthopaedic researchers trace the signals that go wrong when aging bones heal improperly and successfully prompt aging bones to heal better and faster by circulating blood and using bone marrow transplant.

- **JUNE** Duke surgeons separate conjoined twins during a 10-hour operation. Eight-month-old twins Josiah and Aryan Covington were attached at the hip and shared a liver.

- **JUNE** Using MRI technology, Duke scientists create a 3-D map of the human brain stem in unprecedented detail, potentially providing a better guide for neurosurgeons to treat tremors and Parkinson's disease.

- **JULY** Duke neuroscientists create the first functional network of multiple animal brains. The “brainets” connect two or more animals, either monkeys or rats, to work together to perform tasks.

- **JULY** Duke researchers publish a study revealing that two different mutations in a gene, Ankyrin-B, cause cells to collect glucose faster than normal, triggering Type II diabetes linked to obesity.

- **JULY** A Duke study shows that early compression CPR—without mouth-to-mouth resuscitation—administered by an average person substantially increases survival from cardiac arrest.

- **JUNE** Duke surgeons separate conjoined twins during a 10-hour operation. Eight-month-old twins Josiah and Aryan Covington were attached at the hip and shared a liver.

- **JUNE** The new Hudson Building, part of the Duke Eye Center opens. The building adds 116,000 square feet of clinical and administrative space. The construction was aided by a $17 million gift from LC Industries.

dukeforward.duke.edu/dukemedicine
are having on Duke and on people in our community and around the world. As we enter a new year—and move closer to celebrating the successful conclusion of the most ambitious campaign in our history—we are excited about the excellence, innovation, and progress in health care ahead. We couldn’t do it without you!

**NOVEMBER** A Duke research team identifies a new molecular pathway involved in risk for heart attacks and death from heart disease and finds that it can be detected in bits of molecular detritus circulating in the blood.

**OCTOBER** Duke researchers discover the first primate model that can be used to study mother-to-fetus cytomegalovirus transmission, the leading infectious cause of birth defects worldwide.

**OCTOBER** Duke establishes the first hand transplant program in North Carolina, one of a small number of centers nationwide.

**SEPTEMBER** A unique model is developed at Duke, UNC-Chapel Hill, and MacroGenetics, Inc., that can bind HIV-infected cells to the immune system’s killer T cells, potentially a new “shock-and-kill” strategy to clear HIV infection.

**OCTOBER** Paul Modrich, professor in the Department of Biochemistry, receives the Nobel Prize in Chemistry for research in DNA.
Robert J. Margolis, MD’71, HS’72, has had a habit of being at the leading edge of medicine dating all the way back to the early 1970s, when he was one of the first two students to graduate — “survive” is the word he uses — under a rigorous new program that combined the internship year with the senior year of medical school at Duke University School of Medicine.

A few years later, after he’d earned his MD and completed an oncology fellowship at the National Cancer Institute, he set up a practice with fellow internists in an underserved part of Los Angeles. The challenge of managing many elderly and fragile patients with limited resources required innovative and creative approaches, including establishing one of the nation’s first coordinated care organizations. And in the decades since, he’s played a leading role in a whole host of innovations, including creating new models of coordinated team-based medical care, pioneering what came to be called the hospitalist movement, and reforming the way health care is paid for and monitored for quality.

“In the early days we were seen as these sort of weird, wild-eyed docs doing crazy things before anyone else,” says Margolis, former co-chairman of the board at DaVita HealthCare Partners and CEO emeritus of HealthCare Partners, a physician-owned and operated medical group, independent physician association, and management services organization. “But by hook or by crook, with some serendipity and maybe a little bit of foresight, we saw different ways to organize health care delivery. In retrospect, we were pretty far ahead of the curve.”

He still is. In October 2015 Duke announced that Margolis and his wife, Lisa, have given the university $16.5 million through the Robert and Lisa Margolis Family Foundation to launch a major new health policy center whose goal is to develop and implement new ideas on health reform nationally.

The Duke-Robert J. Margolis, MD, Center for Health Policy will have offices at Duke and in Washington, D.C., and will partner the intellectual resources of the university with policymakers and policy analysts in the public and private sectors. It will involve more than half a dozen schools and other units at Duke, including the School of Medicine, School of Nursing, Fuqua School of Business, Sanford School of Public Policy, and School of Law.
COMING FULL CIRCLE
“Duke has a long-standing commitment to complex problem-solving in real-world settings, and deriving the highest value from American health care is a challenge perfectly suited to our interdisciplinary skills,” says Duke University President Richard H. Brodhead. “We are enormously grateful to Bob Margolis and Lisa for this gift, which will allow Duke to unify its expertise in medicine, business, and policy to make advances in this field.”

Eugene Washington, MD, chancellor for health affairs and CEO of Duke University Health system, said the center is indicative of Margolis’s long history of innovation and leadership in health care. Margolis was a founder of HealthCare Partners’ predecessor, California Primary Physicians Medical Group, and he serves on the board of directors of the Martin Luther King, Jr., Hospital in Los Angeles, the National Committee for Quality Assurance, and advisory boards at Harvard Medical School and USC Schaeffer Center. He previously chaired the California Association of Physician Groups, the California Hospital Medical Center, and the Council of Accountable Physician Practices.

“It since arriving at Duke, I have gained a keen appreciation of the tremendous portfolio of health-related programs arrayed across the university,” says Washington. “We are incredibly grateful and proud that the vision to draw on all the components through the Duke-Margolis Center is being made possible by one of the most distinguished graduates of our School of Medicine.”

It was Margolis’s experience at Duke—working with influential mentors including Eugene Stead, MD, Philip Handler, PhD, and others—that set him on the path to becoming one of the nation’s most respected and forward-thinking leaders in health care. Although he has spent much of his career based in California, that path now has brought him, via the new Duke-Margolis Center, back to Duke.

“Duke was such a wonderful part of my formative years in creating the opportunities that I’ve had,” Margolis says. “My wife and I have talked about how we can give back. We aspire to translate some of the things we’ve learned over the years into true improvements in American health care. The best way we could think to do that was to say, ‘Let’s look to a place that has incredible medical care, world-class clinical research, an enormous amount of available data, and a history of great interdepartmental collaboration, and see if we can harness all of those strengths along with connections and proximity to Washington to try to fulfill that vision of improving American health care.’”

Margolis says the Duke-Margolis Center will help address some of the key issues facing health care in America, not the least of

“In the early days we were seen as these sort of weird, wild-eyed docs doing crazy things before anyone else.”

Robert J. Margolis
which is the challenge of improving access to efficient, effective quality care nationwide.

“American health care is world-class, if you can get it and can afford it and happen to get the right doctor,” he says. “But it’s very spotty if you don’t have all those things. There is incredible disparity in access and quality, depending on your socioeconomic position and your environment. The hope is that we can get all of that interdisciplinary knowledge at Duke to come to bear on finding solutions to these problems. While our goal is to improve the health care system for all, the true overarching dream is to improve American health as the only way to both improve quality of life and rein in health care costs and their impact on the American economy.”

Essential to the center’s success will be translating research data, information, and ideas developed at Duke into policy changes that can be implemented at the national level. Central to that effort will be McClellan, the inaugural director, who will also be the Robert J. Margolis, MD, Professor of Business, Medicine and Health Policy at Duke.

A former administrator of the Centers for Medicare & Medicaid Services and a former commissioner of the U.S. Food and Drug Administration, he previously served as a member of the President’s Council of Economic Advisers and senior director for health care policy at the White House, and was an associate professor of economics and medicine at Stanford University. He chairs the National Academy of Medicine’s Leadership Consortium for Value and Science-Driven Health Care, co-chairs the guiding committee of the Health Care Payment Learning and Action Network, directs the Merkin Initiative on Payment Reform and Clinical Leadership, is a senior adviser on health policy for the Dell Medical School at the University of Texas at Austin, and is a research associate at the National Bureau of Economic Research.

“Lisa and I have been extremely fortunate, and it is important to us to use what abilities we have to try to make a difference and help people.”

Robert J. Margolis

“I’ve had many opportunities to work with the faculty and staff at Duke, and I appreciate the university’s unique and diverse capacity to support health policy research and health policy reform,” McClellan says. “It is a tremendous privilege to work with the Duke-Margolis Center to make a difference in health care and health.”

For Margolis, the new center offers the opportunity to make real and lasting changes in transforming the health care system into one that is more efficient, more equitable, and more cost-effective for Americans from one coast to the other. That’s a dream he and Lisa have had for a long time.

“Lisa and I have been extremely fortunate, and it is important to us to use what abilities we have to try to make a difference and help people,” he says. “And to be able to do it here at Duke just makes it that much more exciting. It’s a spectacular institution, and perfectly situated for what we want to do. Just look at this place. How could you not love it?”

Chancellor Washington, left, and President Richard H. Brodhead, right, greet Margolis at a reception held on campus.
EXTENDING A LIFELINE TO PEOPLE FACING ALZHEIMER'S
EXTENDING A LIFELINE TO PEOPLE FACING ALZHEIMER’S

An Unexpected Gift Helps Expand the Duke Family Support Program
The first sign that something was amiss came when Gloria Dewey’s husband Monte had trouble replacing the furnace filter in their Durham home. It was a chore he’d done regularly for decades, but now he struggled to maneuver the rectangular filter to fit the opening.

> by Dave Hart

He soon began having difficulty with other simple spatial tasks, and Gloria noticed that he had begun passing her the credit card slip to sign in restaurants: he was having trouble, she realized, calculating the tip.

“This is a man with an MBA from Duke and a degree in mathematics, and he couldn’t figure out the tip,” says Gloria. “It sneaks up on you. You just start to notice little things now and then, and you think, ‘This is kind of odd.’”

They went to Duke University Hospital to seek an answer. The one they got, from neurologist James R. Burke, stunned them: Alzheimer’s disease.

“We were floored,” says Gloria. “There was no Alzheimer’s in either side of our family. We didn’t really know anything about the disease, and we had no idea what to expect. I thought, ‘What do we do now?’”

Fortunately, they found a desperately needed lifeline in the Duke Family Support Program. The program, within the Duke University Center for the Study of Aging and Human Development, provides information, support, and community for people diagnosed with Alzheimer’s disease and their caregivers.

Established in 1980, it is one of the longest-running programs of its kind in the nation. The program, spearheaded by founder and director Lisa Gwyther, MSW, LCSW, and early-stage Alzheimer’s program coordinator Bobbi Matchar, MSW, MHA, has helped thousands of people understand and deal with the effects of the devastating degenerative neurological disease.

In 2015, the Duke Family Support Program got a tremendous and unexpected boost when a donor who wishes to remain anonymous donated $1.1 million to help expand the scope and reach of its work.

“The disease, for both the person diagnosed with it and the caregiver, is so isolating. This program gives you valuable information, and it lets you spend time with other people in the same boat.”

Anonymous donor to the Duke Family Support Program
“This is a man with an MBA from Duke and a degree in mathematics, and he couldn’t figure out the tip. It sneaks up on you. You just start to notice little things now and then, and you think, ‘This is kind of odd.’”

Gloria Dewey

“I said, ‘That’s not right,’ and I decided I would help.”

That help will allow the Duke Family Support Program to dramatically expand the scope and reach of its programs, which currently include several regular support groups, speaker sessions, consultations, and other activities, including monthly “Look & Lunch” outings at Duke’s Nasher Museum of Art, popular monthly lunch gatherings for people in the early-stage Alzheimer’s community, and presentations at communities throughout the state.

The program will use the new gift in four main ways, say Gwyther and Matchar:

• Expand the range of offerings and outings for the early-stage Alzheimer’s community. “The early-stage community is the social life for a lot of families; they organize their calendars around these events,” Matchar says. “We want to increase the number of options we offer, so we can offer more variety and appeal to a wider range of interests.”

• Grow a program designed for people facing middle-stage Alzheimer’s disease. “What we do has always evolved in response to what people have told us they need, and one thing we’re hearing now is the need for groups focused on what happens after the early stage,” Gwyther says. “We’ve started a pilot program that offers help and support for caregivers while offering activities and learning for people with middle-stage dementia.”

• Develop programs for people with early-stage dementia who don’t have an available care partner and for people who have been diagnosed with Mild Cognitive Impairment. “These are two groups that we haven’t been able to serve adequately in the past,” Gwyther says. “This gives us an opportunity to do that.”

• Broaden the reach of the Duke Family Support program by teaching other health and community organizations how to provide care and support for people dealing with Alzheimer’s and other neurodegenerative disorders. “We want to make sure that what happens in Durham doesn’t stay in Durham,” says Gwyther. “We want to develop some novel ways to translate what we’ve learned in a way that is adaptable to other communities.”

Thanks to the generosity of the anonymous donor, many more people facing a devastating diagnosis will have a place where they can find essential information, a compassionate and knowledgeable team of health care professionals, and the invaluable support of a community of people facing the same thing.

For Gloria and Monte, along with countless others, those opportunities have given them comfort, knowledge, and companionship in their darkest hours.

“It’s been a lifesaver for me, and for my husband, too,” Gloria says. “The Duke support groups are full of people going through the same things we are. We lean on each other. We help each other out. We become friends. Lisa and Bobbi are such good facilitators, they draw everybody in; everybody is frank and honest and eager to lend a hand. I honestly don’t know where I’d be without this program.”
Jane Blood-Siegfried Launches a Program to Bring Nurse Practitioners to Tanzania

> by Dave Hart

Africa has had a hold on Jane Blood-Siegfried, PhD, RN, CPNP, ever since she was a girl, when she lived in Liberia with her family and, among other things, cared for a succession of orphaned baby chimpanzees, one of whom slept in a crib in her room and occasionally clambered up onto her bed and plucked the rollers out of her hair.

Her family left Liberia, where her father had been stationed as a U.S. State Department official building schools, when she was 15. Decades passed before she was able to return, but Blood-Siegfried never forgot the vivid experience of living in Africa, a vast continent brimming with both spectacular beauty and heart-wrenching suffering.

Now she and Duke University School of Nursing are launching a project designed to help ease some of that suffering by bringing improved primary health care to people in one part of Africa. In close collaboration with multiple partners in Tanzania, Blood-Siegfried and the School of Nursing have begun a five-year plan to establish a program that will develop and train Family Nurse Practitioners (FNP) to serve rural communities there.

Like much of sub-Saharan Africa, Tanzania suffers from severe shortages of health care personnel and resources. Physicians are virtually non-existent in most rural areas. Nurses serve as the backbone of the health care system outside the cities, but there are not enough of them, and those that are in practice seldom have sufficient education and training to provide the full range of comprehensive care.

“The heavily populated areas of Tanzania have fairly good health care, but 70 percent of the population lives in rural areas, and out there the situation is not as good,” says Blood-Siegfried, who has been at the School of Nursing for almost 20 years. “Usually there is somebody who provides health care, but in most cases they are not trained or qualified to do the procedures they have to do. So you have lab technicians delivering babies, suturing wounds, and basically providing primary health care, simply because there’s nobody else there to do it. If there’s a registered nurse on site, that’s a step up, but even the nurses aren’t trained to do the types of things a nurse practitioner would do.”

Her program is intended to put more qualified practitioners into those rural areas. She and other School of Nursing faculty will work with their counterparts at the Kilimanjaro Christian Medical University College Department of Nursing (KCMU-Co) to prepare a curriculum, develop Tanzanian faculty, and begin training the first cohorts of FNPs. The program will prepare its graduates to provide and manage the primary care health challenges of rural communities.

“So you have lab technicians delivering babies, suturing wounds, and basically providing primary health care, simply because there’s nobody else there to do it.”

Jane Blood-Siegfried

“There are only two other Nurse Practitioner programs in all of Africa: one in Ghana, and one in Botswana,” Blood-Siegfried says. “So this is a pretty big deal. It has the potential to help a whole lot of people.”

Blood-Siegfried organized a four-day conference in Arusha, Tanzania, in February 2015, to bring together all of the project’s partners and stakeholders—the universities, the Tanzania Nursing and the Midwifery Council, the Tanzanian Nurses Association, and the Ministry of Health—along with representatives from the NP programs in Ghana and Botswana to offer their guidance and advice. That gathering produced consensus about the program’s goals and a detailed action plan to guide its progress.
An HIV-positive mother attends a clinic where she is counseled on how to protect her baby, who was born free of HIV.
Next steps include developing the curriculum and preparing the initial faculty—two post-baccalaureate nurses who will attend FNP programs in Botswana or Ghana and then return to KCMU-Co to teach the first cadre of FNP students.

That first class of students, and hopefully several subsequent classes, will consist of experienced registered nurses already providing healthcare in rural areas. If all goes according to plan, within five years the initial cohorts of FNPs will be returning to the communities they serve, with more knowledge, more training, and more authority to provide the necessary care to their patients.

“Jane’s program isn’t so much introducing a new role as it is validating a role,” says Michael Reif, PhD, RN, ACNS-BC, AACRN, CNE, FAAN, associate dean for global and community affairs. “The nurses are there. They are performing at a high level. What we want to do is train them further, standardize their skill sets, and formally validate their competencies, so that when they return to their communities they’ll be trained and qualified to do the things they have to do.”

Faculty from the School of Nursing will help teach intensive classes in the new program, at least during its formative years, and Duke students will have opportunities to go to Tanzania and participate by shadowing FNPs, doing hands-on work in clinics, and other activities. Reif said he hopes Tanzanian students will be able to come to Duke to gain the same sort of experiences.

SIMILARITIES AND DIFFERENCES
Duke University School of Nursing has a renowned family nurse practitioner program in Durham. Launching a similar program in Tanzania is a far more complicated matter than simply lifting what the school does here and dropping it over there. The conditions, facilities, health problems, treatment protocols, and cultural norms are very different in the two places.

“Ears look the same everywhere. Hearts sound the same,” says Blood-Siegfried. “But the needs of the community in Tanzania are very different from the needs here. We’re not trying to bring an American nurse practitioner program to Africa. We’ll be tweaking it for the needs of Tanzania.”

The Tanzanian Family Nurse Practitioner program is just the latest of several Duke School of Nursing initiatives in Africa. Brett Morgan, DNP, CRNA, has established a Duke Global Health Bass Connections program to train nurse anesthetists in Ghana. The School of Nursing and the School of Medicine both are active in the Rwanda Human Resources for Health program to build a sustainable health care system there. And Robin Dail, PhD, RN, FAAN, is in the early stages of a project to help prevent infant hypothermia, also in Rwanda.

All of these projects support the university- and health system-wide Duke Africa Initiative, launched in 2012 to build connections and share knowledge among Duke scholars who have a shared interest in Africa.

“One of the things we’ve tried to do is strategically align ourselves with broader Duke initiatives,” says Reif. “It all goes back to Duke’s mission of knowledge and service to the world. All of these programs are an opportunity for our school, our faculty, and our students, in partnership with collaborators overseas, to bring knowledge and service to the world.”
Alden (Bud) W. Dudley, Jr., T’58, MD’62, HS’65-’67, and his family have a long history with Duke. His late wife, Mary Adams Dudley, WC’59, PhD’66, and her father, Raymond D. Adams, MD’37, were alumni. Alden and Mary’s sons, R. Adams Dudley, T’86, MD’91, and Eric Clark Dudley, T’89, are both Duke graduates. The family has begun just as strong a tradition of giving back.

Bud Dudley remembers that as graduate students at Duke, both he and Mary needed to work to make ends meet. He worked six days a week, logging specimens for pathology residents, usually from 10 p.m. to 1 a.m. “It did compromise my ability to listen to lectures and study and read without falling asleep,” he says. That’s one of the reasons he and Mary started an endowment—The Dudley Family Academic Scholarship Fund—to provide merit scholarships for medical students. “We wanted to eliminate that problem for a student, and we wanted to attract to Duke some of the best minds,” Dudley says.

The Dudleys’ own experience with the tax consequences of inheritance influenced their planning of the endowment. A family member died in 2008 and left $50,000 from his Individual Retirement Account (IRA) to each of five individuals. Because assets in an IRA given by a decedent to family members or other individuals are subject to both estate and income tax, the estate paid significant estate taxes (the federal estate tax exemption was much smaller in 2008 than...
it is today), and the individuals were liable for income tax at their highest bracket when they began to withdraw funds from their IRAs. Bud and Mary, who was the beneficiary of one of the IRAs, were deeply upset that the intentions of the decedent were not achieved, and they vowed to avoid such a problem in their own estate plans.

Mary died in 2014, and she left all of the assets in her IRA to Duke to establish the scholarship endowment. Duke is exempt from taxes, so the assets passing from her IRA to Duke were not reduced by either estate or income taxes, and the large gift was more than sufficient in size to endow the scholarship.

Dudley and his current wife, Gretchen Link (his childhood sweetheart), recently made new commitments to add to the endowment, including a bequest commitment of their IRAs. By giving the IRAs to Duke, which is exempt from taxes, they were able to make larger gifts than they thought possible. “We realized there would be much more purchasing power if we gave these IRAs to Duke,” Dudley says. Their goal is to build the endowment so that it will provide two full scholarships. If the Dudleys had designated family members or other individuals as beneficiaries of the IRAs, the gifts to them would have been subject to both federal estate and income tax.

“We realized there would be much more purchasing power if we gave these IRAs to Duke.”
Alden (Bud) W. Dudley, Jr.

PLANNED GIVING OPPORTUNITIES

Other planned gift options for donors include setting up gift annuities, which provide fixed lifetime income to the donor or others, or charitable remainder unitrusts, which provide variable lifetime income based on investment performance. Gift annuities are invested in the long term pool, which is managed by DUMAC, Inc., a professionally staffed investment organization controlled by Duke University. Charitable remainder unitrusts may also be invested in this pool. In addition, donors aged 70 1/2 and older who direct the custodian or trustee of their IRAs to make distributions to a public charity such as Duke will have those distributions excluded from their taxable income and counted toward their required minimum distribution for the year of the gift. In December 2015, President Obama signed legislation renewing this law, known as the IRA Charitable Rollover Law, and making it permanent for 2016 and beyond.

By making a planned gift to Duke Health, donors get the benefit of consulting with Joe Tynan, executive director of gift and endowment planning, who has 30 years of experience in charitable gift planning, 20 of them at Duke. “I can help donors make a plan tailored to their individual circumstances,” Tynan says. To learn more about making a planned gift to Duke Health, contact Tynan at joseph.tynan@duke.edu.
PAUL MODRICH WINS NOBEL PRIZE IN CHEMISTRY

Paul Modrich, PhD, James B. Duke Professor in the Department of Biochemistry in the School of Medicine, received the Nobel Prize in Chemistry for four decades of work on how mistakes in the DNA code are repaired. The Nobel, announced in October 2015, is Duke’s second in three years.

Modrich is a Howard Hughes Medical Institute Investigator. His research finding underlies the most common form of colon cancer and about 20 to 30 percent of other spontaneous tumors, as well as Huntington’s disease and other neurodegenerative disorders. He shares the award with Aziz Sancar, the Sarah Graham Kenan Professor of Biochemistry at the University of North Carolina at Chapel Hill, and Tomas Lindahl of the Francis Crick Institute and Clare Hall Laboratory in the UK.

WASHINGTON APPOINTED CHANCELLOR

A. Eugene Washington, MD, MSc, an internationally renowned clinical investigator and health policy-scholar, became chancellor for health affairs for Duke University and president and CEO of Duke University Health System in April 2015.

He comes to Duke from UCLA, where he was vice chancellor for health sciences, dean of the David Geffen School of Medicine, and CEO of the UCLA Health System. He also was a distinguished professor of gynecology and health policy and held the Gerald S. Levy, MD, Endowed Chair. He succeeds Victor Dzau, MD, who stepped down as chancellor and CEO last summer to become president of the National Academy of Medicine (formerly the Institute of Medicine).

In announcing the appointment, President Richard H. Brodhead said, “Gene Washington has a track record of outstanding leadership in every aspect of the work of an academic medical center—research, education, and patient care. A gifted communicator, he has special skills at getting people to work together in support of the larger mission. He has been at the forefront of the national effort to make patient outcomes the focus of health care. And he is a champion of community health who will bring that commitment to Durham. I’m delighted to have him join the Duke team.”

BUCKLEY NAMED CHAIR OF OPHTHALMOLOGY

In March 2015, Edward Buckley, E’72, MD’77, HS’81, was named chair of the Department of Ophthalmology. Buckley had served as interim chair since March of 2014. The Joseph A.C. Wadsworth Professor of Ophthalmology, Buckley is a highly respected administrator, educator, researcher, and renowned pediatric ophthalmologist. He also holds the title of vice dean for education in the School of Medicine.

COFFMAN NAMED DUKE-NUS DEAN

Thomas Coffman, MD, is the new dean of Duke-National University of Singapore Graduate Medical School. He succeeds Ranga Krishnan, MD. Coffman retains his appointments in the School of Medicine as James R. Clapp Professor of Medicine, professor of cell biology, and professor of immunology.

CALIFF NOMINATED AS NEXT FDA COMMISSIONER

President Obama has nominated Robert Califf, T’73, MD’78, HS’78, ’80-’93, as the next commissioner of the U.S. Food and Drug Administration. Califf was nominated in September and is currently undergoing Senate confirmation. Since February 2015, he has been serving as deputy commissioner for medical products and tobacco at the FDA. He is currently on leave from Duke, where he served as the Donald F. Fortin, MD, Professor of Cardiology in the School of Medicine and vice chancellor of clinical and translational research.
Jioti Huang, MD, PhD, an internationally renowned surgical pathologist and prostate cancer researcher, became the new chair of the Department of Pathology in the School of Medicine in January 2016. He comes to Duke from UCLA, where he was professor of pathology and urology, holder of the Frances and Albert Piansky Endowed Chair, chief of surgical pathology, and director of urologic pathology at the David Geffen School of Medicine.

Joseph P. Mathew, MD, MHSc, MBA, the Jerry Reves Professor of Anesthesiology, has been appointed chair of the Department of Anesthesiology. He had served as interim chair since April 2014. He succeeds Mark Newman, MD, who is now president of the Duke Private Diagnostic Clinic.

Holly Lisanby, T’87, MD’91, HS’91-’95, has been named director of the Division of Translational Research for the National Institute of Mental Health. She has taken a leave of absence from Duke, where she served as J.P. Gibbons Professor and chair of the Department of Psychiatry and Behavioral Sciences.

John Sampson, MD, HS’90-’95, HS’98, PhD’96, MHS’07, MBA’11, is the inaugural chair of the Department of Neurosurgery, which was recently elevated from division status. Sampson recently made national headlines for research to develop a vaccine for brain tumors, including a finding that using the tetanus shot as a “booster” for the immune system prior to beginning treatment greatly improves survival for patients with the most aggressive form of brain tumor.

William Yancy Jr., T’91, MD, HS’99-’01, an associate professor in the Department of Medicine, has been named program director of the Duke Diet and Fitness Center. He will oversee the center’s research and weight loss programs. The Diet and Fitness Center is the world’s only medically supervised, residential-style weight loss program within an academic medical center. Over the past 40 years, it has helped more than 50,000 people.

Geoffrey Ginsburg, MD, PhD, will lead a new interdisciplinary collaboration between the School of Medicine and the Pratt School of Engineering. Called Med-X (Medicine and Engineering at Duke), the new entity is the first part of a new initiative by Provost Sally Kornbluth, PhD, to create opportunities at the intersections of academic units. A professor of medicine, pathology, and biomedical engineering and director of the Duke Center for Applied Genomics and Precision Medicine, Ginsburg has worked extensively with faculty across both schools as well as with interdisciplinary university teams. He also brings perspectives on the research funding landscape through his leadership on committees of the National Academy of Medicine (formerly the Institute of Medicine) and the National Institutes of Health.

As the School of Nursing begins a new strategic planning initiative, Dean Marion E. Broome, PhD, RN, FAAN, has announced three major new divisions—Health Care of Women and Children, to be led by Barbara Turner, PhD, RN, FAAN, professor of nursing and director of the Doctor of Nursing Practice degree program; Health Care in Adult Populations, to be led by Valerie K. Sabol, PhD, ACNP-BC, GNP-BC, CNE, FAANP, and Clinical Health Systems and Analytics, to be led by Theresa Valiga, ED, RN, CNE, ANEF, FAAN. All faculty in the school will be organized under these three divisions.

Marilyn Hockenberry, PhD, RN, PNP-BC, FAAN, has been named associate dean for research affairs in the School of Nursing. The Bessie Baker Professor of Nursing, she is a national leader in pediatric oncology and evidence-based practice and outcomes. She also teaches in the Doctor of Nursing Practice degree program and serves as one of the 11 chairs of Duke’s Institutional Review Board (IRB).
**UPDATE: FORWARD PROGRESS**

**BRAIN TUMOR THERAPIES RECEIVE OUTSTANDING INVESTIGATOR AWARD**

Two novel immune approaches developed at the Preston Robert Tisch Brain Tumor Center at Duke have received nearly $7 million in funding under the National Cancer Institute’s (NCI) Outstanding Investigator Award Program. The award recognizes the work of Darell Bigner, MD, PhD, director of the Tisch Center in the Duke Cancer Institute. Bigner was among 43 recipients nationwide selected for “providing significant contributions toward understanding cancer and developing applications that may lead to a breakthrough in biomedical, behavioral, or clinical cancer research,” according to the NCI. The two therapies— one using a modified poliovirus and another using a bacterial immunotoxin to attack lethal glioblastomas—are already showing promise in early clinical trials.

**DUKE RANKS TOPS NATIONALLY AND LOCALLY**

Duke University Hospital was again included on the Honor Roll of top hospitals in the nation by *U.S. News & World Report*, ranking No. 14 in the magazine’s 2015-16 listings.

Duke was also ranked No. 1 in North Carolina and No. 1 in the Raleigh-Durham area.

Honor Roll designations were awarded to just 15 hospitals out of nearly 5,000 evaluated by *U.S. News* for its rankings. Hospitals on the exclusive list achieved high scores in at least six of the 16 medical specialties that form the basis of the magazine’s survey.

Duke University School of Medicine was ranked 8th among research-intensive medical schools.

Also, *U.S. News & World Report* has ranked Duke University School of Nursing 6th among the nation’s best graduate nursing programs and 6th among online graduate nursing programs.

In addition, Duke University’s Physician Assistant (PA) Program, which turns 50 this year, ranked No. 1 among PA programs in the country, according to new *U.S. News & World Report* graduate and professional school rankings released in March 2015.

**PHYSICIAN ASSISTANT PROGRAM TURNS 50**

In October 2015, Duke celebrated the 50th anniversary of physician assistant education.

The physician assistant profession originated at Duke in the mid-1960s, founded by Eugene A. Stead Jr., MD, then chairman of the Department of Medicine.

**DUKE ENDOWMENT FUNDS HEALTH PARTNERSHIP BETWEEN DUKE, WAKE, UNC, AND HSSC**

The Duke Endowment has granted $15.3 million to Health Sciences South Carolina (HSSC) for a first-in-the-nation, dual-state health data and information sharing collaboration between Duke, Wake Forest University, UNC Healthcare, and Health Sciences South Carolina.

Minor Shaw, chair of The Duke Endowment Board of Trustees, said the award is the third multi-million dollar grant made to HSSC by the private foundation, based in Charlotte, North Carolina.

“Health is our most precious commodity, and chronic diseases such as diabetes, stroke, and obesity threaten not just health, but also the economic and social health of North Carolina and South Carolina,” said Shaw. “These problems are solvable, which is why The Duke Endowment has made a third investment in HSSC to further efforts to convene the best and brightest researchers, clinicians, and strategic partners across the two states. This grant empowers them with the technical infrastructure, data, and analytical resources needed to identify and implement meaningful solutions to the health-related challenges facing us today.”

UPDATE: Duke Forward Progress | Winter 2016 | 17
> SCHOOL OF NURSING RECEIVES GRANT FOR VA ACADEMY PARTNERSHIP

The School of Nursing, in partnership with the Durham Veterans Affairs Medical Center, is one of six nursing schools nationwide selected for a five-year VA Nursing Partnership Graduate Education Program. It will provide federal funding to support new faculty positions and increase enrollment each year in the school’s adult-gerontology nurse practitioner major in the Master of Science in Nursing Program. Thirty or more new students will enroll during the five-year period and will complete most of their clinical rotations at the Durham VA Medical Center. The grant will fund two to three new faculty positions at the School of Nursing, provide stipends for trainees, and fund one to two faculty positions at the VA to support the development of six post-master’s certified adult-gerontology nurse practitioner residents.

> CHILDREN’S GALA FUNDS WILL HELP CHILDREN WITH COMPLEX NEEDS

Funds raised at the 2015 Duke Children’s Gala are making possible six programs designed to enhance quality of life for pediatric patients and their families. The grants, totaling $220,000, are focused on quality of life for children with complex, life-threatening, or chronic conditions, including pain; and care for children suffering from emotional distress or physical abuse or neglect.

Proceeds raised at the March 21, 2015, event are funding the following initiatives, with grants ranging from $5,000 to $50,000: Duke Child Abuse and Neglect (CAN) Foster Care Initiative, Comprehensive Care for Children with Chronic Illness, Peer Coaching for Adolescents and Young Adults with Chronic Illness, Virtual Hospital Tours for Prenatal Patients with Complex Congenital Disease, mHealth Wearables to Improve Inpatient Care, and an Educational Tool for Postoperative Pain Management.

> GATES FOUNDATION GIVES $20 MILLION, PLUS MATCHING CHALLENGE, FOR GLOBAL HEALTH

The Bill & Melinda Gates Foundation has granted $20 million to the Duke Global Health Institute to help educate future leaders and experts and build research capacity—both in Durham and with global partners worldwide—to address critical global health challenges including ebola, MERS, cancer, diabetes, HIV/AIDS, and other chronic diseases. The grant provides $10 million in endowment support to sustain the growth of the Global Health Institute. The other $10 million will support a challenge that will match one dollar for every dollar given or pledged—making the total impact of the grant $30 million.

“We’re deeply grateful for this generous grant from the Bill & Melinda Gates Foundation, which will enable Duke to generate new knowledge needed to reduce health disparities—as well as expand learning opportunities for students at Duke,” said President Richard H. Brodhead.

The grant will allow donors to partner with the Global Health Institute to build on Duke’s leadership in global health education, recruit and support faculty working across disciplines and schools to address global health challenges, bolster financial aid for students and fellows and support international students, and strengthen partnerships with institutions and organizations in priority locations such as Haiti, Kenya, Tanzania, Sri Lanka, and South Africa.

“I’m excited that our support can help to increase the visibility of the institute as well as raise the capacity of the global health sector,” said Melinda Gates, T’86, B’87, H’13, who is co-chair of the Bill & Melinda Gates Foundation and a Duke alumna.

HOW THE MATCH WORKS

> ELIGIBLE GIFTS

- New gifts and pledges of $100,000 or more, payable over a maximum of five years, for endowment or expendable purposes and designated for Duke Global Health Institute (DGHI) priority areas
- Gifts and pledges to establish endowed chairs in global health in schools across Duke University

DGHI PRIORITIES

- Education programs for experiential learning and research opportunities
- Graduate fellowships
- Faculty support
- International Partnerships
- Unrestricted funding

UPDATE: Forward Progress Winter 2016
As of November 30, 2015, Duke Health has reached $1.106 billion toward its overall goal of $1.2 billion to advance research, education, and patient care. Duke Health’s campaign is part of Duke Forward, Duke University’s $3.25 billion campaign, which includes all 10 schools and Duke University Health System. The campaign ends June 30, 2017.

> CAMPAIGN PROGRESS!

$1.1 billion
(raised through November 30, 2015)

$1.2 billion

$1,008,309,686
School of Medicine

$183,000,000
Duke Cancer Institute

$122,340,965
Duke Children’s

$62,154,617
Duke University Health System

$50,312,101
Duke Eye Center

$35,924,855
School of Nursing

$17,980,625
Duke Heart Center

> CAMPAIGN TOTALS BY AREA
AWARDS AND HONORS

RECENT AWARDS AND HONORS RECEIVED BY SCHOOL OF MEDICINE FACULTY

American Academy of Arts and Sciences
Marc Caron, PhD
Eugene Washington, MD, MSc

Duke University Alumni Association Award
Kimberly Blackwell, MD

Kappa Delta Award, American Academy of Orthopaedic Surgeons
Steven Olson, MD
Farshid Guilak, PhD
Virginia Kraus, MD’83, H5’83-’89, PhD’93
Bridgette Furman, BS
Janet Huebner, MS

National Academy of Sciences
Nancy Andrews, MD, PhD

American Academy of Arts and Sciences
Eugene Washington, MD, MSc

Duke University Alumni Association Award
Kimberly Blackwell, MD

Kappa Delta Award, American Academy of Orthopaedic Surgeons
Steven Olson, MD
Farshid Guilak, PhD
Virginia Kraus, MD’83, H5’83-’89, PhD’93
Bridgette Furman, BS
Janet Huebner, MS

Fulbright-Schuman Fellowship
Kirsten Corizzini, PhD, FGSA

Sigma Theta Tau Hall of Fame
Diane Holditch-Davis, PhD, RN, FAAN

FACULTY MEMBERS APPOINTED TO ENDOWED PROFESSORSHIPS

Hashim M. Al-Hashimi, James B. Duke Professor of Biochemistry
James A. Blumenthal, J.P. Gibbons Professor of Psychiatry
Marion E. Broome, Ruby Wilson Professor of Nursing
Donald P. Frush, John Strohbehn Professor of Radiology
Allan D. Kirk, David C. Sabiston, Jr. Professor of Surgery
Richard J. O’Brien, Disque D. Deane University Professor of Neurology
Erik K. Paulson, Robert J. Reeves Professor of Radiology
Ann M. Reed, William Cleland Professor of Pediatrics
Cynthia A. Toth, Joseph A. C. Wadsworth Professor of Ophthalmology

American Academy of Nurse Practitioners
Kathryn Trotter, DNP, CNM, FNP-C, FAANP

Emergency Nursing Society
Margaret Carmen, DNP, ACNP-BC, ENP-BC, FAEN

RECENT AWARDS AND HONORS RECEIVED BY SCHOOL OF NURSING FACULTY

American Academy of Nursing
Christina Hendrix, DNS, GNP-BC, FNP, FAAN
Allison Vorderstrasse, DNSc, APRN, CNE, FAAN
Tracey Yap, PhD, RN, CNE, WCC, FAAN

The Duke Preventive Approach to Cardiology celebrated its 40th anniversary in September. Shown here are a few of the 80 guests who attended, from left, David Stedman, T’42, Barrie Wallace, Sarah Stedman, and Andrew Wallace, T’57, MD’59, H5’59-’61, ’63-’64.

Larry Hester, the first recipient of a “bionic eye” at Duke—and only the seventh recipient in the U.S.—and his wife, Jerry, greet William Hudson, CEO of LC Industries, during the dedication of the Hudson Building at Duke Eye Center. LC Industries, the nation’s largest employer of people who are blind, contributed a total of $17 million towards construction of the new building, which opened in June. The so called bionic eye is the Argus II Retinal Prosthesis Device, a visual aid to send light signals to the brain. Hester is now able to see light for the first time since becoming blind more than 30 years ago. The state-of-the-art Hudson Building will increase annual patient volumes at Duke Eye Center by 15,000.
The Duke Children’s Gala raised a total of $220,000 for pediatric initiatives related to quality of life, pain relief, and care for children suffering from emotional distress or physical abuse and neglect. Duke Football Coach David Cutcliffe was the keynote speaker, and the event featured patients, their families, and a live auction.

Right, Annie and Nathan Kress, pictured here with their four sons, spoke at the event, recounting their emotional journey of son Logan’s treatment for cleft lip by Duke Cleft and Craniofacial program.

David, T’70, and Kathy Trice of Houston attended the annual Holland-Trice Scholars event on campus in June. They established the annual program, which provides seed grants to Duke scientists to conduct high risk-high reward basic science research, with a gift of $1 million. The event was attended by Holland-Trice grant recipients, faculty members, and Dean Nancy Andrews, MD, PhD, left, and Provost Sally Kornbluth, PhD, right.

The late Chancellor Emeritus William G. Anlyan, MD, HS’49-’55, center, attended the first annual Scholarship and Fellowship Celebration event, “ Celebrating Future Leaders,” in April 2015. The second annual celebration is planned for April 8, 2016. Donors to scholarships and fellowships in the School of Medicine and School of Nursing attend the celebrations, which feature student scholarship and fellowship presenters and guests.
ROBERT J. LEFKOWITZ, MD, AND PAUL MODRICH, PHD, DUKE’S TWO NOBEL LAUREATES, CELEBRATE IN CAMERON STADIUM.