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Security infiltrates college classrooms

Programs spread to big universities

By Chris Joyner
USA TODAY

James Davis hopes to get a job with a professional sports team — ideally, the New Orleans Saints — when he graduates next year with a master’s degree in sports management from the University of Southern Mississippi in Hattiesburg.

To bolster his job prospects, Davis, 23, has chosen a concentration in sports security management, a new offering at Southern Mississippi and part of a growing number of academic programs around the country with a homeland security bent.

Davis, who is taking classes in emergency preparedness and risk analysis as part of the program, says he believes the extra credential will make him a more marketable candidate when he graduates.

“It has to, with the level of terrorism where it’s at,” he says.

Security jobs are everywhere

There has been huge growth in the popularity of security-related programs since 2002, when the Department of Homeland Security was created, says David Silverberg, editor of the trade magazine Homeland Security Today.

The programs began popping up at community colleges and online-only institutions five or six years ago, and now they are being offered at some of the nation’s most prestigious universities.

“Homeland security has developed as a discipline, and it took time for people to realize that it was a discipline,” Silverberg says. “People think of homeland security as just screeners at the airport, and it is way more than that.”

In the spring of 2007, Homeland Security Today published its first educational directory, with a list of 81 institutions with homeland security programs. The most recent directory, published last fall, had nearly twice that number.

Silverberg says the growth in academic programs mirrors the job market. The Department of Homeland Security, a labyrinthine federal department made up of 22 agencies with more than 200,000 employees, is just the beginning, he adds. Every state has its own homeland security framework, and job seekers in the private sector, even in seemingly unrelated fields such as nursing and law, find the courses are a résumé builder, he says.

Offerings range from vocational certificates earned in a few weeks to advanced degrees.

George Mason University in Fairfax, Va., for example, offers a doctorate in biodefense, which teaches “intelligence and threat assessment, nonproliferation, and medical and public health preparedness,” according to the university’s website.

Purdue University in West Lafayette, Ind., founded its Homeland Security Institute in 2002 as an interdisciplinary program. Director Eric Dietz says the coursework offered through the institute is designed as an enhancement to traditional fields of study, such as engineering and agriculture.

“It’s a new set of thoughts that you can take back to your old job,” he says.

Higher quality of programs

Silverberg notes that although small schools, including for-profit online ventures, were the first to offer homeland security courses, the quality of these early programs varied. It took longer for universities to develop programs and hire faculty who met traditional education standards, he says.

Lou Marciani, director of Southern Mississippi’s Center for Spectator Sports Security Management, has been an athletic director for five universities and worked for the federal government evaluating security threats for sports venues. His faculty includes a former FBI counterterrorism expert, who managed security for the 2004 U.S. Summer Olympic team, and a professor whose doctoral dissertation was on security measures for sporting events.

Marciani says his center has an advisory board made up of representatives of every major professional sports league and the National Collegiate Athletic Association to make sure students are getting the skills they need for the workplace.

“It’s a new discipline,” he says. “When I came through as a student, I didn’t take any classes in sports security.”

Joyner reports for The Clarion-Ledger in Jackson, Miss., and USA TODAY
Campbell law school shows off Raleigh building

BY DAVID BRACKEN, Staff Writer
Comment on this story

RALEIGH - Campbell University Law School officials gave reporters a tour of the school's future home in downtown Raleigh this afternoon.

Mayor Charles Meeker and others donned hard hats for 50-minute tours of the 107,000-square-foot Hillsborough Place building at the corner of Hillsborough and Dawson streets. Campbell is in the middle of a $13-million renovation of the building, which is scheduled to open in September.

Campbell announced in 2007 that it was moving its Norman Adrian Wiggins School of Law from the small Harnett County town of Buies Creek to downtown Raleigh. The new location will provide the 350-student law school with 40 percent more space than its Buies Creek facility. It will include a 200-seat auditorium, three courtrooms and a 25,000 square foot library that will be spread over two floors.

Campbell University purchased the Hillsborough Place building for $17.5 million from Variety Realty and its owner Art Pope, a strong supporter of Campbell. The price was 57 percent more than what seller Variety Realty paid in early 2005. Campbell is selling the naming rights to various parts of the building. Attaching your name to the entire law building costs $10 million, while get the naming rights to a library study room costs $10,000.

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STS: Lung Cancer Survival Best When Thoracic Surgeon Wields Scalpel

By Peggy Peck, Executive Editor, MedPage Today
Published: January 27, 2009
Reviewed by Zalman S. Agus, MD; Emeritus Professor
University of Pennsylvania School of Medicine.

SAN FRANCISCO, Jan. 27 -- Lung cancer patients with resectable lesions had an 11% lower 5-year mortality risk when the surgery was performed by general thoracic surgeon, researchers said here.

Analysis of Surveillance, Epidemiology, and End-Results (SEER) and Medicare data from 1992 through 2002 revealed a mortality hazard ratio of 0.89 (99% CI 0.82-0.97) for resection by board certified thoracic surgeons compared with general surgeons, said Farhood Farjah, M.D., M.P.H., of the University of Washington in Seattle.

“That was a 7% difference in absolute risk of dying in five years,” Dr. Farjah told attendees at the Society of Thoracic Surgeons meeting.

Using those figures, he estimated that “500 to 1,000 lives could be saved if all lung cancer surgeries were performed by board certified thoracic surgeons.”

Dr. Farjah and colleagues linked the SEER and Medicare data to the American Board of Thoracic Surgery Diplomates list. They classified those names as cardiothoracic surgeons if they performed heart surgery and general thoracic surgeons if they didn’t perform heart surgery.

During the study period, 19,745 Medicare patients underwent surgery for lung cancer -- 24% were treated by general surgeons, 45% by cardiothoracic surgeons, and 32% by general thoracic surgeons.

In addition to having a worse survival rate, patients operated on by a general surgeon were less likely to undergo preoperative staging with positron emission tomography, less likely to have lymphadenectomy, and less likely to receive neoadjuvant therapy, Dr. Farjah said.

He noted that there were no statistically significant differences in survival between surgeries done by cardiothoracic surgeons versus general surgeons (HR 0.94 99% CI 0.88 to 1.01) or between general thoracic surgeons and cardiothoracic surgeons (HR 0.94, 99% CI 0.87 to 1.03).

Carolyn E. Reed, M.D. of the Medical University of South Carolina in Charleston, who served as discussant for the paper, said Dr. Farjah’s report confirmed a significant problem in treatment of lung cancer.

She noted, for example, that the median number of lung resections performed by residents in general surgery programs was six, training that she said did not adequately prepare them for cancer surgery.

John Benfield, M.D., of the University of California in San Francisco, said that lobectomy was typically performed by general surgeons in many areas.

Dr. Benfield said that when he was STS president in 1996, “80% of thoracic surgery in Europe was done by general surgeons. It is time that we as thoracic surgeons accept reality, and as thoracic surgeons we should take it upon ourselves to credential or evaluate those general surgeons who are doing acceptable work and take them into our fold.”
elevate them to our standard -- by some type of grandfather clause."

W. Randolph Chitwood, Jr., M.D., chief of the division of cardiothoracic and vascular surgery at East Carolina University in Greenville, N.C., and current president of STS, said that while the idea of "grandfathering" in general surgeons was attractive "we (STS) have no authority over general surgeons."

Dr. Chitwood said, too, that improving lung cancer treatment required a multidisciplinary approach. "It's not just about the surgeon," he said.

Dr. Farjah said the study was limited by its reliance on retrospective data and since the patients were all Medicare beneficiaries the findings might not be applicable to younger populations.

However, he said, the average age of lung cancer patients is 67 "so this cohort appears to be representative of lung cancer patients."

No funding source was reported for the study.

Drs. Farjah, Reed, and Benfield made no financial disclosure.

Dr. Chitwood disclosed that he has served on the speakers' bureau and received honoraria from Intuitive Surgical, Edwards Lifesciences, and St. Jude Medical.

**Primary source:** Society of Thoracic Surgeons

Source reference:


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