Almost immediately after starting our journey as first year medical students, we began learning of Dr. Albert Schweitzer, his ideals, and the Fellowship program created to allow students to pursue a volunteer project serving an underserved population. We both had a strong background in leadership and volunteer work so the thought of creating a service project was very appealing to us.

Keeping Dr. Schweitzer’s passion for advocacy in mind, we developed Autism S.T.A.R. (Social Training and Awareness Resource). A summer camp for autistic children, Autism S.T.A.R. was geared toward improving the social skills of these children.

Autism, a neurological disorder characterized by language and communication deficits, continued on page 6
The Making of Student Advocates

It’s been a busy few months for advocacy and my involvement with our medical students in the process. They were a source of pride as they worked over several months to prepare themselves for the annual meeting of the North Carolina Medical Society, and the American Medical Association (AMA) Interim Session. The Brody School of Medicine was represented by a large student delegation at both. Equally impressive was the special work of Crystal Cason (an MD, MPH student) and Brian Burrows (a second year medical student). These students each recognized an important health issue and an unmet need. They researched the reasons why, catalogued what organized medicine was or was not doing, and worked with me and others to develop a resolution for consideration by the North Carolina Medical Society’s House of Delegates.

Crystal Cason’s resolution dealt with financial access to a medication known to prevent recurrence of preterm labor and premature birth. Many health insurance plans refuse to pay for its use and state Medicaid programs have limited funds to pay for the cost of the standard treatment. Crystal provided a wealth of information, and a tightly written resolution which passed the North Carolina House of Delegates for action by the North Carolina Medical Society’s Board. It was also approved by the AMA on the consent calendar.

Brian Burrows, wondered why, despite a Centers for Disease Control (CDC) report more than a year ago on HIV testing, the AIDS epidemic continues unabated and people in the age group recommended for testing are not even being asked. His analysis was clear—physicians were disregarding the report and medical professional organizations, including the AMA, while supportive of the CDC endorsement, weren’t recommending routine testing. Brian knew he couldn’t recommend mandatory testing, yet a statement short of that would simply be an echo of the status quo. He developed a resolution calling for the North Carolina Medical Society, and ultimately the AMA, to announce to its members that recommending testing was standard of care.

Before its passage, Crystal’s resolution generated a great deal of discussion. Brian’s resolution engaged the North Carolina House of Delegates in more than an hour of often heated debate. Our delegation of students and physicians, spoke well on behalf of the resolution, but it was not enough and the resolution failed. Brian hedged his bets and we arranged to have the resolution introduced at the AMA interim meeting, by both the American Academy of Pediatrics (AAP) and also the Medical Student Section, but it was postponed to the annual meeting.

For their clarity of thinking, ability to revise their positions, forthrightness in discussion, and creativity, our Brody students deserve a heartfelt thanks and official commendation.

Meanwhile, I was off to the annual meeting of the AAP. Many interesting things were...
Brody Celebrates National Primary Care Week

by: Dawn Robinson-Little, staff writer, GPP

Students at the Brody School of Medicine joined with medical students across the country to celebrate National Primary Care Week, October 8–12, 2007. At Brody, the event was co-hosted by the ECU chapter of the American Medical Student Association and the Generalist Physician Program. The theme for the week was “Community Based Primary Care.”

Primary Care Week is held annually to foster a better understanding of primary care and its importance to underserved populations.

With the assistance of the Generalist Program, AMSA co-presidents, Brian Boone and Neel Thomas organized the event and selected speakers for a series of noon conferences co-sponsored by the primary care interest groups at Brody. Neel commented, “We were pleased with the outcome of Primary Care Week. The speakers brought up important issues about general and interdisciplinary healthcare and we were able to learn about new developments. It was an informative week and a great success.”

The event got underway with a keynote address given Monday, by Patricia White, MD founder and chair of the North Carolina Schweitzer Fellowship. Dr. Allen Dobson, former assistant secretary for health policy for North Carolina, likened primary care physicians to superheroes in his presentation on Tuesday.

ECU Class of 2001, medical alumna, Crystal Manuel, MD, an assistant professor in the department of psychiatry, spoke on the importance of screening patients for psychopathology during routine office visits. This is especially important since some patients feel more at ease speaking to their primary care physician than they would seeking therapy.

Another ECU graduate, Roytesa Savage, MD (Class of 2002) an assistant professor in pediatrics gave the final lecture of the week on adolescent health and the HPV vaccine.

The festivities came to a close on Friday with the annual medical recruiting fair sponsored by Eastern Area Health Education Center. Hospitals throughout the east came to share a sample of the career options North Carolina has to offer its residents and medical students.

Excerpts from the Keynote Address

At first I chose primary care for its breadth. Contrary to what academics espoused, that the most intelligent became subspecialists, I believe the best and brightest are on the front lines with a broad knowledge base. For me, a day giving prenatal care to a young mother-to-be, counseling a teenage athlete about asthma management, uncovering alcoholism in a bank executive with poorly controlled blood pressure, and diagnosing depression in an elderly widower, is a day that is never boring, always interesting and frequently fulfilling.

Utilizing all the skills that took years to master and applying them to help others is a privilege, honor and joy not unlike what it must be to master a complex piece on a piano or painting a masterpiece—it cannot be done overnight and it elevates the human condition.

I also chose family medicine for its versatility. I could live anywhere in the world and be useful. Indeed, when we completed our residency, my husband and I were astounded to realize we could live anywhere and find a great job in rural, urban and suburban settings in the U.S. or overseas. I worked in rural and urban clinics for the underserved as well as private practices, public health departments, urgent care centers, and residency teaching programs. Everyday in every setting has been interesting and challenging.

I worked with amazing colleagues, nurses, residents, students and patients. I had a great time being on a team and making a difference in each of these special human beings’ lives. Even after 21 years, I enjoy the blessings and joys of breadth and versatility that being a primary care physician offers.

But I have to tell you that the greatest gifts lie not in the breadth and versatility of primary care. They are the gifts that slowly unfold over time, not in the flash of a brilliant diagnosis or a life-saving intervention— but in the quiet and private moments that have unfolded over the years as I have come to know my patients and their families.
How would you rate the health of the largest organ in your body? Although the summer rays have passed, it’s time to cover up for the coming winter days. Beautiful suntans may fade, but the effect of ultra-violet (UV) light never goes away and be aware that your skin may one day show good reason for concern.

Skin cancer will claim the lives of approximately 10,000 Americans in 2007. According to Centers for Disease Control data for 2006–2007, skin cancer is the most common form of cancer in the United States and yet it’s also the most preventable. The highest risk factor for developing skin cancer is exposure to the sun’s ultra-violet rays.

The major types of skin cancer are the highly curable basal cell and squamous cell carcinomas and the more serious malignant melanoma. The American Cancer Society (ACS) estimates that, during 2006, over one million new cases of basal cell or squamous cell carcinoma and about 59,940 new cases of malignant melanoma were diagnosed. Skin cancer prevention is quite simple, yet human behavior is contrary.

Through our involvement with the North Carolina Schweitzer Fellowship Program, we each created projects to target a solution for this growing problem. Together, we share this common goal and believe in the power of education, awareness, and outreach. Although we have already engaged many with our individual programs, it is this joint effort that we hope will affect even greater change in the lives of so many to come.

We’ve joined together and are working at the state level to add a requirement for sun safety and skin cancer awareness into North Carolina’s public school curriculum. In addition, we will be reaching out to support and encourage peer mentorship among high school students in promoting a healthy, sun safe lifestyle. Through the collaborative efforts of the Save Our Skin (S.O.S.) and Promoting Education and Prevention (P.E.P.) programs, the ultimate goal is to spread sun safety education from the eastern shores of North Carolina to the western mountains and to every county in between.

All of this came to be because of the vision of Dr. Albert Schweitzer. His legacy led to the development of the North Carolina Schweitzer Fellowship, where S.O.S. and P.E.P. represent a mere fraction of the many programs created not only to serve thousands of people across North Carolina, but to link Fellows together for a lifetime.

Marie Rowe worked with partner, Paige Clark, to promote sun safety and skin cancer awareness in 2006 with their program, S.O.S. “Save Our Skin.” Marie has continued, continued on page 8

Two Brody School of Medicine students have teamed together taking their sun safety projects to the state government in hopes of effecting curriculum change for public school students in North Carolina.
What Can Laupus Library do for You?

by: Katherine Rickett, MLS, MSEd, Liaison Librarian to the Brody School of Medicine, Laupus Library.

As a health professional, you’re on the go, always pressed for time so how do you answer the questions that emerge in clinical situations?

In his article, “Information at the Point of Care,” Mark Ebell highlighted the problem. “Direct observation of primary care physicians … has shown that they generate an average of two questions for every three patient encounters.” (Ebell, 1999) An article in the Annals of Internal Medicine, “Information Needs in Office Practice,” further supports this, “… approximately two thirds of the clinical questions generated at the point of care go unanswered.” (Covell, Uman, & Manning, 1985) The reasons such questions go unanswered include “a lack of convenient access to reference materials at the point of care, the time needed to search for information …,” according to “What Clinical Information do Doctors Need?” (Smith, 1996) Our staff at Laupus Library can help answer the questions that arise in healthcare settings.

From our electronic resources page, www.ecu.edu/csdhslaupuslibrary/ElectronicResources.cfm, physicians can access point of care electronic resources such as MD Consult, InfoPoems/InfoRetriever, and StatRef. Locations in the library or the Brody building add Micromedex and UpToDate to the mix. Resources from this page can also be downloaded to PDA.

We offer a wide variety of databases such as PubMed, SportDiscus, and the Cochrane Suite.

When time is tight, we’ll run the search for you. We can also help find and access full text articles that are available. Contact us by phone, email, text message, or Ask A Librarian online at www.ecu.edu/csdhslaupuslibrary/contact.cfm.

Can’t find an electronic copy? Our document delivery staff can provide access to articles from our print resources or from resources available in other libraries. Please note that there may be a fee for document delivery services. This resource is available at www.ecu.edu/csdhslaupuslibrary/docdel.cfm.

We have also been working to add our e-book resources to the Library catalog. Nearly complete, it will allow you to look in one place to find out if we have the e-book you need and then to access it.

Do questions come up at times when we aren’t staffed? Can’t wait until we’re available? Want to know how to run an effective search? We are happy to help you develop and hone search skills. We provide classes for groups or will work one-on-one. We offer instruction at Laupus in our well-equipped computer classroom, but we are also available to come directly to you.

Want to know what’s new? We’ll come to your department, committee meeting or working group meeting to provide an update. We send out lists of new materials that come into the library, often accompanied by news on new resources we’ve come across. We’d be glad to add you to the list.

Student Advocates continued from page 2

presented and as a past president, I was very involved in discussions of SCHIP, financial access and quality of care issues.

One of the highlights of this meeting was the installation of our new president. At the height of a distinguished academic career, our new president brings unrivaled expertise as a clinician, administrator, researcher, and child-advocate. Dr. Renee Jenkins is only the third woman, and first African-American, president of the AAP.

Congratulations to Justin Bennett on his selection as a Pharmaceutical Policy Leader in Medicine. Justin was one of twenty physicians-in-training selected for his demonstration of health care advocacy and his interest in pharmaceutical policy. The leadership institute was hosted this fall by AMSA in collaboration with the Terry Sanford Institute of Public Policy at Duke University.
Autism S.T.A.R. Summer Program

Typically a child’s academics are impacted by summer break, but for an autistic child social development is impacted as well. Pitt County currently has only a few summertime programs that focus on the needs of children with autism. Since none of these programs focused solely on school age children with autism, the need was unmet in our community.

Autism S.T.A.R. sessions were conducted over six weeks, from July 2 to August 9, 2007. We enrolled 40 children ages 5-14 in four groups based on age, location, and functional level. We held the camp in three different cities in eastern North Carolina: Greenville, Goldsboro, and Kinston. Each group met two days each week, either on Monday and Wednesday, or Tuesday and Thursday. In each city, we met at a variety of different locations, including bowling alleys, local pools, skating rinks, parks, museums, nature centers, farms, and other fun locations in the community.

We were able to set up a secure environment at each location geared to the needs of the children. Every activity had to be adapted so that they could be successful in their attempt to accomplish it and also so that the activity fit the needs of each individual child. Planning was a major part of every day but it was worth it when we saw the children participating in activities that typically developing children take for granted. One child, according to his worker, had never been to a playground and had difficulty going down the slide because he had never done it before. By the end of the day, he loved it! Another child had never played miniature golf and was afraid. His closest friend in the group encouraged him to try, and they both had a great time.

Participation in the various activities and using techniques that made the children comfortable, allowed the children to be able to make friends. We had several parents tell us that they were excited to find that their child had invited another child over to their home to play. We even had one child say that another child was now his “Best Buddy.”

Many parents have said that they intended to keep the social groups intact during the school year. Some of the children demonstrated typical friendship roles, giving each other praise after achieving a strike in bowling or comforting another person who was afraid of something. Many of these children had never been able to make friends before this time.

Families of children with autism often find themselves isolated. Once their child is diagnosed, they are left to find help on their own. Medicaid funds the therapy of a small number of children with this diagnosis. The rest are left without funding until they can get federal support. The wait for these families can take from years to decades and help is not guaranteed. One of our goals was to connect these families and make them...
Families of children with autism often find themselves isolated. Once their child is diagnosed, they are left to find help on their own... One of our goals was to connect families and make them aware of resources and support available to them locally.

We were pleased to be able to create a support system within the community. On the first day of camp, parents were excited to receive the contact information of the other parents in the group. It is often difficult for parents of autistic children in rural, eastern North Carolina to meet other families who are experiencing the same things they are. Just as the children were able to make friends, their parents were also able to get support.

The local agencies supporting our camp are also now connected to each of these families and will help them in the future. In addition, we created a 50 page handbook listing local agencies willing to help, and provided these to each family.

Although we spent nearly 700 hours on Autism S.T.A.R., it wouldn’t have been such a success without the generosity of our community. We were awarded a Fellowship from the North Carolina Schweitzer Fellows Program to carry out our project. The Brody family awarded us a grant as a part of their Summer Enrichment Program for the recipients of the Brody Scholarship.

TEACCH (Treatment and Education of Autistic and related Communication-handicapped Children) provided us with a great deal of assistance. They not only gave of their time to help us with planning, but they also volunteered at many sessions during the first four weeks of camp and ran the last two weeks so we could return to school.

Another major contributor to the program was the Pitt County Chapter of the Autism Society of NC. They provided us with funding for the activities, and supplies including tee shirts. Without their support, parents would have been required to pay for each activity. Many of the parents wouldn’t have been able to have their children participate if there had been an activities fee. The Autism Society of North Carolina made it possible for children from all socioeconomic backgrounds to participate in the program.

In addition, faculty and staff of the Brody School of Medicine personally donated sports gear and supplies. The Department of Pharmacology contributed over $200. The Office of Generalist Programs supplied the printing for our awareness handbooks. Local businesses and private donors made large donations of goods and funding as well. We are grateful for the support we received. It helped make our camp a resounding success.

We have received many letters of appreciation from parents of children in our camp as well as letters from those interested in participating in the future. We are working to secure the Autism S.T.A.R. program for future years.

For further information, please contact Natalie Desouza at NTW225@ecu.edu or Rita Sridaran at RS0611@ecu.edu.
Sun Safety East To West

by: Courtney Weems, Class of 2010 and Marie Rowe, Class of 2009

working closely both with the public and with school systems to educate and encourage lifestyle changes in Carteret County.

The National Awareness Melanoma Project recognizes Carteret County among the highest in the North Carolina for melanoma deaths per year. In meeting the goals of Healthy People 2010, addressing cancer and promoting a healthful lifestyle, S.O.S. targets a population falling victim to the circumstances of their environment; children and commercial fishermen.

S.O.S. has reached over a thousand children in the east and worked to maneuver past the embedded prejudices of fishermen to effect change protect them today and in the future.

In 2007, Courtney Weems developed her program P.E.P. (Promotion of Education and Prevention) to target another area of North Carolina in need of sun safety; the mountains of the western region of the state, particularly Avery County. Living, working, or vacationing at high altitudes, increases one’s risk for developing skin cancer. Ultra-violet radiation increases four to five percent for every 1,000 feet above sea level. Many areas in Avery County lie at an altitude of nearly 6,000 feet, creating an increased risk of sun damage for the people who live there and for those who visit its rivers, hiking trails, ski slopes, golf courses, and many other outdoor areas.

Through education and increased awareness of sun safety, it is the goal of the P.E.P. program to help members of the western Carolina community lead healthier lives and be better equipped to handle the dangers of sun exposure.

Bringing S.O.S. and P.E.P. together in the public schools of our state is now our ultimate goal. With education and instruction, students in North Carolina will be prepared for the sun.

To learn more about the projects mentioned in this article, please email Marie Rowe, MSR0919@ecu.edu or Courtney Weems, CLW0930@ecu.edu.