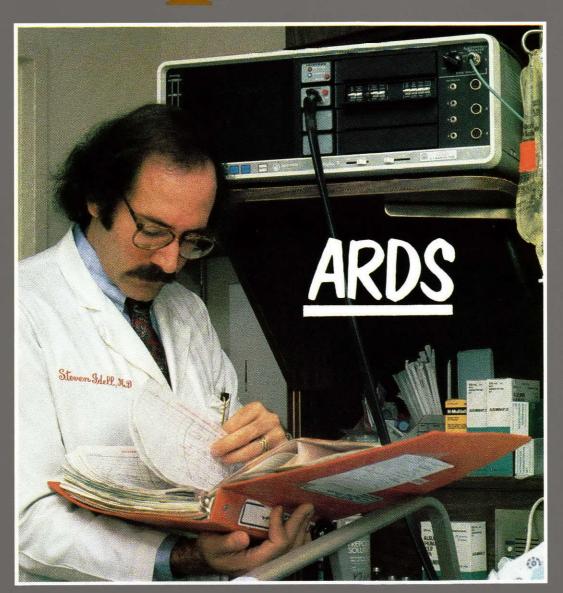
TEXAS STATE
DOCUMENTS COLLECTION

THE UNIVERSITY OF TEXAS HEALTH CENTER AT TYLER



Tyler research focuses on Adult Respiratory Distress Syndrome

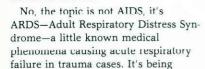


This issue of The University of Texas Health Center at Tyler magazine *Capsule* is published through the generosity of Southwestern Bell Foundation.

CAOSULE CAO

Fall/Winter 1986-87

Vol. 4, No. 2



studied by Tyler physician Dr. Steven Idell and his research colleagues. The story begins on page 2.

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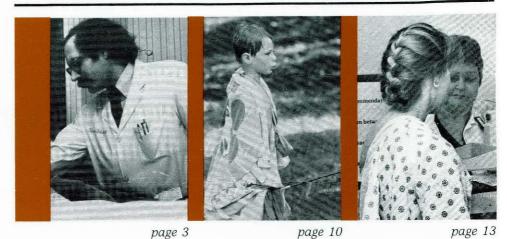
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The University of Texas Health Center at Tyler is a state referral hospital and research center for cardiopulmonary diseases. It is accredited by the Joint Commission for Hospital Accreditation and is a member of the American Hospital Association and the Texas Hospital Association.

ARDS

Adult Respiratory Distress Syndrome

ARDS surfaced during the Vietnam War when soldiers suffering severe wounds mysteriously developed acute respiratory failure much later. Tyler physician Dr. Steven Idell and others are looking for an effective treatment.

eing a referral hospital for cardiopulmonary patients, the University of Texas Health Center at Tyler receives many patients who are in severe respiratory condition and have to be rushed to the intensive care unit.

In most cases, these patients with chronic respiratory diseases are stabilized, successfully treated and returned to their referring physician for continuing therapy.

But it is estimated that annually 150,000 Americans suffer sudden and catastrophic respiratory failure from viral or bacterial pneumonia or from trauma or injury. Today they are considered a special case. They may be identified as victims of Adult Respiratory Distress Syndrome, or ARDS, as it is called in medical jargon.

ARDS came to medical researchers' attention during the Vietnam War,

according to Dr. Steven Idell, associate professor of medicine and director of the health center's medical intensive care unit. Idell, a physician who also has a Ph.D. in physiology, is studying the pathogenesis of ARDS, looking for a specific, effective treatment.

For example, for some unknown reason some American soldiers in Vietnam who suffered leg wounds mysteriously ended up with acute respiratory failure several hours later. The wounded soldier survived the leg wound because of quick treatment and swift evacuation from the battlefield, but developed respiratory complications (ARDS) which often proved fatal.

"At that time, this appeared to be something new. But ARDS is today seen more frequently in modern hospital practice because of our ability to preserve life for longer periods of time in the setting of acute severe illnesses," said Idell.

"As a result of our ability to treat severe infections and to sustain people who have suffered multiple injury or trauma, we're beginning to see more of this problem," Idell said.

"It's also important to note that ARDS is a syndrome and not a disease. It's a constellation of events, consisting of wet lungs, acute respiratory failure and poor oxygenation of the blood," Idell said.

The importance of ARDS rests in the large number of people who are affected, the high associated mortality of this syndrome and the possibility of the disorder affecting previously healthy people.

"When ARDS was first described and identified, the survival rate was anywhere between 50 to 80 percent. Despite the introduction of life support systems and ventilators, the mor-



Despite life support systems, the mortality rate of ARDS has not changed, says Dr. Steven Idell, who is studying the pathogenesis of the syndrome.

tality rate remains the same today," Idell said.

"Currently, early diagnosis is best recognized clinically. Diagnosis is made strictly on the basis of clinical recognition of acute respiratory failure and chest X-rays in which abnormalities are usually shown as diffuse, bilateral infiltrates, that is, whiteout of the lungs," he said.

Although this is an ongoing area of research interest, Idell said no specific biochemical test is now available to expedite the diagnosis of ARDS.

"There have been several efforts to develop biochemical parameters that can predict ARDS at an earlier stage because once you do detect it clinically it's reasonably advanced and very severe," Idell said.

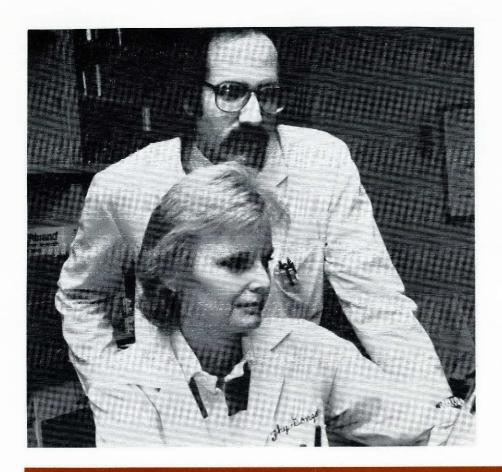
Idell's research focuses on how coagulation affects development of acute lung injury and repair.

"The rationale behind our study is that in the course of ARDS, the blood vessels of the lungs actually leak, and blood components enter the airspace from which they are usually expelled," he said.

These blood components aren't readily cleared, Idell says. Once the blood components are outside the lung's blood vessels, they may clot and interfere with oxygenation, directly injuring the lungs or causing scar formation in the lungs.

"We have already identified two coagulation pathways contributing to clot formation in the acutely injured lungs. If we can identify the relationship, we might be able to influence the outcome of lung injuries such as ARDS," he said.

Idell says that from this and other research studies, it might be possible to use specific, directed therapy which would be more effective in Idell's study focuses on how coagulation affects acute lung injury.



Several other Tyler researchers are collaborating with Dr. Idell on the ARDS project which is being funded from a NIH grant. Research associate Kathleen Gonzales assists Idell in his lab.

treating ARDS rather than the current daughter's untimely death due to treatment which is purely supportive. ARDS, Idell said. Current therapy includes ventilator treatment, hemodynamic monitoring, dialysis and drugs to maintain blood pressure.

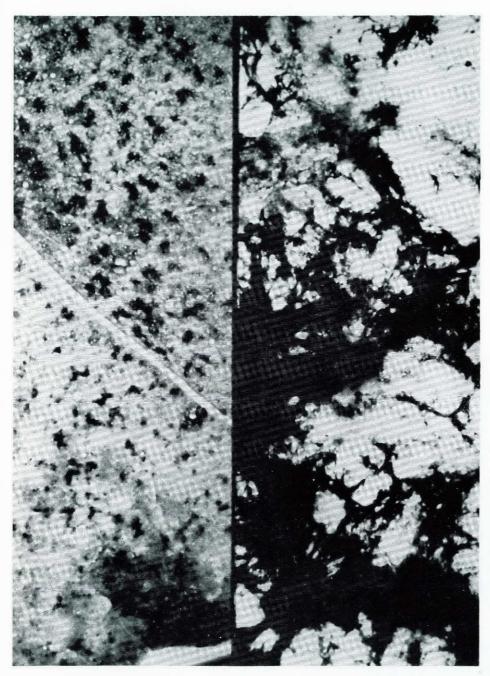
The research, being conducted in health center laboratories, is funded by a \$320,000 grant from the National Institutes of Health. Collaborating with Idell on the project are UT Health Center biochemists Dr. Daryl Fair and Dr. Allen B. Cohen and physicians Dr. Joe G.N. Garcia and Dr. David Griffith.

Additional funding includes contributions of \$30,000 from the American Lung Association, \$50,000 from the American Heart Association's Texas Affiliate and \$18,000 from the Gina Sabatasse Memorial Research Fund. The latter was established by Sabatasse's mother, Betty Rumsey of California, after her

The Tyler research center is also exchanging ARDS information with researchers at institutions in Ohio, Washington, Michigan, Connecticut and San Antonio.

> Tyler researchers are exchanging information with colleagues in other states.

Emphysema: Quest for a Cure Tyler study trying new use for an old drug



Normal Tissue

Diseased Lung Tissue

mphysema is a destructive disease affecting hundreds of thousands of Americans. It damages the lungs and can damage the heart as well.

A high percentage of those who get emphysema are heavy smokers, and continued smoking definitely makes emphysema worse.

People with emphysema may some day benefit from a drug that is currently being used to treat gout and certain forms of arthritis.

Medical researchers at the University of Texas Health Center at Tyler are now testing the drug colchicine to see if it will also help stop emphysema's progressive lung destruction.

"Colchicine is an old drug, but we may have found a new use for it," according to Dr. Allen B. Cohen, the health center's executive associate director who heads the three-year study which began in the fall of 1985.

Emphysema patients or smokers have volunteered to participate in the study. The study targets emphysema patients who do not smoke or smokers over age 45 who may be in the early stages of the disease.

Approximately 35 volunteers who qualify have been enrolled in the study. Participants take the drug three times a day for two weeks, and certain tests are taken as they enter and complete the project. To compare the drug's effect, some patients receive a placebo or sugar pill, and others receive colchicine.

The purpose of the research is to find out if the white blood cells, which enter the lungs over many years in response to irritation by cigarette smoking, can be prevented from doing any further damage if the drug is taken.

"There is some evidence from other studies that colchicine may be the drug we've been looking for," said Cohen, a nationally known researcher who came to Tyler three years ago from Philadelphia to head the health center's cardiopulmonary research mission.

Emphysema researchers from around the country have been working on experimental drugs that will attack the underlying causes of the disease.

In 1984 the UT Health Center received a \$614,420 three-year grant from the National Heart, Lung and Blood Institute to test colchicine. Staff physician Dr. William Girard, nurse clinician Doris Davis and a research staff of biochemists are assisting with the project.

If these and other studies

demonstrate that the treatment will prevent further lung damage for people who already have emphysema or are in the early stages of the disease, many people in the future will benefit from these tests now being conducted in Tyler, Cohen said.

That's why Tyler resident William Davenport volunteered to participate in the study. Almost 20 years ago, he was diagnosed as having emphysema. He quit smoking immediately following the diagnosis and began a regimen of proper exercise and diet to deter further damage to his lungs.

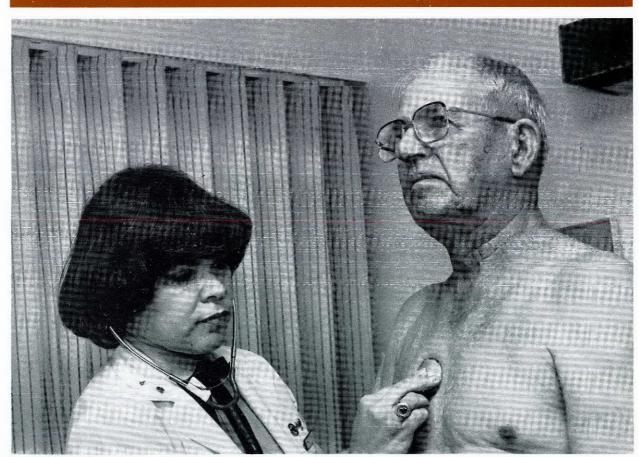
"I volunteered for the study because I wanted to make a contribution toward a cure of this disease. Of course, another reason I volunteered was to see how bad my emphysema was and how I could be helped," Davenport said.

Davis, the emphysema study coordinator, agreed, adding, "As a nurse, it is interesting and rewarding to see the willingness of volunteers to par-

ticipate in a study with so much potential benefit to others.

"I feel that it is an honor to have the opportunity to accompany these volunteers through a clinical trial which could improve the level of wellness in our society," she said.

Local volunteers want to make a contribution and to determine if they have the disease.



Emphysema study coordinator and nurse Doris Davis checks volunteer William Davenport's vital signs.



UT Health Center offers as a public service a free clinic for diabetes patients (see below) and one for pulmonary patients who need to learn how to breath again (page 8).



Education Program for People With Diabetes Now Available

An education program for people with diabetes is now being offered by the UT Health Center to help them and family members learn more about the disease and how to better control it.

There is no cost for participating in the program, says course director Dr. David Shafer, assistant professor of medicine, but enrollment is limited and enrollees should be referred by their physician. The program is provided as a public service to promote better health care and disease prevention.

Classes are conducted once weekly from 10 a.m. until noon. Instructional methods include lectures, audio Designed to promote better health care and disease prevention.

visual presentations and demonstrations. There is ample opportunity to ask questions.

The five-week course covers the following subjects: an overview of the disease and its causes; treatment and complications; meal planning; two sessions on managing the disease; and factors affecting control and lifestyle changes.

For further information or to enroll, contact nurse coordinator Barbara Hiltscher by calling 214/877-3451, ext. 2409.

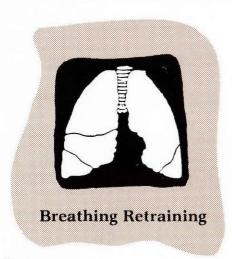
Other health center staff members assisting with the program are dietitian Mary Garrett and exercise physiologist Dr. Rick Carter.

Free One-Day Clinic Designed for Pulmonary Patients

s the trend of fewer and shorter hospital admissions—caused by changes in Medicare regulations—continues, many patients suffering from chronic lung diseases are finding themselves lost in the scuffle.

Medicare does not pay for certain types of long-term illnesses, causing these patients to seek treatment on an outpatient basis.

To help these kinds of people, the University of Texas Health Center now offers a free one-day pulmonary education program to show them and family members how they can cope and live more comfortably with their disease, according to Dr. P. LeMon Clark III, medical director of the health center's pulmonary rehabilita-



tion program.

The monthly program, scheduled the first Thursday from 8:30 a.m. until 3 p.m. at the health center, provides instruction and exercises to improve lung function.

The day-long clinic is patterned after a more extensive two-week program developed two years ago for hospitalized patients. In response to a growing need among outpatients for such a program, Clark and the health center's executive director Dr. George A. Hurst designed the shorter version of the program.

Health center personnel from respiratory therapy, physical therapy, nursing, exercise physiology, nutrition and social services departments lead sessions covering breathing retraining, respiratory drugs and their

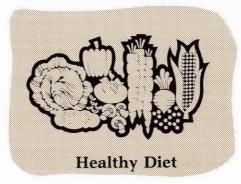


side effects, inhaler therapy, proper exercise and diet.

Pat Smith, the program's nurse coordinator, says persons with chronic obstructive pulmonary disease (COPD) have chronic bronchitis, emphysema, asthma or varying combinations of the three. Causes of the disease are linked to heavy cigarette smoking or frequent infections, such as colds, influenza or pneumonia. Even the atmosphere—filled with fumes, dust and pollen—adds to the chronic irritation of patients' lungs, Smith said.

The lungs and respiratory muscles of COPD patients don't work as efficiently as they used to, says nursing education instructor Barbara Hiltscher, who also helped design the health center program.

Smith said once patients learn and practice a few exercises, they soon develop better breathing control. This allows them to do more daily activities before becoming short of breath. They recover more quickly also when they do become short of breath, she



said.

For Troup resident Jeannette Wilson, who was recently diagnosed as having emphysema, the pulmonary education program has meant being able to lead a normal active life.

"It bothered me when I was first diagnosed as having emphysema. I was afraid that I wouldn't be able to do the things I used to do.

"But through the pulmonary rehabilitation program, I can. I still work in Tyler. My husband and I enjoy harvesting our pecans. And to top all that, I stopped smoking," she said.

The free pulmonary program's instructors helped Wilson understand how to use her medications correctly; the importance of good nutrition,



proper weight and exercise; and how to breathe, she said.

"I'm conscious of how I breathe. I now know to breathe out while picking up groceries," she said.

The nurses agreed that the quality of life for COPD patients will be greatly improved through this increased awareness and understanding.

Research has shown that few patients have the capacity to deal with chronic obstructive pulmonary disease without the support of family, friends and trained medical support. A better understanding of the disease process is essential and is the aim of this educational program.

Texas Chest Foundation UTHC Development Board

Roosth Re-elected TCF President; Life Members Also Recognized

Texas Chest Foundation's Board of Trustees and the University of Texas Health Center's Development Board held their joint annual meeting Nov. 11 at Willow Brook Country Club with more than 80 members and guests in attendance.

TCF President Isadore Roosth was re-elected president. A.W. (Dub) Riter Jr. was elected vice president; Jud Adams, secretary; and Henry Bell III, treasurer.

In reviewing the Foundation's annual report, it was noted that individual membership in the Foundation is now approaching the 100 mark. The membership drive was highlighted by three new life members: Mr. and Mrs. A.W. Riter Jr., Mr. and Mrs. Bob L. Herd and Dr. and Mrs. George A. Hurst. All three couples were present to receive their life membership plaques.

Roosth said a special capital fund has been established by the Foundation with the \$10,000 life memberships, which now total 13.

Other life members are Harold Beaird, Charles Devall, Nancy Lake, Hillman O. McKenzie, Isadore Roosth, Royce Wisenbaker, Dr. and Mrs. Earl C. Kinzie, Mr. and Mrs. Will A. Knight, Mr. and Mrs. Harry Phillips and Mr. and Mrs. Ralph Spence.

Membership in other categories include three cooperate members, 34



Grady Faulk, left, Texas Chest Foundation executive director, goes over details of annual meeting with nominations committee chairman Royce Wisenbaker and president Isadore Roosth.

Century Club members, 12 patron members, 20 sustaining members and 15 active members. Total membership during 1986 was 97, according to Foundation executive director Grady Faulk.

The trustees and directors also were given a special report on the

research activities at the health center. Making presentations were Dr. Ronald F. Dodson, associate director for research and chairman of the department of cell biology and environmental sciences, and Dr. Allen B. Cohen, executive associate director.

Texas Chest Foundation

Texas Asthma Camp Set for June 27-July 4

The third annual Texas Asthma Camp, now sponsored by Texas Chest Foundation, is scheduled from June 27 to July 4 at Camp Tyler.

The special camp is designed to give asthmatic children, ages 7 to 14, a chance to enjoy camping activities—such as swimming, crafts, sports, nature studies, canoeing and archery—despite their health problems, according to the camp's medical director and resident physician Dr. Michael Green, who heads pediatric pulmonary services at the UT Health Center.

This year the resident camp director is Kathy Dickey, a registered nurse with five years experience managing outdoor camping, Green said.

Volunteer resident counselors and activity leaders will be students from UT Tyler and Tyler Junior College. UT Health Center personnel will also assist.

"We would like to thank Dr. George Hurst for his willingness to





Texas Asthma Camp helps youngsters cope with their disease and enjoy activities such as archery (above) and swimming (below left).

allow the necessary medical expertise to attend the camp for the safety and well being of these children with asthma," Green said. During its first two years, the camp was co-sponsored by the UT Health Center. The Foundation assumed full responsibility of the camp for 1987.

Employees Provided Educational Assistance

Texas Chest Foundation awarded 161 scholarships amounting to \$25,447 to UT Health Center personnel during the past fiscal year to help employees improve their skills or to work on a college degree.

Because of the number of applications and recent tuition increases at state colleges, the Foundation had to place a limit of \$200 on tuition and fees and \$50 for books per student each semester.

The Foundation has been providing grants and scholarships to health

center personnel since 1972, totaling about \$160,000.

This past year the Foundation also helped sponsor the second annual Texas Asthma camp for children, ages 7 to 14, at Camp Tyler; sponsored the annual pastoral care seminar; and provided financial assistance for the education department's lecture series at Tyler Public Library called HEAL (Health Education Adds Life).

UTHC Development Board

Golf Tournament Assists General Fund

The third annual Texas Chest Foundation benefit golf tournament held at Hollytree Country Club Aug. 18 provided a net income of \$3,857 for the Foundation's general fund, according to tournament chairman Gene Meier, district manager for community relations at Southwestern Bell Telephone in Tyler.

Other tournament committee members were Art Johnson, Larry Hickman, David Bibby, Jack Davidson, and Lonny Uzzell.

Twenty-four merchants and friends provided tournament prizes for the 120 golfers entering the six-man team scramble.



Golfers prepare for tourney to benefit Texas Chest Foundation

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Footnote:

UT Health Center Development Fund gifts are reported separately in *Development News*, a newsletter published semi-annually. Gifts reported here are contributions to Texas Chest Foundation only.

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Cancer

The Key to Survival is Early Detection



Low-dose X-ray mammographies are an important tool in detecting breast cancer early.

he chances of an American woman developing breast cancer are one in 11. It is the second leading cause of cancer death among women, claiming 40,000 lives last year alone.

Despite these odds, the good news is that the survival rate is improving. The five-year survival rate is now 91 percent, a significant increase from the 74 percent survival rate of a decade ago.

The best protection against breast cancer is still early detection, according to Dr. Ragene Rivera, head of oncology services at the University of Texas Health Center at Tyler.

In its first year of operation, the health center's Breast Diagnostic Center recorded more than 1,000 patient visits. As a result of the screenings, 53 East Texas women required breast surgery, including 20 mastec-

Surviving Breast Cancer: One Woman's Story

I found the lump under my right nipple while showering. Immediately, I jerked my hand away. I waited two days before I even touched that spot again. I guess I was hoping it would go away.

"It didn't. It was still there. I then told myself, you've got to face reality.

"That same day I called the Breast Diagnostic Center at the UT Health Center. They scheduled me for an appointment immediately."

Suddenly this 46-year-old Tyler woman, who has requested anonymity (so we will call her Linda), was faced with a possible diagnosis of breast cancer. She had never been seriously ill in her life. With 30 years of marriage and two children, she was also enjoying her job with a state agency located in Tyler and her aerobics class and gardening.

(continued on next page)

tomies and six lumpectomies, Rivera said.

The National Cancer Care Foundation and the American Academy of Family Physicians co-sponsored Breast Cancer Awareness Week in October to encourage women to do monthly breast self-examinations and for those women in high-risk groups to make annual low-dose mammographies a part of their routine physical examinations.

Last year's special awareness week coincided with the first anniversary of the Breast Diagnostic Center.

For a limited time this spring, the UT Health Center and other hospitals participated in a statewide effort with the American Cancer Society to provide special mammography examinations to women at reduced cost (no more than \$50).

The purpose of the 1987 Texas Breast Screening Project-part of a major national ACS campaign—is to educate American women on the benefits of mammography and early detection.

The UT Health Center's Breast Diagnostic Center has three basic features:

- patient education
- instruction in breast selfexamination
- physical examination and mammography, if needed. The center has a direct line (214-877-9194). Appointments can be made by selfreferral or upon recommen-



Tyler woman urges others with breast symptoms to seek help

dation of physician.

(continued from page 13)

But oddly enough, once she faced the possibility of a breast malignancy, she found an inner strength which prepared her emotionally for whatever the doctor diagnosed.

After the physical examination, Dr. Ragene Rivera, who heads the health center's oncology services, did a

your body know these things.

"I knew I wanted to have it taken care of as soon as possible. I didn't have a problem handling the removal of my breast emotionally. The only time I became upset was when I had to tell my husband. I don't know if I was feeling badly for myself or for

Linda chose a modified mastectomy without radiation therapy, and after surgery one Tuesday in March, she was home by the following Friday.

"I began my recovery right away. The healing process wasn't bad at all," she said.

"I have tried to keep a positive attitude through it all. I knew I was in good hands. The UT Health Center staff are all wonderful. None of us have guarantees about tomorrow, but I am confident the cancer will not reoccur.

"I urge any woman who finds something to see a doctor right away. Following my surgery, my boss arranged for every woman in our office to attend a seminar about breast cancer at the UT Health Center. The breast center's nurse, instructed us on breast self-examination and breast abnormalities.

"Having breast surgery is not as scary as some people might think. I'd rather lose a breast to cancer than an eye, an arm or a leg," Linda said.

-Rita Nute

Once she faced the possibility it was malignant, this patient found an inner strength which prepared her emotionally for whatever the doctor diagnosed.

needle aspiration and drained fluid from the lump for laboratory testing. Rivera also arranged a mammography.

In just a few hours, the diagnosis was confirmed by laboratory test and Health Center's surgery department, mammography, the low-dose X-ray used to identify breast abnormalities.

"It was malignant," Linda said. "I wasn't surprised. Deep down I expected it. I think somehow you and

him. We've had a good life together. And he was so supportive throughout it all."

Dr. Kenwyn Nelson, head of UT presented Linda the options available to treat her breast cancer. They included a modified radical mastectomy, lumpectomy or radical mastectomy.

Newsbriefs

Cancer risk high among asbestos workers in study

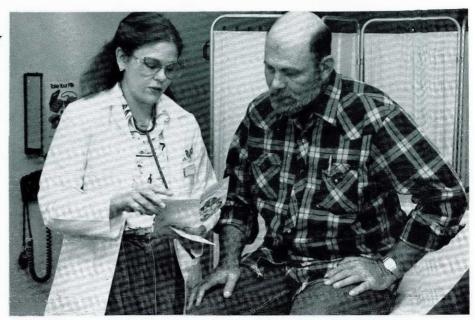
Since enrollment in the UT Health Center's cancer preventive research study of former asbestos workers began two years ago, some 15 volunteer participants have died from cancer and other asbestos-related diseases.

These figures verify the high risk inherent in this group, according to Dr. Jerry McLarty, chairman of the health center's epidemiology and biomathematics department.

The lung cancer rate among these former asbestos workers is five times the national average and will continue to rise, McLarty said.

In December, the UT Health Center enrolled its 600th participant in the study, becoming one of the first of several institutions conducting national studies to achieve its enrollment goal, he said.

The latest volunteer, James Maxwell, is a construction worker from Allen near Dallas. He is a former Tyler-area asbestos worker once employed at a nearby Pittsburgh Cor-



Nurse Lynda Riley instructs the 600th volunteer James Maxwell.

ning plant which closed in 1972.

The Tyler research project is part of several national studies being funded by the National Cancer Institute to test the use of vitamin-related compounds as cancer preventive agents. Two of the 20 projects—the one in Tyler and one at the University of Washington at Seattle—are concen-

trating on former asbestos workers. The health center was awarded a \$1.7 million grant in September 1984 to conduct its study.

McLarty said the national study is expected to be completed by 1989. He will make a detailed report to the National Cancer Institute at that time.

Local schools using UTHC curriculum guide

While Americans across the country were encouraged to give up cigarette smoking during the Nov. 20 Great American Smokeout, a tobacco awareness education program was already underway in several East Texas schools explaining to children why they should never start the habit.

The curriculum guide being used by area school teachers was developed by the UT Health Center.

The fifth grade is not too young to begin, says Betty Tirey, health center education conference coordinator who organized the teaching materials. The curriculum guides were compiled and distributed this fall through grant funds provided by the Tyler chapter of the American Association of University Women and the UT System Chancellor's Council.

"The message we are giving these young people is that the best way to stop smoking is never to start," Tirey said.

That's why the UT Health Center three years ago created and tested for two years a tobacco awareness program designed for fifth graders to educate them about the dangers of smoking before they enter middle school

Co-sponsored by Tyler ISD, pro-

gram volunteers initially taught tobacco awareness to fifth graders in two Tyler elementary schools and expanded the program to five schools last spring.

To date, training and curriculum guides have been provided to Tyler elementary schools; Troup elementary, middle and high schools; Kilgore fifth grades; and, through the Region VII Education Service Center, to teachers of all grade levels from White Oak, Karnack, Sabine, Henderson, Overton, Chandler, Montalba, Murchison and Brownsboro.

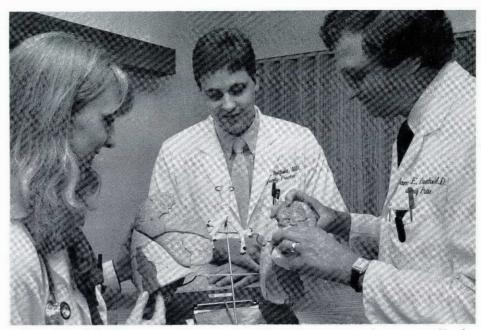
Nine residents plan to practice in area

Now in its second year, the UT Health Center's family practice residency program is preparing young physicians who hope to soon settle in East Texas counties which need more family physicians, according to program director Dr. James E. Crutcher.

So far, nine of 11 residents participating in the residency training have indicated they want to establish practices in East Texas once they complete the three-year program, he said.

Crutcher, formerly from Pennsylvania State University where he directed a similar program affiliated with Saint Joseph Hospital in Reading, Pa., came to Tyler in August.

"This is a tremendously underserved area," Crutcher said of the number of physicians practicing in the region's rural areas. "Several East



Drs. Lisa McAdams and James Redfield (center) review a medical diagnosis with family practice director Dr. James Crutcher (right).

Texas counties, including Smith County, have been designated as health shortage areas, creating a need for a post-graduate medical education program. This program will help

alleviate the shortage," Crutcher said.

By 1987 when the program is fully operational, 18 residents are expected to be enrolled.

Admissions increase over previous year

UT Health Center admissions for the past fiscal year increased 3 percent, growing from 4,367 inpatients in 1985 to 4,517 in 1986.

Planning director Terry Hargadon said the increase is significant since there continues to be a continuing downward trend in hospital admissions nationally. He said the health center had experienced a 1 percent decrease in 1985 due to Medicare regulation changes affecting chronic respiratory disease admissions.

Among the health center's various service categories, heart disease is now the largest service at the health center with a 36 percent increase in admissions. With 963 patients admitted in fiscal year 1986, heart service

is now the largest service area. Second is chronic respiratory disease with 907 admissions, representing a 25 percent drop over the previous year.

Other categories and growth rates are as follows: general medicine 699 admissions, up 41 percent; other chest diseases 680 admissions, down 5 percent; oncology 775 admissions, down 7 percent; surgery 241 admissions up 27 percent; and tuberculosis 252 admissions, up 10 percent.

CPR committee trains employees to save lives

The cardiopulmonary resuscitation committee is sponsoring an effort to train UT Health Center employees desiring basic life support training and certification.

As of October, 26 employees had taken the course and they in turn were helping in the training of other health center employees in CPR, according to Dr. George O. Crisp, professor of medicine and CPR committee chairman.

"The response to this effort is very gratifying, and we feel it is unique that every employee who uses their heart saver training can do so because of this program," Crisp said.

Newsbriefs

Resident housing project underway

The UT System Board of Regents last fall awarded a \$597,000 building contract to Tri-Phase Construction Co. of Frankston for construction of the first phase of a medical resident center.

The project consists of a cluster of five one-story buildings to house four medical residents each, plus three two-bedroom units for married residents.

Total cost of the project is \$750,000 which is being financed from gift funds. The project was approved a year ago by the Coordinating Board, Texas College and University System.

The housing units are being constructed north of the UT Health Center's main hospital complex on a site where two old frame houses have been removed. Construction is expected to be completed by the summer.

UT Health Center director Dr. George A. Hurst said the new housing is needed to quarter medical students and research scientists who come to the health center on a temporary basis and for physicians who are in the family practice residency training program.

Library uses PUF funds to enhance collections

An acquisition plan developed by the medical library staff from a faculty-staff survey is being used as a guide to purchase additional UT Health Center's library collections with \$74,000 allocated by the UT System Board of Regents from Permanent University Funds.

Library services director Elaine Wells says the additions will strengthen the research collection



First phase of a \$750,000 medical resident center is now under construction. The project consists of seven buildings that will house 20 singles and three families and is expected to be completed this summer.

directly related to the health center's cardiopulmonary mission. The collection will include books, journals and microfilm for the Watson W. Wise Medical Research Library.

More than \$12 million in PUF funds were distributed by regents to UT components last summer to strengthen existing collections and to automate access to collections at all UT System libraries.

The UT Health Center at Tyler was one of three UT institutions receiving catch-up funds to strengthen existing collections. The health center will eventually receive funds for automation.

"We hope to begin our automation project with a networking system called Online Computer Library Center (OCLC)," Wells said. "This system will help streamline our public services and technical services duties and enable the health center to share cataloging information and to facilitate interlibrary loan procedures," she added.

Physician chairs national meeting

UT Health Center's chairman of microbiology Dr. Richard Wallace Jr. chaired an ad hoc review committee for the National Institute of Allergy and Infectious Diseases Nov. 21 in Washington, D.C.

The meeting involved reviewing contract proposals submitted by physicians and scientists for the development and evaluation of drugs used in the treatment of mycobacterial infections.

In October Wallace served as a special advisor for the Center for Drugs and Biologics at the invitation of the Food and Drug Administration.

Cardiology opens new clinic area

The cardiology department finally has found a permanent home.

As the health center's fastest growing service unit, cardiology has suffered growing pains. Its diagnostic testing units have been in one area, examination rooms and physician's offices in another. Now they are all being brought together on the second floor of unit B.

"This will be a much more convenient location," said Sharon Verash, director of cardiology laboratory services. "Previously, the cardiology clinic was spread out in two or three other locations. Now we're all together."

By next summer, offices for the three cardiologists and a new catheterization lab also will be established in the same southwest wing.

The area now occupied includes a new reception area and director's office and three patient examination rooms.

Verash said the new cath lab also will improve the unit's ability to conduct diagnostic testing. "We've had to share the special procedures lab with radiology," she said. "This will be a dedicated lab strictly for our use."

Currently cardiology is averaging 50 catheterizations a month. She said that number may increase significantly with the new lab.

Tulane speaker leads seminar for physicians

Dr. Hans Weill, a national authority on respiratory problems caused by the workplace environment, in March led a UT Health Center seminar on occupational lung disease for area physicians.

A professor of medicine and head of Tulane University's pulmonary



Physician Retires. Dr. Fred Liu acepted a plaque of recognition presented by chief of staff Dr. Kenwyn Nelson during a retirement reception honoring Liu's 24 years of service at the health center.

diseases division in the School of Medicine at New Orleans, Weill also is an investigator of respiratory health problems caused by such airborne inhalants as silica, asbestos, man-made mineral fibers, cotton, chlorine and isocyanates. He has consulted widely with federal agencies and with the private sector on occupational and environmental hazards.

Some 75 area physicians attended the luncheon and afternoon seminar in the health center's Hudnall Auditorium. Other speakers included Dr. Donald Greenberg, professor of pathology, Baylor College of Medicine at Houston, covering "Mechanisms of Lung Injury"; Dr. Robert Shepherd, chairman of UTHC's radiology department, who addressed "The Role of Radiologic Assessment"; and Dr. Richard Kronenberg, chairman of UT Health Center's Department of Medicine, speaking on "The Role of Functional Assessment."

Funds allocated to buy equipment

The UT Health Center will receive \$400,000 from the latest Permanent University Fund (PUF) allocations to purchase molecular biology laboratory equipment.

Meeting in Austin Jan. 14, the UT System Board of Regents revised and extended its long-range capital improvement plan. The plan will provide PUF bond proceeds for construction projects, building repair, equipment purchases and library enhancement through 1992. Last year the health center received \$820,000 for equipment purchases and library improvements.

The regents have approved in principle the health center's request for \$10 million in capital improvements to expand its outpatient and family practice clinics, but it is not yet known when the funds will be allocated.

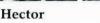
Appointments

staff during the summer and fall, announced health center director Dr. George A. Hurst.

They included a third cardiologist and an additional pediatric specialist to handle increased patient referrals, a new pathologist and an anesthesiologist to fill vacancies and two internists who replace retiring members of the medical staff.

Cardiologist Dr. David A. Hector II, who completed a fellowship at the Cleveland Clinic in Ohio prior to joining the health center, has been appointed assistant professor of medicine. A 1974 graduate of DePauw University with a B.A. degree in chemistry, Hector later received his M.D. degree in 1978 from the University of Cincinnati and completed his internship and residency training at Cincinnati's Good Samaritan Hospital.







Devillier

Dr. James R. Devillier, appointed as an assistant professor of clinical and anatomical pathology, is a former assistant chief of anatomic pathology at D.D. Eisenhower Army Medical Center in Fort Gordon, Ga. He received both his B.S. degree in pharmacy and M.D. degree, the latter in 1977, from the University of Kansas. He completed internship and pathology resident training at Brooke Army Medical Center at Fort Sam Houston. He also was chief of pathology at Munson Army Community





Suez

Hendrickson

Hospital at Fort Leavenworth, Kan., for two years. He is board certified in pathology.

Dr. Daniel Suez, who completed a three-year pediatric fellowship at the National Jewish Center for Immunology and Respiratory Medicine in Denver prior to joining the health center staff, has been appointed assistant professor of pediatrics and assistant professor of immunology. He will assist with pediatric pulmonary patients, operate an allergy clinic and conduct research. Suez received his M.D. degree from the University of Paris-Sud where he graduated cum laude in 1977 and completed residencies at Versailles Center in Paris and at Barzilai Medical Center in Ashkelon, Israel, where he was head of the pediatrics department.

Dr. Marjorie H. Hendrickson, formerly at the University of Mississippi Medical Center in Jackson, has been appointed associate professor of anesthesiology.

As anesthesiologist for the department of surgery, Hendrickson supervises all anesthesia, including open heart anesthesia. At Mississippi she was medical director of nurse anesthesia. The Port Arthur native received an M.D. degree from the University of Texas Medical Branch at Galveston where she also completed her residency in 1981. She also has a B.A. degree from UT Austin.

Internists Dr. William Thomas Belt Jr. and Dr. David B. Shafer also join-

ed the health center medical staff as assistant professors of medicine.

Belt is a 1977 graduate of UT Austin where he obtained a B.S. degree in electrical engineering. He received an M.D. degree in 1981 from UT Southwestern Medical School at Dallas and completed his internship and residency at Medical College of Georgia in Augusta. He is board certified in internal medicine.

Shafer, who is also board certified in internal medicine, comes to the health center from Claremore Indian Hospital in Oklahoma where he was a staff internist and medical director of the intensive care unit. He received a B.S. degree from Texas Christian University where he graduated Phi Beta Kappa in 1974. He received his M.D. degree from Baylor College of Medicine in 1978. He completed his internship and residency at the University of Oregon Health Science Center.







Shafer

Published Research

The following are recently published or to be published research papers written by research and clinical faculty at The University of Texas Health Center at Tyler. Health Center authors are in bold.

American Journal of Clinical Pathology, "Characterization and comparison of immune depleted and hereditary Factor VII deficient plasmas as substrate plasmas for Factor VII assays" by J.T. Brandt, D.A. Triplett and D.S. Fair.

American Review of Respiratory Disease, "Recurrent nocardia pneumonia in an adult with chronic granulomatous disease" by S. Jonsson, R.J. Wallace Jr., D.M. Musher and S.I. Hull

American Review of Respiratory Disease, Characterization of beta-lactamases in mycobacterium fortuitum including a role in beta-lactam resistance and evidence of partial inducibility" by D.R. Nash, R.J. Wallace Jr., V.A. Steingrube, T. Udou and L.C. Steele.

American Review of Respiratory Disease, "Sulfonamide containing regimens for disease caused by rifampin resistant mycobacterium kansasii" by C.H. Ahn, R.J. Wallace Jr., L.C. Steele and D.T. Murphy.

American Review of Respiratory Disease, "State of the Art: Pulmonary microcirculatory actions of the leukotrienes" by J.G.N. Garcia, W. Jubiz and A.B. Malik.

American Review of Respiratory Disease, "Bronchoalveolar lavage procoagulant activity in bleomycin-induced lung injury relationship to pulmonary fibrosis" by S. Idell, K. Gonzalez, C.K. MacArthur, P.N. Walsh, C. Gillis and R.S. Thrall.

American Society for Clinical Investigation, "Multiple forms of the alveolar macrophage enzyme releasing peptide in bronchoalveolar lavage fluids from patients with ARDS" by A.B. Cohen, C. MacArthur, E. Miller, S. Idell, D.E. Griffith, J.W. McLarty, R. Maunder and T. Martin.

American Thoracic Society, "A peptide (Durin) from alveolar macrophages (AMI) is the major factor which releases neutrophil azurophilic granule enzymes into the lungs in patients with ARDS" by A.B. Cohen, C. MacArthur, S. Idell, D.E. Griffith, J.W. McLarty, R. Maunder and T. Martin.

Annals of Allergy, "A standard method of intermittent inhaled therapy via a jet nebulizer" by D. Suez and H. Chai.

Antimicrobial Agents & Chemotherapy, "Disk diffusion susceptibility of Branhamella catarrhalis and relationship of beta-lactam zone size to beta-lactamase production" by I. Luman, R.W. Wilson, R.J. Wallace Jr. and D.R. Nash.

Antimicrobial Agents and Chemotherapy, "Effect of Candida morphology or amphotericin B sensitivity" by K.M. Nugent, K. Couchot and M.L. Davis.

The Antimicrobic Newsletter, "Identification and susceptibility testing of the rapidly growing mycobacteria" by R.J. Wallace Jr., J.M. Swenson and V.A. Silcox.

Antimicrobial Agents and Chemotherapy, "Antimicrobial susceptibility of 5 subgroups of Mycobacterium fortuitum and Mycobacterium chelonae" by J.M. Swenson, R.J. Wallace Jr., V.A. Silcox and C. Thornsberry.

Annual Review of Biochemistry 56, "Protein serine and threonine kinases" by A.M. Edelman, D.K. Blumenthal and E.G. Krebs.

Archives of Dermatology, "Recent clinical advances in knowledge of the non-leprous environmental mycobacteria responsible for cutaneous disease" by R.J. Wallace Jr.

Biochemical and Biophysical Acta, "Molecular interactions of the intrinsic activation complex - binding of native and activated human Factors IX and X to defined phospholipid vesicles" by B.J. Burri, T.S. Edington and D.S. Fair.

Biochemical Journal, "The C3 convertase of the alternative pathway of human complement" by M.K. Pangburn and H.J. Muller-Eberhard.

Biochemistry, 'Amino acid sequence of rabbit skeletal muscle myosin light chain kinase' by K. Takio, D.K. Blumenthal, K.A. Walsh, K. Titani and E.G. Krebs.

Blood, 'Human endothelial cells synthesize protein S' by D.S. Fair, R.A. Marlar and E.G. Levin.

Blood "Steady state levels of Factor X mRNA in liver and Hep G2 cells" by B.R. Bahnak, R. Howk, J.H. Morrissey, G.A. Ricca, T.S. Edgington, M.C. Jaye, W.W. Drohan and **D.S. Fair.**

Blood, "Synthesis and secretion of Factor VII, protein C, protein S and the protein C inhibitor from a human hepatoma cell line" by **D.S. Fair** and **R.A.** Marlar.

Chest, "In honor of Dr. Sarah Branham, A Star is Born: The realization of Branhamella catarrhalis as a lower respiratory tract pathogen" by R.J. Wallace Jr. and D.M. Musher.

Chest, "Serum beta-carotene levels and sputum atypia among asbestos workers at risk for lung cancer" by R.H. Yanagihara and J.W. McLarty.

Chest, "Angiotensin converting enzymes in bronchoalveolar lavage in human ARDS" by S. Idell, A.M. Fein, H. Rosen and F. Kueppers.

Circulation Research, "Substance P induces pulmonary venoconstriction in the isolated-perfused guinea pig lung" by W.M. Selig, K.E. Burhop, J.G.N. Garcia and A.B. Malik.

Environmental Research, "Comparative efficiency of nuclepore filters of various pore sizes as used in digestion studies of tissue" by M.F. O'Sullivan, C.J. Corn and R.F. Dodson.

Hospital Medicine, "Bacterial pneumonia in the adult; Diagnosis and therapy" by D.E. Griffith and R.J. Wallace Ir.

Journal of Applied Physiology, "Measurement of albumin permeability across endothelial monolayers in vitro" by J.A. Cooper, K.E. Burhop, W.M. Selig, J.G.N. Garcia, P. Del Vecchio and A.B. Malik.

Journal of Applied Physiology, "Platelet activating factor increases lung vascular permeability to protein" by K.E. Burhop, J.G.N. Garcia, W.M. Selig, H. Van der Zee, J.E. Kaplan and A.B. Malik.

Journal of Biological Chemistry, "Physicochemical properties of the N-formyl peptide receptor on human neutrophils" by R.A. Allen, A.J. Jesaitis, L.A. Sklar, C.G. Cochrane and R.G. Painter.

Journal of Cellular Physiology, "Thrombin-induced increases in albumin clearance across cultured endothelial monolayers" by J.G.N. Garcia, A.S. Birnboim, R. Bizio, P.J. Del Vecchio, J.W. Fenton and A.B. Malik.

Journal of Clinical Microbiology, "Susceptibility testing of slowly growing mycobacteria utilizing a microdilution MIC method with 7H9 broth" by R.J. Wallace Jr., D.R. Nash, L.C. Steele and V.A. Steingrube.

Journal of Clinical Microbiology, "Ability of ciprofloxacin but not pipemidic acid to differentiate all three biovariants of Mycobacterium fortuitum from Mycobacterium chelonae" by L.C. Steele and R.J. Wallace Jr.

Journal of Immunology, "Differences between the binding sites of the complement regulatory proteins DAF, CR1, and Factor H on C3 convertases" by M.K. Pangburn.

Journal of Rheumatology, "Pulmonary gold retention in rheumatoid arthritis: Relationship to interstitial lung disease" by J.G.N. Garcia, A. Munim, M. Bishop, P. Garcia, N. Parhami and B.A. Keogh.

Medical Physics Monograph #13: Multiple Regression Analysis Applications in the Health Sciences, "Regression methods in clinical radiobiology" by H.D. Thames, S.L. Tucker, S.L. Rasmussen and J.W. McLarty.

Nutritional and Toxicological Significance of Enzyme Inhibitors in Foods, "Protease inhibitors of the marama bean" by B. Starcher, L. Bryant and M. Elfant.

The Physiologist, "Effects of lung volume on the compartmental analysis of alveolar solute clearance in sheep" by B.T. Peterson, H.L. James and J.W. McLarty.

Physiology Review, "Signal transduction and cytoskeletal activation in the neutrophil" by G.M. Omann, R.A. Allen, G.M. Bokoch, R.G. Painter, A.E. Traynor and L.A. Sklar.

Proceedings of the National Academy of Sciences, USA, "Immunologic relationship between platelet membrane glycoprotein GPIIb/IIIa and cell surface molecules expressed by a variety of cells" by E.F. Plow, J.C. Loftus, E.G. Levin, D.S. Fair, D. Dixon, J. Forsyth and M.H. Ginsberg.

Proceedings of the 5th International Symposium on Calcium Binding Proteins in Health and Disease, "H-NMR studies of calmodulin peptide interactions" by R.E. Klevit and D.K. Blumenthal.

Seminars in Respiratory Medicine, "The pathogenesis of emphysema" by S. Idell and A.B. Cohen.

Seminars in Respiratory Medicine, "Drug therapy of chronic obstructive pulmonary disease" by S. Idell and R.S. Kronenberg.

Seminars in Thrombosis and Haemostasis, "Subcellular localization of platelet elastase and its retention during the release reaction" by H.L. James, P.L. James, R.G. Painter,

K. Zahler-Bentz and A.B. Cohen.

Thorax, "Elastin and the lung" by B.C. Starcher.

Thrombosis and Haemostasis, "Specificity of the thrombin induced release of tissue plasminogen activator from cultured human endothelial cells" by E.G. Levin, D.M. Stern, P.P. Nawroth, R.A. Marlar, D.S. Fair, J.W. Fenton II and L.A. Harker.

Abstract Publications

American College of Chest Physicians, "Activation of human umbilical vein endothelium following phagocytosis of asbestos and fiberglass particles" by J.G.N. Garcia, K. Callahan, L. Davis, A.R. Johnson, C. Corn and R.F. Dodson.

American College of Chest Physicians, "Kaolin catalyzes hydroxyl radical generation peroxide" by T. Kennedy, P. Melnicoff, R.F. Dodson, W. Rawlings, Jr. and J. Hoidal.

American Journal of Epidemiology, "Validation of selfreported tobacco use in former asbestos workers using plasma cotinine and thiocyanate: The Tyler Cancer Prevention Programs" by J.W. McLarty, S. Zinkgraf and K. Smith.

American Society for Microbiology, "Disk diffusion susceptibility of Branhamella catarrhalis and relationship of beta-lactam zone size to beta-lactamase production" by J.I. Luman, R.W. Wilson, R.J. Wallace Jr. and D.R. Nash.

American Society for Microbiology, "Susceptibility of Nocardia brasiliensis to Beta-Lactams including amoxicillin/clavulanic acid and its relationship to beta-lactamase activity" by R.J. Wallace Jr., W.K. Johnson, L.C. Steele, D.R. Nash and V.A. Steingrube.

American Review of Respiratory Disease, "Bronchoalveolar lavage desmosine in adult respiratory distress syndrome and bleomycin lung injury" by S. Idell, R. Thrall, R. Maunder, T.R. Martin, J. McLarty and B.C. Starcher.

American Review of Respiratory Disease, "Bronchoalveolar lavage procoagulant activity in bleomycin induced lung injury in marmosets" by S. Idell, K. Gonzalez, P.N. Walsh and R. Thrall.

American Review of Respiratory Disease, "Protease and procoagulant activity in rheumatoid interstitial lung disease (RILD)" by J.G.N. Garcia, S. Idell, J. Weiland, H. James, J. Gadek and B.A. Keogh.

American Review of Respiratory Disease, "Bronchoalveolar lavage procoagulant activity in human and primate lung injury: Characterization and relationship to interstitial lung disease" by S. Idell, R. Maunder, A.M. Fein, R. Thrall, P. N. Walsh and R.W. Colman.

American Thoracle Society, "Characterization of betalactamases from Mycobacterium fortuitum: substrate hydrolysis, enzyme inhibition and beta-lactam mediated induction" by D.R. Nash, R.J. Wallace Jr., V.A. Steingrube and L.C. Steele.

American Thoracic Society, "Phenotypic and plasmid analysis of epidemic and sporadic isolates of rapidly growing mycobacteria associated with cardiac bypass surgery" by R.J. Wallace Jr., S.I. Hull, J.M. Musser and V.A. Silcox.

Clinical Research, "Alpha-1-Antitrypsin levels in tightskin mice do not influence severity of emphysema" by F. Kueppers, S. Idell, R. Ochs and J.C. Williams.

International Academy of Pethology, "A comparison for light and electron microscopy techniques for defining occupational exposure to asbestos" by R. Dodson, G. Hurst, M. Williams, C. Corn and S. Greenberg.

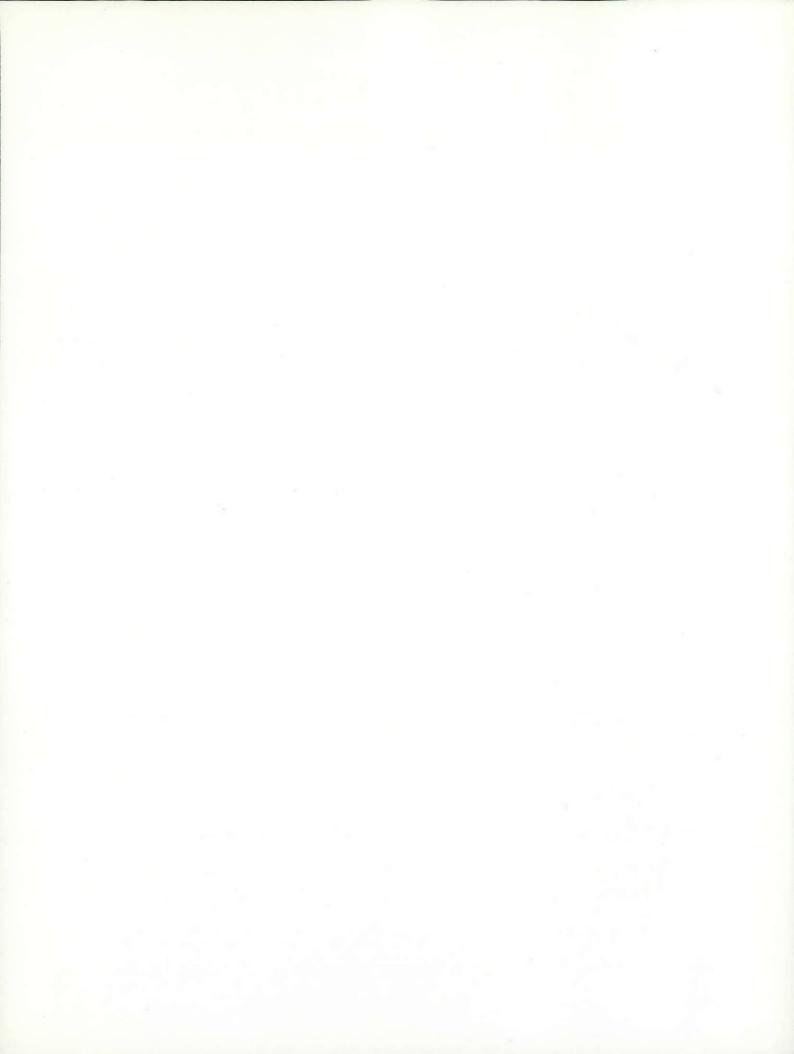
The Physiologist, "Effects of lung volume on the compartmental analysis of alveolar solute clearance in sheep" by B.T. Peterson, H.L. James and J.W. McLarty.

Book Chapters

Antimicrobial Agents Annual 2, "Treatment of infections due to Haemophilus influenzae" by D.M. Musher and R.J. Wallace Jr.

Molecular Aspects of Cellular Regulations 5, "Calmodulin-binding domains on target proteins" by D.K. Blumenthal and E.G. Krebs.

Monograph on Orthopedic Infections, "Chapters on bone and joint tuberculosis, environmental (nontuberculous) mycobacteria, and Mycobacterium leprae" by P.W. Wright and R.J. Wallace Jr.



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