At the end of December 2017, I traveled to Haiti for the first time, on a mission trip organized by the University at Buffalo School of Medicine and Biomedical Sciences and sponsored by Friends of Fontaine.

With little experience in global health, I did not know what to expect. I went into the country having seen only pictures of its poverty. This was, after all, the poorest country in the western hemisphere. I had felt mentally prepared. However, I was amazed by everything I experienced across the country – both the good and bad.

After landing in Port Au Prince, I first noticed the crooked Styrofoam hangings that spelled out “Noel” with a missing “e” at baggage claim. As we walked out of the airport, the exit was overflowing with taxi drivers soliciting every arriving passenger. Our suitcases, with “smuggled” medications, were loaded onto the top of a cargo van, and everyone in our group crammed together as we made our way toward a medical clinic in Fontaine, a five-hour ride north of the capital. I took in the scenery as the paved roads of National Route #3 turned into a dirt road. The raw beauty of nature was juxtaposed with the waste problems that plague the country; beautiful landscapes and galloping horses could be seen off in the distance, but plastic bottles and other refuse lined the highway for the entire 100-mile stretch of our journey to Fontaine.

Haiti was established as a country in 1804, barely 30 years after the United States gained its own independence. However, the stark contrast in living conditions is shocking. I could gaze at distant mountains shrouded in a morning mist and simultaneously catch an acidic waft of burning trash. This compelled me to ask why this difference exists. Haiti is bordered by one of

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InSight
Cleveland Clinic Lerner College of Medicine
March 2018

FIRST PERSON:
Six days in Haiti
By Daniel Li
the richest countries (at least relatively speaking) in the Caribbean. Millions of aid dollars pour in, but still no sustainable organization among communities exists to launch initiatives that could shape the lives of Haitians. So what can we do to bring about positive changes in the community?

In my time working at the medical clinic, I was moved after meeting the school children in Fontaine. Pierre-Louise, the founder of a local school, shared his selfless story: to return to his birthplace and establish a secondary school, which he named St. Gabriel. With a school in the community, a child who wanted an education no longer had to walk two hours each way in the blistering heat. Students could receive a few guaranteed meals a week, and, more importantly, they were being offered a future. From this, at least a part of “what we can do” was answered.

I met students such as Paulner, a gangly, tall young man whose hands were always tucked into his pockets, and Wendell, who always had a beanie on his head despite temperatures of 90-plus during midday. They are part of the first few graduating classes at St. Gabriel. They are the seeds planted by the town and will be off to medical school soon. After their studies, these students will return to the community and inspire new generations of students. They will help make the school a sustainable initiative for the community and will hopefully propel future growth.

During the days I spent seeing patients, I experienced many mixed emotions, from excitement to sadness. One example captured both my high and low moments. I saw a young mother with her four-year-old daughter. The mother was in her thirties and presented with a swollen belly. Quick percussion and palpation revealed significant fluid retention. She handed me a used package of pills, and I looked at the label: furosemide. This was my low. This patient had developed ascites about a year after having her last child. Now she was dependent on regular paracentesis at the hospital, and, if she is lucky, she receives a small amount of furosemide. Without her medication, she cannot urinate, and the fluid keeps building. We performed an ultrasound, confirmed the likely pregnancy-associated cardiomyopathy and gave her a three-month supply of first-line heart failure medications. We told her to come back in three days for medication titration. At the time, I felt deflated; our treatment seemed like a bandage over a gushing wound. But what next? How will she receive proper follow-up care and medication refills?

But then came my high. On the last day of clinic, all of us were working hard because it was the highest patient load day. Shortly, a familiar face caught my eye. My cardiomyopathy patient was back, and her abdomen looked flat! I walked over and palpated her abdomen. My eyes were not deceiving me; the difference was as clear as night and day. We learned that she discovered our clinic from a friend who had the same condition. I suppose our clinics weren’t just bandages after all.

Later, I learned about the multiple initiatives our trip leaders have introduced over the past years. Following the models developed by Partners in Health, co-founded by Paul Farmer, MD, they have endeavored to develop students to become the next community leaders, running mobile clinics and collaborating with neighboring hospitals.

Before this trip ended, I reflected on everything that I had seen. I took the time to read Mountains Beyond Mountains by Tracey Kidder, which documents Dr. Farmer’s humanitarian work, including his work in Haiti. How this experience changed my outlook was summarized by a single sentence in the book: “There is a point when you feel the world has just been revealed to you… and you think ‘oh no’ things will never be quite the same again.” For me, it was difficult to see these bright children that have to fight so hard for so little. For the first time in my life, I felt truly frustrated with how unfair life could be. As an immigrant myself and having lived in rural parts of China growing up, I never thought much of living a simple life. However, we still had clean water and easy access to education. I spent only a week in Haiti, but this experience was life-changing.

Now I’m no Paul Farmer by any means, but I hope that by sharing my experience, I can promote more interest, discussion and awareness of this global problem. We can help in many ways, and the best way first is to educate yourself.
CCLCM Boasts Three NIH Scholars

Joseph Featherall (‘19), Sahar Khan (‘19) and Dattanand Sudarshana (‘19) are participating in the National Institutes of Health Medical Research Scholars Program (MRSP), a year-long program designed to allow students to participate in the entire continuum of biomedical research.

With close advising and mentoring, the students conduct a basic, clinical or translational research project, either on the NIH campus in Bethesda, Md., or at NIH facilities.

THE CCLCM STUDENT PROJECTS ARE:

Joseph Featherall
Do Fibrin Microbeads Linked to Hyaluronic Acid Enhance Human Bone Marrow Derived Stem Cell Repair of a Murine Cartilage Defect? (Orthopedics)
Advisor: Leighton Chan, MD
Mentor: Pamela Robey, PhD

Sahar Khan
Trends in Premature Mortality in Youth in the U.S. (Population Health/Disparities)
Advisor: Peter Choyke, MD
Mentor: Meredith Shiels, PhD

Dattanand Sudarshana
Manganese-enhanced Magnetic Resonance Imaging in Healthy Volunteers and People with Multiple Sclerosis (Neurology)
Advisor: Andrew Demidowich, MD
Mentor: Daniel Reich, MD, PhD

While participating in the MRSP, students attend research-related lectures, receive human subject research training and attend clinical teaching rounds.

“CCLCM is the only school with three scholars at NIH. Seven schools have two, and the others only one,” says Kathleen Franco, MD, Associate Dean of Admissions & Student Affairs.


PATIENT SAFETY & QUALITY TIP:
How to advise patients on food avoidance

Optimal management of some conditions requires a patient to avoid certain foods or ingredients. Understand that telling a patient to avoid a food is life-changing and affects them at every meal, every day. Never tell a patient to “just avoid it” if there is not a good reason to do so and no specific follow up to see if the food avoidance was helpful.

For some people, such as kids with eczema, avoiding a food may actually increase their risk of developing a life-threatening food allergy. Before you tell a patient to avoid a certain food, make sure to consider the benefits versus the risks. Then provide resources on how to read labels, find reasonable replacements, if possible, and actually avoid the food.
1. **What inspires you to teach?**

I have had excellent teachers along my medical journey. They've helped inspire me to be involved in medical education.

Mark Twain once said, “Few things are harder to put up with than the annoyance of a good example!” I remember my first senior medicine resident (SMR) during my third-year medical student rotation. He was a true “southern gentleman,” from South Carolina, who modeled an excellent bedside manner and pushed me daily to expand my medical knowledge. He taught me to always anticipate the next steps in patient management.

My first SMR during my residency also left a lasting impression. Previously trained in India, he was always “calm under fire” and seemed to know everything. He effectively gave both positive recognition and corrective feedback in small bites throughout the rotation. He provided the supportive autonomy I needed early in my residency. I hope to pass on some of these medical pointers to the next generation of physicians.

2. **What’s one lesson you wish you would have learned in college/medical school?**

It is hard to list just one. Some thoughts:

- Do not be too hard on yourself. Things tend to work out in the end.
- Do not look past the lessons patients want to teach you, even when you are post-call and tired.
- Learn to say “yes,” and learn to say “no,” each at the right time.
- Try not to become too cynical.
- Try to avoid the phrase “It’s not fair.”
- Do not waste time complaining.
- Do not rely solely on others for your education.

3. **If I weren’t a physician at Cleveland Clinic and a faculty member at CCLCM, I would be …**

An architect with Vandelay Industries.

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**Communications Tip: Knock First**

**Brian Schroer, MD**  **Associate Director, Communication Skills**

Think of the clinical room as a space patients are renting for the time they are there, so be sure to knock on the door before entering. For one, the knock announces that the visit is starting. For two, you may avoid knocking over a child standing behind the door!
Mikey Jiang (21’) and Daniel Moussa (21’) recently organized the Ultrasound Interest Group’s first echocardiogram workshop, co-hosted with the Cardiology Interest Group. The event, originally scheduled for just one day, took place over two days in October and November 2017 to accommodate the large number of participants.

The goals of the workshop were to excite students about using ultrasound in clinical practice and encourage them to research its use more on their own.

Both workshops began with a brief seminar explaining the purpose of echo, the standard views and the basic physics of ultrasound. Cleveland Clinic sonographers and physicians adeptly instructed the students on how to operate a probe, identify the scanned anatomical structure and correlate the medical image to surface anatomy. The students then engaged in hands-on activities including using the probe and viewing the scanned medical images.

Daniel believes this workshop “really complemented” the curriculum. “Learning about the anatomy of the heart is one thing, but when you can visibly see the structure and the physiology, you truly appreciate what you’re learning,” he says. “The workshop really tied everything together.”

Mikey and Daniel co-led this year’s workshop with much help. To prepare, they met with William Stewart, MD, retired staff faculty; Courtney Smalley, MD, Emergency Medicine; Shetal Shah, MD, Radiology; and multiple sonographers. “They taught us in a fun and educational way. Getting students excited about ultrasound and how they can use it to augment their learning and clinical practice is key,” says Mikey.

The workshop was an overall success from the perspectives of both the students and the instructors. According to Mikey, Dr. Stewart joked that now more than half the class will go into echocardiology.

The Ultrasound Interest Group was founded in 2017 by both Mikey and Daniel and has been successful thus far. The goals of the group are to foster innovative research and promote the use of medical ultrasound in undergraduate education. The group also aims to enhance medical science instruction and help students develop sonography skills for clinical practice. “There are so many people who use ultrasound within their work,” says Mikey. “This crosses every single specialty, and almost every single department uses it.”

The group also hosted a Lunch and Learn in October 2017 as an introduction to ultrasound. Mikey and Daniel coordinated the event with the help of Dr. Smalley. This event also attracted a large number of attendees. Other successful events last year included the Abdominal Ultrasound Workshop in December.

Thank you to both Mikey and Daniel for co-leading an instructive workshop, as well as to Drs. Stewart, Smalley and Shah, and all the sonographers for instructing the group. The entire team is grateful for the Cleveland Clinic’s Tomsich Family Department of Cardiovascular Medicine for loaning the equipment for the echo workshops.
Jeff Clark, MD (‘15), continues his work on an affordable, engaging cognitive behavior therapy for insomnia (CBT-I) course, called Slumber Camp, and he reports that the latest feedback from clients has been excellent. He’s recently created free accounts that other clinicians can use to help their patients.

Dr. Clark, who’s currently a psychiatry resident at the University of Washington in Seattle, recalls that his first professional exposure to CBT came during a seminar conducted by Kathleen Franco, MD, while he was a second-year medical student. He credits Dr. Franco, who serves as Associate Dean of Admissions & Student Affairs, with helping him engage with such a powerful treatment modality and for having a huge impact on who he is as a psychiatrist.

Congratulations, Dr. Clark, on your continued success!

Nirica Borges, MD (‘10), reports that she has finished her residency in pediatrics at Children’s Hospital of Pittsburgh and her pediatric critical care medicine fellowship at Baylor College of Medicine/Texas Children’s Hospital in Houston. She currently is working as a clinical instructor in pediatric cardiac critical care medicine, a one-year program of focused training, which she says has been one of the most challenging years for her professionally.

She has been offered a position on the faculty at Texas Children’s as an assistant professor of pediatric critical care this fall.

“On a personal note, I got married in 2016,” says Dr. Borges. She and her husband, Jude, welcomed their baby girl, Maya Rose, on Dec 21, 2017.

Dr. Borges also reports that her brother is a cardiology fellow at Cleveland Clinic so we’re hopeful to see her and her family when they come to visit!

SAVE THE DATE: LEPOW RESEARCH DAY

Mark your calendar for the 2018 Irwin H. Lepow Medical Student Research Day on Sept. 20, 2018, at the Case Western Reserve University Tinkham Veale University Center.

Peter Heeger, MD, will speak on the “Role of Complement in Medicine.” Dr. Heeger is Professor of Medicine, Director of Transplant Research and a member of the Immunology Institute and the Recanati Miller Transplant Institute at the Icahn School of Medicine at Mount Sinai in New York City. A former Cleveland Clinic physician, Dr. Heeger was a popular faculty member when CCLCM was first established, and he co-founded the Hematology, Immunology and Microbiology Course for CCLCM.

For details about the event, contact Sharon Callahan at 216.368.6972 or email her at slc17@case.edu.
As a member of the professional staff, would you (or a colleague) like to learn more about Cleveland Clinic Lerner College of Medicine? Have you thought about teaching in the medical school? To learn more about teaching and advising opportunities, please join us at the next Orientation and Faculty Role Fair in April.

The orientation will give you an overview of the medical school structure, guiding principles and curriculum. You will have a chance to learn more about specific roles that faculty can play in the medical school during a “career fair” in the second half of the morning. You’ll also learn about the faculty appointment process.

Please remember to request meeting time and block your clinical schedule at least 30 days in advance in order to attend this event.

To register:
1. **Log into COMET**
   a. Note: you will not see the Essentials Program if you access COMET off-site or use a personal device. Essentials sessions are only visible on COMET via the intranet.

2. Choose the “Catalog” tab, and then “Search by Category” tab. Choose “Global Leadership and Learning Institute” from the menu.

3. Scroll down to “Essentials program for Health Professions Educators” and click CCLCM New Faculty Orientation.
   a. Note: these sessions are listed in alphabetical order.

If you cannot attend the entire event, please join us for the orientation (7:30-9:45 a.m.). The role fair will follow.

Please contact [Allison Prelsky, MEd](mailto:Allison.Prelskey@ccf.org), for more information.

*If you have a colleague who might be interested in a teaching role at our college, please tell them about this opportunity.*
CCLCM Celebrates Alumni and 10th Graduating Class

In celebration of CCLCM’s 10th graduating class, we are inviting alumni to participate in this year’s Annual Research Day on March 23. Students will make oral presentations and present their posters, and alumni Aaron Viny, MD, MS (‘09), will be the keynote speaker.

The following seniors will make oral presentations:

- Frank Cikach
- Megan Morisada
- Stephen Raithel
- Jessica Ray
- Hannah Robinson
- Erin Sieke

We are so looking forward to seeing all of you!

Save the Date!
Lerner College of Medicine Graduation

Please join us on Saturday, May 19, at 6 p.m. at the InterContinental Hotel to celebrate the achievements of the Lerner College of Medicine’s 10th graduating class, the class of 2018.

Enjoy heavy hors d’oeuvres at the reception following the ceremony.

If you’ve not attended the graduation celebration before, please make plans to attend this uplifting event and show your support for our graduates.
**Students and Faculty:**

Be sure to email Laura Greenwald with news about your achievements so that we can share your terrific news with our entire education community!

**Alumni: Share Your News**

We’d like to hear about what you’ve been doing since graduation. If you have news to share (maybe you’re involved in an interesting research project or you recently returned from a global health mission), please email Laura Greenwald at **greenwl@ccf.org**.

**Philanthropic Giving**

The Education Institute welcomes donations to advance its mission of educating those who serve. Individuals, families, foundations and corporations that believe in the value of education are making a difference in the future of patient care with their generosity. To learn how you can help, please contact Amy Kubacki, Senior Director of Development, at 216.636.5024 or at **kubacka@ccf.org**.

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**Reminder: Deadline for Stethos submission is March 5**

If you have a work of short fiction, reflective writing, poetry, personal narrative, essay, artwork or photography that you’d like to see in print, consider submitting it to the eighth issue of *Stethos*, the Lerner College of Medicine medical humanities journal. Submissions may focus on any topic that calls to you.

View the **current and previous issues of Stethos** as well as **submission guidelines**.

**Hurry! Deadline for submissions is March 5, 2018.**

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**MARK YOUR CALENDAR**

- **March 5, 2018**  
  Deadline for submissions to *Stethos*

- **March 12-23, 2018**  
  CCLCM Capstone, Cleveland Clinic

- **March 16, 2018**  
  Match Day – Dean’s Comments: 11:30 a.m.  
  Opening of the Envelopes: Noon  |  Reception following  
  CWRU, Tinkham Veale University Center

- **March 20, 2018**  
  7:30 a.m. – 5 p.m.  |  CWRU Annual Education Retreat: “Training Today for the Healthcare Challenges of the Future”  |  CWRU, Tinkham Veale University Center

- **March 23, 2018**  
  Eighth Annual CCLCM-wide Student Research Day  |  Cleveland Clinic

- **March 26-29, 2018**  
  Spring OSCEs for Year Two, Cleveland Clinic

- **March 29 and 30, 2018**  
  Applicant Second Look, Cleveland Clinic