Dear Friends and Colleagues,

We are on the threshold of a transformative new era in medical practice called personalized medicine. The National Cancer Institute defines personalized medicine as the use of information about a person’s genes, proteins, and environment to prevent, diagnose, and treat disease.

Genes and proteins are at work in every cell of our body, building what makes each of us a unique physical being. They predispose each of us differently to the potential for certain diseases.

Tremendous advances in the study of genes and proteins are ushering in a time when medical care will treat each person individually based on their unique genetic composition, rather than the current practice of using standardized treatments for broad groups of people. Personalized medicine holds the promise that diseases can be treated more effectively or prevented and people can live healthier lives.

At the Medical College, faculty members from diverse disciplines have been working at the forefront of research that is revealing the complex relationships between our genes, proteins and disease. Their efforts have garnered national attention and funding that is positioning the Medical College as a leader in personalized medicine.
Substantial National Institutes of Health (NIH) grants were awarded in 2009-10 to College faculty members to further research in genetics and proteomics (the study of proteins) and technology development.

A $9.6 million NIH award is supporting the Medical College’s Rat Genome Database, a resource used by genetics researchers worldwide. National recognition came from *The Scientist* magazine, which rated the College’s pioneering of a new, efficient technique for creating genetically modified rats – those with the genetic traits necessary for study – as the ninth most significant scientific advancement of 2009.

An $8 million NIH grant designated the Medical College as the Wisconsin Center for Excellence in Genomics Science in a collaborative effort with University of Wisconsin-Madison and Marquette University to develop tools and technologies that enhance our understanding of the human genome.

A $6.6 million NIH award is funding the study and identification of genes related to high blood pressure and kidney disease.

A new $20 million NIH award is also transforming the research landscape at the Medical College and in southeastern Wisconsin. As the recipient of the Clinical and Translational Science Award, the Medical College is representing a consortium of Milwaukee institutions working in collaboration to advance biomedical research, clinical care and education. (See article on page 16).

We are continuing to expand our campus to meet the growing needs of our faculty, staff and students. Next year, the College will begin construction on a 100,000-square-foot education building to accommodate our new medical school curriculum, including space for clinical simulations, team-based learning and technology integration.

As a private, freestanding medical school, the Medical College depends on the generosity of our donors to reach new levels of excellence. Contributing to our success this year were Jon and Ann Hammes, whose gift is supporting the purchase of state-of-the-art genetic sequencing equipment of critical importance for advancing our personalized medicine program.

John and Linda Mellowes provided a lead gift for the College’s new Women’s Health Research Program, and Julia and David Uihlein established the Julia and David Uihlein Chair in Medical Humanities.

The Daniel and Laura Gruber Charitable Lead Trust #3 boosted the study of esophageal cancer with the establishment of the James J. Gralton Laboratory and the James J. Gralton Endowed Research Fund. The Bryon Riesch Paralysis Foundation established The Bryon Riesch Paralysis Foundation Laboratories through an endowed fund dedicated to spinal cord injury research.

We are continually grateful for our partnership with the MACC Fund (Midwest Athletes Against Childhood Cancer, Inc.), our largest donor. Since 1976, the MACC Fund has donated more than $33 million to support pediatric cancer and related blood disorders research at the Medical College.

With the support of the thousands of donors recognized in this Honor Roll, we are working diligently for the health of our communities. Together with our affiliate hospitals and other community partners, the Medical College is securing a strong future for the people of Wisconsin and beyond.
THE PROMISE OF PERSONALIZED MEDICINE

Each of us has a unique genetic blueprint. In every cell of the body, our genes provide instructions to make proteins for building cells, tissues, and organs and repairing damage. From tremendous advances in studies of genes and proteins, the capability now exists in the research lab to examine an individual’s entire genetic composition, detect abnormalities, and assist with diagnosis and treatment.

The time is approaching for our children and grandchildren when physicians will be able to tailor medical care to an individual’s specific genetic code. This is personalized medicine. It promises to treat diseases more effectively or prevent them altogether.

Personalized medicine represents a fundamental shift in medicine. Current practice uses standardized treatments based on studies of large population groups. This approach falls short because our genetic coding makes each of us one-of-a-kind. With the tools of personalized medicine, physicians will be able to identify a person’s predisposition to developing a particular disease, recommend diet and lifestyle measures to help prevent the disease or delay its onset, and determine the most prudent treatment for a disease - including the most effective drug choice and dose for an individual patient.

Medical College scientists and physicians are nationally recognized as leaders in research of genes and proteins. In 2010, College faculty became the first in the nation to examine a patient’s entire genetic code in a new way and develop a personalized treatment with promising results. In this Annual Report, read about this and other early applications of personalized medicine, and our continuing research that make further advances possible.
Told he had inoperable pancreatic cancer, Brian Hermes left a fulfilling career as a high school history teacher and tried to cope with the hopelessness of his diagnosis. Desire for a second opinion, however, led him across the country to The Medical College of Wisconsin where physicians, including Douglas Evans, MD, tailored a treatment plan to the specific biological characteristics of his cancer, a pioneering approach that has given Brian back his life and his future.

Dr. Evans is investigating the application of personalized medicine in cancer care. He and collaborators at the Medical College are nearing completion of a clinical trial for the creation of genetic profiles of patients’ pancreatic tumors. By using genetics to identify areas of greatest vulnerability in a patient’s individual tumor, physicians will be able to select chemotherapy drugs most likely to exploit those weaknesses and destroy the cancer, meaning successes like Brian’s case will occur more often.
Originally diagnosed with a pancreatic endocrine tumor, Brian underwent surgery near his Connecticut home. But upon discovering the tumor was near an important blood vessel and had spread to his liver, the surgeon deemed the cancer inoperable. For nearly four months, Brian accepted this prognosis before deciding to research treatment options for his type of cancer. After a long, discouraging search, he found Dr. Evans, a Medical College surgeon with a reputation for successfully performing the procedure he needed and who saw hope in Brian’s case.

Within a week, Brian met with Dr. Evans who developed a custom “surgery last” treatment plan that included four months of chemotherapy followed by surgery. Dr. Evans’ choice of chemotherapy drug was targeted for maximum effectiveness against Brian’s specific cancer. So Brian could be closer to home, the prescribed treatment was administered at Memorial-Sloan Kettering Cancer Center in New York.

Although pancreatic cancer is often resistant to chemotherapy, Brian’s tumors were significantly reduced following his treatment. With chemotherapy successful, Dr. Evans and T. Clark Gamblin, M.D., M.S., a Medical College liver cancer specialist, surgically removed the remaining cancerous tissue and rebuilt the affected vein. Brian and his wife now live in Michigan near their daughter and her family and look forward to watching their grandchildren grow in the years ahead.

Addison Strobel was born healthy, but her health was no accident. She is one of the first children in the country to be born free of autosomal recessive polycystic kidney disease as a result of an advanced genetic screening method.

The new genetic screening technique was developed by physicians and scientists of The Medical College of Wisconsin, based at Children’s Hospital of Wisconsin and Froedtert Hospital.

Addison’s parents are Jana and Tim Strobel of Watertown. When their first child, Evan, was born in 2008, he had inherited autosomal recessive polycystic kidney disease. Growing in his kidneys were fluid-filled cysts that kept the organs from functioning properly. He died shortly after birth. Medical College pediatric specialists Ellis Avner, M.D., and David Bick, M.D., confirmed Evan’s diagnosis and also confirmed that both Jana and Tim carry the gene for autosomal recessive polycystic kidney disease, making it a one in four chance that any of their children would be born with the disease.

The Strobels’ Medical College obstetrician-gynecologist, Estil Strawn, Jr., M.D., suggested that they were good candidates for preimplantation genetic diagnosis at the Froedtert & Medical College Reproductive Medicine Center. The procedure uses in-vitro fertilization and.

Dr. Evans is Chairman and the Donald C. Ausman Family Foundation Professor in Surgery; Dr. Gamblin holds the Stuart D. Wilson Chair in Surgery and is Associate Professor of Surgery and Chief of the Division of Surgical Oncology.

Eduardo Lau, PhD (right) worked with Medical College physicians to develop an advanced genetic screening method. Marleen Janson (left) is part of the research team.
genetic screening of the resulting embryos in order to implant only the healthy embryos back into the mother.

Dr. Strawn, Dr. Avner, Dr. Bick and Medical College pediatric genetics researcher Eduardo Lau, PhD, collaborated to adopt a new genetic screening method that is more precise than conventional preimplantation genetic screening methods for this disorder. Their method, called whole genome amplification, allowed the Strobels to achieve their dreams. Addison was born full of life on Oct. 12, 2009, at the Froedtert & Medical College Birth Center, located within Children’s Hospital.

Estil Strawn, MD, (left), and David Bick, MD, (standing), aided Jana and Tim Strobel (center and right) with the birth of a healthy child. They marked the first birthday of Addison Strobel at Children’s Hospital of Wisconsin’s Noel Family Garden.

Dr. Strawn is Professor of Obstetrics and Gynecology and Director of the Division of Reproductive Endocrinology and Infertility. Dr. Avner is Professor of Pediatrics in Nephrology and Associate Dean for the Children’s Research Institute. Dr. Bick is Professor and Interim Chief of Pediatric Genetics. Dr. Lau is Assistant Professor of Pediatrics in Genetics.
THE SCIENCE BEHIND THE CARE

Teams of Medical College scientists are leading research to discover the complex relationships among genes, proteins and disease. Increasingly, scientists and physicians are working hand in hand on intractable patient cases.

A young boy’s lifelong health battle with a mysterious digestive disease was becoming increasingly dire when his physicians at Children’s Hospital of Wisconsin turned to researchers in the Medical College’s Human and Molecular Genetics Center for a final attempt at a diagnosis.

At age 3, the boy had endured more than 100 separate surgeries, yet his illness was progressing, causing his intestines to swell and abscesses to develop. His life and quality of life were threatened until the collaborative team of 30 physicians and scientists decided to apply genetic sequencing in a way that had never before been done.

A person’s DNA contains all the instructions (genes) for how they are made and how their body functions. DNA is a long molecule made of simple units aligned in a particular order. In the same way that the meaning of a book is dependent on the order of the letters in words, for your body to work correctly, all of these units must be in the correct order. Genetic sequencing identifies the order of those units composing an individual’s genetic code.

Medical College researchers examined all 20,000 of the boy’s genes looking to explain his rare health problem. Although they found thousands of changes when compared to the standard genetic code, some were already known to be responsible for other things, so they were disregarded. Other genetic variations were not likely to be associated with his disease, so they were eliminated.

After three months spent poring over the data, the researchers identified a unique mutation in one gene, which they subsequently confirmed to be responsible for the previously undocumented form of inflammatory bowel disease, which they named XIAP-deficiency.

Collaborative team uses to discover and diagnose

Dr. Jacob is the Warren P. Knowles Professor in Human and Molecular Genetics, Professor of Physiology and Pediatrics, and Director of the Human and Molecular Genetics Center; Dr. Worthey is Assistant Professor of Pediatric Genomics in the Human and Molecular Genetics Center; Dr. Dimmock is Assistant Professor of Pediatric Genetics; Dr. Bick is Professor and Medical Director of Pediatric Genetics; Dr. Mayer is Assistant Professor of Pediatric Gastroenterology; Dr. Margolis is Professor and Interim Co-chief of Pediatric Hematology, Oncology and Bone Marrow Transplantation; Dr. Arca is Associate Professor of Pediatric Surgery.
Based on the diagnosis, the child’s physicians recommended a bone-marrow transplant in June to treat the disease. By mid-November, the boy was home and able to eat regular food.

With this case, College researchers including Howard Jacob, PhD, and Elizabeth Worthy, PhD, and physicians including David Dimmock, MD, David Bick, MD, Alan Mayer, MD, PhD, David Margolis, MD, and Marjorie Arca, MD, demonstrated medicine at its most personalized.
Stress has long been suspected to raise blood pressure, but new research has for the first time established a link between genes and the body's blood pressure response to stress. Medical College researcher Ulrich Broeckel, MD, and an international team of collaborators have identified a novel gene that appears to protect against stress-related high blood pressure. Their discovery could someday be used to customize treatment of high blood pressure based on a person's genetic make-up.

The research team showed that mice lacking the phosducin gene developed high blood pressure during stress-inducing activities. The findings were then translated to humans when the DNA from two populations groups involved in ongoing blood pressure studies was tested. The hundreds of study volunteers in the U.S. and Canada then performed stress-related activities, which confirmed the gene's role in suppressing high blood pressure.

Further analysis showed that certain variants of the gene can serve as markers to identify patients who will respond to stressful situations with an increase in blood pressure.

The studies were directed by scientists at the University of Freiburg and Muenster in Germany and in The Medical College of Wisconsin’s Individualized Medicine Institute in collaboration with other institutions in Europe and Canada.

Ulrich Broeckel, MD, (right) conducts his research in the Individualized Medicine Institute, part of the College’s Human and Molecular Genetics Center. His research team includes Amy Turner (left) and Rachel Lorier.

Dr. Broeckel is Professor of Pediatrics and Director of the Individualized Medicine Institute.
Biomedical research leads to personalized care in local case of rare disease

When a patient at Children’s Hospital of Wisconsin was diagnosed with Proteus syndrome, the patient’s doctors turned to researchers to help understand the molecular cause of this extremely rare disease. Medical College pediatric specialists and scientists from the College’s Biotechnology and Bioengineering Center have been collaborating to examine the child’s unique genetic makeup for answers and to look for abnormalities in the cells affected by this debilitating disorder.
Only about 120 cases of Proteus syndrome are currently documented worldwide. With so few confirmed cases on which to base standards of care, Proteus syndrome suits a personalized medicine approach. The Elephant Man, a disfigured 19th century Londoner made famous by a biographical play and movie, was later determined to have had this disease.

Proteus syndrome is not evident at birth, but overgrowth of parts of the body appears as a child ages. Gradually, bones, skin and blood vessels become asymmetrically overgrown, and excess tissue often covers more than half of the body. Those affected die prematurely from blood clots and other medical complications. The Elephant Man died at age 27 of asphyxiation.

Michael Olivier, PhD; David Bick, MD; Kelly Duffy, PhD; and Shama Mirza, PhD, are analyzing the DNA and proteins in affected cells of the Children’s Hospital patient to identify differences that may be associated with the disease. Thus far, their research has identified potential contributing factors to the cause and advancement of the patient’s disease. Once confirmed, they will search for ways to alter the actions of the genes and proteins to prevent disease progression in this patient and provide potential treatment approaches for future cases.

Technology development efforts in the Biotechnology and Bioengineering Center, the new Innovation Center and the Wisconsin Center of Excellence in Genomics Science are contributing to this research. The Innovation Center was made possible through a transformative gift from Dr. Robert D. and Dr. Patricia E. Kern.

Researchers at The Medical College of Wisconsin are national leaders on the genetic basis of obesity. They made a landmark discovery that uncovered a genetic link to obesity, and have since found nine genes linked to obesity and its complications.

Among these genes are those involved with the body’s ability to burn fat and how the body responds to the hormone insulin that controls blood sugar levels. One gene is involved with scavenging oxygen radicals that are harmful to overall health as well as modulating the body’s response to inflammation and its fight against invading microbes and other harmful substances.

The research team, based at the College’s TOPS Obesity and Metabolic Research Center, is led by Ahmed Kissebah, MD, PhD. They are committed to finding medical therapies that will prevent or reverse the development of obesity.

The TOPS (Take Off Pounds Sensibly) Club Inc. is a worldwide weight-loss organization established and headquartered in Milwaukee and continues to be a vital partner in this research. Dr. Kissebah is collaborating with scientists in the College’s Human and Molecular Genetics Center to study the genetic basis of several medical problems common among obese individuals. These issues are studied in a cohort of 500 Midwestern families who are volunteers from the TOPS Club.

Facilitating this research is the College’s Mobile Outreach Translational Research Unit, a resource of the Clinical and Translational Science Institute of Southeast Wisconsin. The mobile unit is a staffed and medically equipped van that travels to volunteers in their communities to collect blood samples and collect other health data.

Dr. Olivier is Professor of Physiology and Co-director of the Wisconsin Center of Excellence in Genomics Science; Dr. Bick is Professor and Medical Director of Pediatric Genetics; Dr. Duffy is Assistant Professor of Dermatology; Dr. Mirza is Assistant Professor of Biochemistry.
The information gathered from the TOPS families has contributed to global research and resulted in collaborations between Dr. Kissebah and his team with scientists from Egypt, Australia, France and San Antonio, Texas.

At the Medical College, Dr. Kissebah is also collaborating with Michael Olivier, PhD, to study the genetic influences on blood levels of bad fats that are common precursors to coronary heart disease; with Omar Ali, MD, and Yi (Sherry) Zhang, PhD, to study the influence of environmental factors that can affect the actions of genes; and with Janet Rader, MD, to study the genetics of polycystic ovaries, a common cause of infertility in obese women. These collaborations are focused on understanding the complexities of obesity in order to develop individualized medical cures.

Dr. Kissebah is Professor of Medicine in Endocrinology and Director of the TOPS Obesity and Metabolic Research Center. Dr. Rader is the Jack A. and Elaine D. Klieger Professor and Chairman of Obstetrics and Gynecology. Dr. Olivier is Professor of Physiology and Director of the Wisconsin Center of Excellence in Genomics Science. Dr. Ali is Assistant Professor of Pediatrics in Endocrinology. Dr. Zhang is a Research Scientist in Medicine – Endocrinology.
Coursework in genetics spans the entire four years of medical school, preparing students for the era in which physicians can use information on an individual’s genes and proteins to assist diagnosis, preventive measures, and treatments.
In their first year of medical school, Brittane Parker and Jay Nichols took the Medical Genetics course, which is designed to build a bridge between the science of genetics and the clinical practice of medicine.

The course provides medical students with a basic science foundation in genetics, including molecular biology, cell biology, and early human development. The Clinical Correlations section of the course emphasizes genetics in the patient care setting.

Students learn the basic technological foundations that underlie personalized medicine, such as genetic diagnostic techniques and their interpretation, and how a patient’s genetic code can be used to develop an effective approach to health maintenance, disease prevention, diagnosis and treatment. The course discusses the genetic basis of variation in patients’ responses to pharmaceuticals.

Legal and ethical issues are covered, as well as the importance of confidentiality and the values and culture of each patient and their family.

For Brittane, the actual patient case studies were the most valuable component of the course. “The case studies allowed me to integrate my knowledge of genetics with common diseases and treatments for them,” she said.

The course provided Jay with “a greater fascination for how microscopic changes at the level of DNA can lead to enormous macroscopic changes at the level of organs and tissues,” he said. Most helpful to him was learning about “the growing importance that genetic testing plays in all medical specialties.”

The course, co-directed by Ravi Misra, PhD, and David Bolender, PhD, emphasizes the application of genetic knowledge and tools to prepare students for an era when physicians can treat patients based on an individual’s genetic code.

Dr. Misra is Professor of Biochemistry and Dean of the Medical College’s Graduate School of Biomedical Sciences. Dr. Bolender is Associate Professor of Cell Biology, Neurobiology, and Anatomy.

Ravi Misra, PhD, (left) and David Bolender, PhD, (back) co-directed a course in medical genetics offered to medical students at the College, including Brittane Parker and Jay Nichols.
PhD candidate Sarah Parker views genes and proteins in architectural terms: genes are blueprints and proteins are building materials. Proteins are arranged to form cells, tissues and ultimately organs, according to a genetic blueprint.

Sarah is using the knowledge and tools of genetics and proteomics - the study of proteins - in research that may lead to promising new, individualized therapies for patients with heart disease.
Under the direction of her faculty advisor, Andrew Greene, PhD, Sarah is conducting studies in rats to determine whether stem cells from an individual’s own bone marrow can reverse damage to the heart caused by high blood pressure that had previously been considered irreversible.

Her research is also addressing why bone marrow stem cells don’t function normally in patients with high blood pressure. The goal is to understand what goes wrong in these cells, so that ultimately the cells may be removed, repaired, and reintroduced into patients to restore the cells’ beneficial effects.

Her research, conducted in the College’s Biotechnology and Bioengineering Center, is looking for differences in proteins between the bone marrow stem cells in healthy rats versus rats that develop high blood pressure and then identifying where defects in the protein building blocks have occurred.

“We can then determine if these protein defects are causing a particular functional impairment in the diseased cells,” Sarah said, “and then search for a therapeutic strategy to fix the protein defect and improve the function of the cells.”

“Using a patient’s own cells to treat their disease rather than cells from a tissue bank, or a drug, is quite individualized,” she said. Sarah’s long-term goal is to generate new knowledge, particularly relevant to heart disease, that will benefit patients.

Dr. Greene is Professor of Physiology and Director of the Medical College’s Biotechnology and Bioengineering Center and its Innovation Center for Proteomics Research Development.
A new era of collaboration began in Milwaukee this summer as the National Institutes of Health awarded a $20 million grant to The Medical College of Wisconsin, representing a consortium of eight Milwaukee institutions dedicated to transforming the biomedical research enterprise in southeast Wisconsin to advance patient care and education.

The five-year Clinical and Translational Science Award is being used to create a borderless, synergistic biomedical research enterprise that will accelerate the translation of research discoveries into new and improved medical treatments. The Medical College coordinates the grant, which is administered through a new academic entity recognized by all partner institutions – the Clinical and Translational Science Institute of Southeast Wisconsin.

The eight member organizations are the Medical College, Marquette University, the Milwaukee School of Engineering (MSOE), the University of Wisconsin-Milwaukee (UWM), the BloodCenter of Wisconsin, Children’s Hospital and Health System, Froedtert Hospital and the Clement J. Zablocki VA Medical Center. The award gives consortium members the opportunity to share each other’s research resources, technology, knowledge and expertise to work toward common goals in health care. Collaborators may seek adjunct faculty appointments at partnering colleges or universities.

The Institute’s research portfolio currently includes more than 140 projects, and 17 collaborative research studies are already underway, funded through the Medical College’s Advancing a Healthier Wisconsin program.

The grant also is enabling the expansion of academic and training programs. The Medical College has launched a PhD program in basic and translational research, and its new master’s degree program in clinical and translational science now includes coursework at Marquette, MSOE and UWM. Marquette is also developing a PhD program for clinical and translational rehabilitative health sciences. Outreach programs are being created to promote science among undergraduates, and professional development programs will help advance the research careers of young faculty members.

The Medical College received a perfect score on its award application and was one of only nine grant recipients this year. Fewer than half of all medical schools in the nation have received a Clinical and Translational Science Award since the program’s inception in 2003. Principal investigator for the College’s grant is Reza Shaker, M.D., who also directs the Clinical and Translational Science Institute.

Leadership in the Clinical and Translational Science Institute of Southeast Wisconsin represent a diverse group of collaborators bridging eight Milwaukee institutions.

The Medical College received a perfect score on its award application and was one of only nine grant recipients this year. Fewer than half of all medical schools in the nation have received a Clinical and Translational Science Award since the program’s inception in 2003. Principal investigator for the College’s grant is Reza Shaker, M.D., who also directs the Clinical and Translational Science Institute.

Dr. Shaker is Senior Associate Dean for Clinical and Translational Research and the Joseph E. Geenen Professor and Chief of Gastroenterology at the Medical College.
A new collaboration is strengthening a Medical College of Wisconsin research program that helps patients regain motor control after stroke or other neurological event. Michelle Johnson, PhD, directs the Rehabilitation Robotics Research & Design Laboratory, located at the Zablocki VA Medical Center. There she designs and develops specialized, affordable and intelligent robotic assistants used to provide physical therapy for patients with diminished arm function.

Dr. Johnson’s work is focused on assisting stroke survivors relearn complex movements that allow them to perform activities of daily living, such as using utensils to eat a meal. ADLER, the Activities of Daily Living Exercise Robot she designed, helps patients practice these movements while also providing research data for studying the recovery process for upper limbs impaired after stroke so that better interventions for stroke rehabilitation can be developed.

As an active member of the Clinical and Translational Science Institute of Southeast Wisconsin, Dr. Johnson met Sheku Kamara who manages the Rapid Prototyping Center at Milwaukee School of Engineering and is also a member of the Institute. Backed by the resources of the Institute and the national Clinical and Translational Science Award now supporting it, Dr. Johnson and Kamara have forged a partnership that unites her robotic research and designs and his engineering and fabrication expertise.

The relationship offers new opportunities for innovation, quality and creativity in robotic systems that enhance the patient rehabilitation process and improve patient outcomes. They are currently developing a new version of the ADLER system that could be applied to children with brain or nerve injury.

Dr. Johnson is Associate Professor of Physical Medicine and Rehabilitation at the Medical College and Research Assistant Professor of Biomedical Engineering at Marquette University; Mr. Kamara is Manager of Operations for the Rapid Prototyping Center at Milwaukee School of Engineering.

Rehabilitation Robotics Research & Design Laboratory coordinator Ping Bai demonstrates how the Activities of Daily Living Exercise Robot can be used by stroke survivors to re-learn actions such as drinking from a cup. Michelle Johnson, PhD, (center) is collaborating on new robotics projects with Sheku Kamara from Milwaukee School of Engineering, whom she met through the Clinical and Translational Science Institute of Southeast Wisconsin.
Youth violence is a significant public health problem in Milwaukee and throughout Wisconsin. Of 71 Milwaukee homicides in 2009, 11 percent involved victims under 18 and 12 percent involved suspects under 18. Some Milwaukee neighborhoods experience homicide rates nearly 10 times higher than the citywide average. Nationally, homicide is the second leading cause of death among youth ages 10-24.

To address this public health issue, the Medical College of Wisconsin has committed $8.2 million over five years to support the Violence Prevention Initiative. The program is funded by the Healthier Wisconsin Partnership Program, a component of the Medical College’s Advancing a Healthier Wisconsin endowment.

Three major priorities are being addressed during the next five years: implementing violence prevention programs for children ages 0-11 years; developing leadership capacity to prevent violence among youth 12-17 years; and strengthening community capacity to prevent violence in schools and neighborhoods.

The initiative empowers community leaders and agencies to play an active role in planning and implementing violence prevention strategies.

High-risk areas of Milwaukee are being identified by community and academic partners, for which action plans will be customized to fit each area’s unique strengths and challenges. The United Neighborhood Centers of Milwaukee and the Youth and Family Center Collaborative organizations were the first to be selected.

The Violence Prevention Initiative was developed through an 18-month planning process launched by the Medical College’s Consortium on Public and Community Health. The Consortium engaged more than 300 community and youth stakeholders to share their vision of a violence-free Milwaukee. A 21-member steering committee was formed, representing communities, youth, educators, Medical College academic partners and Medical College Consortium members. They reviewed national and local data on risk factors for violence, and examined best practices for preventing and reducing violence in Milwaukee’s communities.

From this process, the Committee developed the resulting plan, and the beginning of a sustained effort to build a healthier community.

Syed M. Ahmed, MD, DrPH, is Associate Dean for Public and Community Health, Director of the Healthier Wisconsin Partnership Program, Professor of Family and Community Medicine and Director of the Center for Healthy Communities.
LEARNING TO STAY ALIVE

More than 2,300 sixth graders have gone through Project Staying Alive classes taught by firefighters, Project Ujima staff, and teachers in the Milwaukee Public Schools (MPS). And that number is growing.

The program, a project of the College’s Healthier Wisconsin Partnership Program and the Safe Schools / Healthy Students Initiative at MPS, aims to improve the lives of Milwaukee youth who are at risk for violent, intentional injuries, as well as related psychosomatic problems such as headaches, abdominal pain, post-traumatic stress and school avoidance caused by fighting.

Students are learning about the roots of violence, how to resolve conflicts, and are improving interpersonal communication skills.

In the first two years of the program, 34 firefighters and 133 teachers have been trained to present the Project Staying Alive curriculum, which was developed with the assistance of Medical College faculty Marlene Melzer-Lange, MD, a violence prevention specialist, Dawn Zahrt, PhD, a psychologist, and other MPS staff. The program’s success will be measured through before and after comparisons of the students’ responses to questions posed electronically during the Project Staying Alive sessions, as well as teachers’ evaluations of the program.

“Project Staying Alive is a great opportunity for students to be exposed to professionals who can teach them how to make positive choices, and it enables the students to avoid violent behavior,” said Christine Qualls, a sixth grade teacher at Hopkins Street School.

The Project Staying Alive class is a collaboration of the MPS Safe Schools / Healthy Students Initiative, the Milwaukee Fire Department, the Children’s Service Society’s Project Ujima, and the Medical College.

Dr. Melzer-Lange is Professor of Pediatrics in Emergency Medicine. Dr. Zahrt is Assistant Professor of Pediatrics in Child Development.

Students at Morse Middle School in Milwaukee participate in Project Staying Alive. Clockwise from lower left (at table): Alan Luna, Darryl Hall of Project Ujima, Julie Yang, DeWayne Smooots and David Anderson of the Milwaukee Fire Department, Darius McKay Jones and Rayshan McGhee. In back (left to right): Brooke Mortag of Project Ujima; Lite Knuettel, teacher at Morse Middle School; and Marlene Melzer-Lange, MD.
Advancing a Healthier Wisconsin

Established in 2004, Advancing a Healthier Wisconsin is an endowment of The Medical College of Wisconsin dedicated to improving the health of Wisconsin residents through three complementary components:

- The Healthier Wisconsin Partnership Program supports community-academic partnerships that address public and community health improvement.
- Research for a Healthier Tomorrow supports basic and clinical research that addresses the leading causes of death and disability in Wisconsin.
- Educational Leadership for the Health of the Public supports programs that enhance the education of public health professionals, health care providers, patients, and medical and graduate students.

Advancing a Healthier Wisconsin has awarded funding to 250 projects to date focusing on health promotion and disease prevention in Wisconsin communities.

HIGHLIGHTS FROM 2009-10

Community – Academic Partnerships
- Created successful intervention program for overweight Latino children.
- Fight Asthma Milwaukee Allies successfully advocated to reduce diesel bus idling at Milwaukee Public Schools and for a smoke-free workplace statute.
- Johnsons Park Health Alliance, which works with people in economically depressed neighborhoods to grow and prepare nutritious food, was recognized nationally as a best practice model.
- The Strong Rural Communities Initiative leveraged multi-million dollar grant from the Robert Wood Johnson Foundation.
- Launched the Violence Prevention Initiative. (see story on previous 18).

Research
- Investigated ways to optimize drug therapy based on each individual’s genetic makeup.
- Provided seed funding for injury research projects, including discovery of a new method to aid patients with peripheral nerve injuries from vehicle crashes, industrial incidents, sporting injuries or violence. Wisconsin residents suffer disproportionally from these injuries due to the high number of manufacturing and farm jobs, and motorcycle and motor vehicle crashes.
- Established a mobile Fetal Magnetocardiography imaging program for women across the state to improve fetal diagnosis and care during pregnancy.
- Investigated a blood test that detects the genetic composition of a person with Type 1 diabetes to aid in early detection and planning for treatment.

Education
- Launched a web-based system that helps consumers find reliable online health information.
- Provided education and training through the Healthy Wisconsin Leadership Institute for leaders who work to promote the health of the public.
- Recruited third cohort of students to the PhD program in Public and Community Health.

Cheryl Maurana, PhD, is Senior Associate Dean for Public and Community Health and Professor and Director of the Institute for Health and Society.
Unrestricted Revenues*
Fiscal year ended June 30, 2010
Total All Funds
($ in thousands)
Net patient revenue ** $506,506
Affiliated hospital contracts ** 110,193
Grants and contracts 152,008
Tuition and fees 31,739
Investment income 13,294
Contributions 13,824
State appropriation 3,941
Other 19,962
Total unrestricted revenues $851,467

* Excludes nonoperating revenue and expense, including realized and unrealized gains and losses on investments.
** Includes adult and pediatric revenues.

Unrestricted Expenses*
Fiscal year ended June 30, 2010
Total All Funds
($ in thousands)
Salaries and fringe benefits $582,233
Supplies and expense 171,363
Other operating 57,592
Total unrestricted expenses $811,188
Excess of unrestricted revenues over expenses $ 40,279

* Excludes nonoperating revenue and expense, including realized and unrealized gains and losses on investments.

Externally Funded Sponsored Programs
July 1, 2005 to June 30, 2010
Total Externally Funded Expenditures for Research, Teaching and Training, and Related Purposes ($ in millions)*

- Fellowship and others - 1% ($0.8)
- Teaching and training - 2% ($4.2)
- Community / CME - 5% ($8.0)
- Research - 92% ($147.9)

* In Fiscal Years 2009-2010 and 2008-2009, research, teaching and training amounted to $152.9 and $147.2 million, respectively, of the total Externally Funded Sponsored Programs.

Unrestricted Revenues
Fiscal Year 2010

Other - 2%
State appropriation - 1%
Contributions - 2%
Investment income - 2%
Tuition and fees - 4%
Grants and contracts - 18%
Affiliated hospital contracts** - 13%
Net patient revenue** - 58%
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The Advisory Boards of The Medical College of Wisconsin play a critical role in increasing community awareness of the College’s major programs and raising private funds. The Advisory Boards include Wisconsin’s top business, professional and civic leaders who are committed to advancing medical research at the College.

Medical research is the necessary step to discovering improved methods to diagnose, treat and ultimately cure and prevent diseases. Private support is more important than ever as competition increases for federal grant support.

The fundraising efforts of Advisory Board members have supported:

- Seed funding, which allows researchers to develop a track record to compete for and leverage long-term federal funds. Seed funds have led to and will continue to lead to larger federal or private agency grants that have the potential to result in breakthrough treatments and cures for disease.
- Bridge funding for researchers while they renew grants.
- Advanced training for physicians and scientists.
- The purchase of research equipment.
- Fellowships for conducting research.

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The Medical College of Wisconsin Council was founded in 1976 under the direction of the late Robert Uihlein, Jr., then Chairman and CEO of Schlitz Brewing Company. Council members meet three times a year to learn about current medical topics, health issues and Medical College research.

The interaction among the more than 260 Council members – who are prominent in and outside of Wisconsin – and the Medical College has facilitated important connections to Wisconsin’s top business, professional and civic communities.

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The Medical College of Wisconsin Technology Innovation Council

The Medical College’s Office of Technology Development convenes the Technology Innovation Council to discuss the patenting, marketing, licensing and development of early stage biomedical technologies. The Council’s meetings and work sessions bring together technology analysts, intellectual property experts, business leaders, venture capitalists, entrepreneurs, as well as scientists and engineers who share the common goal of promoting the translation of discoveries made at the Medical College into new drugs, diagnostic tests and medical devices.

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The Medical College of Wisconsin Consortium on Public and Community Health (MCW Consortium), provides oversight for the Healthier Wisconsin Partnership Program and serves in an advisory capacity for conversion funds allocated to research and education at the College. The MCW Consortium is composed of four members selected from nominees provided by statewide and community health care advocacy organizations, four members who represent the medical school and one member selected by the Insurance Commissioner.
Women In Science

Women researchers and physicians at The Medical College of Wisconsin are making discoveries that are saving lives and improving treatments for patients with injuries and complex diseases.

The mission of the Women in Science program:
- Highlight the research and accomplishments of women on The Medical College of Wisconsin’s faculty.
- Create a program of financial support and awareness for the College’s women scientists and their research.
- Encourage women to embrace scientific research as a focus of their philanthropy.

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The Medical College of Wisconsin/Marquette Medical Alumni Association provides services to strengthen connections among alumni and with the Medical College, and between students and alumni.

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The Friends of The Medical College of Wisconsin is an organization of volunteers from the College, affiliated institutions and the community. The Friends’ activities support the charitable, educational, scientific and community service activities of the Medical College and its affiliates. Since its inception, the Friends have contributed more than $1 million in monetary gifts and equipment to the Medical College and its affiliates.

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