April 2024

INSIDE Medicine

The Newsletter of the Department of Medicine

A Message from the Chair, Steve Abramson

A Golden Era

At the Alumni Dinner on April 13th, Dr. Tony Grieco was honored for his twenty-six years of service as the Associate Dean for Alumni Relations and Academic Events. The photo below captures the warmth in the ballroom as he received a standing ovation upon his call to the podium. The event punctuated a bittersweet moment as we recognize that an end of an era has arrived as three extraordinary physician educators, Drs. Tony Grieco, Jerry Lowenstein, and Martin Kahn, will each have retired this year after decades of training and shaping generations of medical students and residents. Appointed Firm Chiefs by Dr. Saul Farber almost 50 years ago, they have embodied an unparalleled commitment to the education of each student and to the highest principles of the medical profession. An internist, nephrologist, and cardiologist, respectively, they have led a golden era of medical education at NYU that has enriched not only this institution but institutions nationally as our graduates have taken positions across the country. We express our deepest gratitude to Drs. Grieco, Lowenstein, and Kahn for their unwavering commitment to the profession of medicine. Inspired by their legacy, we hopefully will move forward with a renewed commitment to education and clinical care.



Photo from the 2024 NYU Grossman School of Medicine Alumni Reunion



(L-R) Tony Grieco, MD, Martin Kahn, MD, and Jerry Lowenstein, MD

Celebrating the Holman Division of Endocrinology, Diabetes and Metabolism



Following a \$15 million gift from innovators and philanthropists Wayne Holman, MD (NYUGSOM Class of 1998)

Kenneth Langone, Wayne Holman, MD, Steven B. Abramson, MD, Robert I. Grossman, MD

Photo by Mateo Salcedo

and Wendy Holman, the Division of Endocrinology, Diabetes & Metabolism is newly named and endowed the Holman Division of Endocrinology, Diabetes & Metabolism. Wayne and Wendy founded Ridgeback Biotherapeutics, which together with Merck developed molnupiravir, an antiviral medication that reduces COVID-19 mortality. The Holmans' visionary gift will allow the Division—ranked #2 in the 2023-24 *U.S. News & World Report* rankings—to continue to elevate its world-class treatment and study of endocrine disorders, which includes major contributions in diabetes care, thyroid disease, obesity, neuroendocrinology, lipid disorders, and bone health.

The naming was marked by a ceremony attended by Wayne Holman, MD, NYU Langone Health Dean & CEO Robert I. Grossman, MD, Department of Medicine Chair Steven B. Abramson, MD, and division faculty and staff. "Wayne and Wendy's generosity in this important area of medicine will help NYU Langone further enhance our exceptional research, education, and clinical care within the Holman Division of Endocrinology, Diabetes & Metabolism," said Dean Grossman, in his remarks. Added Dr. Abramson, "This impactful gift will propel the division into its next phase of growth by establishing new translational research, clinical trials, academic forums, and advancing clinical care, among other initiatives. I am excited for the medical advances that will undoubtedly come about because of the Holmans' deep investment."



Illustration by Michael Natter, MD

POCUS Olympics



NYUGSOM medical students and POCUS education director Michael Janjigian, MD, attend Sonoslam in Austin, TX

Three teams of NYU Grossman School of Medicine medical students—with representation from each class year—recently competed in the NY Ultrasound Olympics. The event tested their skills against teams from Zucker, Stony Brook, and Rowan—and our NYUGSOM teams came away ranking first and third in the competition! Following their success in the regional event, one student team travelled to the national American Institute for Ultrasound in Medicine (AIUM) <u>Sonoslam</u> competition in Austin, TX on April 6th and performed exceptionally well, placing fourth. In preparation for the events, students underwent a rigorous training schedule, including test sessions and practicing with ultra-portable Butterfly probes donated by the Goodman Family Foundation.

The effort was led by Dr. Michael Janjigian, Associate Chief of Medicine at Bellevue Hospital and Director of Point-of-Care Ultrasound (POCUS) Education for the Department of Medicine. "The students, residents, and faculty have shown incredible enthusiasm to learn POCUS because it is a technology that allows them to make diagnoses at the patient's bedside in ways that were not possible until recently," he said of the POCUS program.

On May 8th, Dr. Janjigian, the 2024 Murray J. Berenson, MD Distinguished Scholar in Physician-Patient Communication, sponsored by the Program for Medical Education Innovations and Research (PrMEIR) and the Division of General Internal Medicine and Clinical Innovation, will host POCUS Olympics in the NYSIM Center from 1-4pm. Teams of students, residents, and faculty will test their integration of physical examination, clinical reasoning, and ultrasound skills—no ultrasound experience necessary! RSVP for the event <u>here</u>.



NYUGSOM medical students and POCUS education director Michael Janjigian, MD, attend the regional POCUS Olympics

The Historian Is In

A Fatal Strain



It's been called "the fatal strain" for good reason, and it isn't COVID-19. In the 1990s, a virulent Type A influenza virus (H5N1) appeared in East Asia, killing tens of millions of birds in a region undergoing a poultry boom in dangerously primitive surroundings—from the farms where chickens and ducks are raised alongside other animals to the blood-soaked open-air markets where the birds are slaughtered and sold. The most disturbing feature of H5N1 is its ability to jump the species barrier from birds and humans, which resulted in a 60 percent mortality rate for those who tested positive. But such cases are extremely rare, involving people who work closely with the infected birds. And the strain, though astonishingly lethal, lacks the capacity at this point to move from one human to another—the key factor in triggering a pandemic.

H5N1 is dangerous because it penetrates deep into lung tissue, unlike seasonal flu. But as the years passed without a single documented case in the United States, it took a back seat to SARS, MERS, and COVID-19. It wasn't until 2022 that the Centers for Disease Control and Prevention reported the first human case of H5N1 on American soil—a Colorado bird-handler who recovered quickly after receiving an antiviral drug. Then, just a few weeks ago, it reported a second case involving a farm worker in Texas. Noting that the "risk assessment for the general public remains low," and that the man's condition was not serious, CDC officials were surprised by the path of transmission, which appeared to involve dairy cows as an intermediate host.

Previously, pigs had been the main culprits, serving as vessels where avian and mammalian flu strains can mutate in ways that make them more dangerous and transmissible to humans. In recent years, however, H5N1 has been detected in numerous mammals, including bears, coyotes, and seals. That may be the tip of the iceberg. Geese are now shedding the virus worldwide. As one expert admitted: "We just never thought about looking ... for it."

How concerned should we be? COVID-19 taught us many painful lessons. The good news is that the U.S. Strategic National Stockpile (SNS) is in far better shape to handle a future pandemic. There should be no shortages of vaccines, antiviral drugs, or protective equipment. Current research involving mRNA technology is rapidly advancing, and the global tracking of disease is far more sophisticated than it was in the 1990s.

The bad news is that a nation's self-interest can still trump the common good, as China's deadly secrecy surrounding the origins of COVID-19 made all-too-clear, and that the surging anti-vaccine movement is likely to retard efforts to fund and implement a world-wide safety net.

But one point is certain whether H5N1 turns out to be a mass killer or something far more benign. History assures us that the next "fatal strain" is evolving somewhere—in a bat cave, a pig farm, or an open-air poultry market. That's the nature of the beast, and we'd better be ready.



David M. Oshinsky, PhD Professor, Department of Medicine Director, Division of Medical Humanities

Innovations in Medicine: Conversations with Our Expert Faculty



James Lai, MD, ScM, MHS Inaugural Associate Director for Clinical Services, Geriatric Medicine and Palliative Care

In August of 2023, NYU Langone Health Geriatrics Associates opened the Cognitive Health Consultative Practice at the 41st Street Ambulatory Care Center. While NYULH geriatricians staff the Tisch/Kimmel Consult Service, attend as hospitalists, and are embedded within practices including the Pearl I. Barlow Memory Clinic and Internal Medicine Associates, this new practice serves as the first standalone NYULH outpatient site fully dedicated to geriatrics care. It joins a division-wide clinical roster that includes the Bellevue Geriatrics Clinic—one of the oldest in the nation—the VA Geriatrics Clinic, and affiliated care by NYULH providers in community settings across NYC.

We spoke with the inaugural Associate Director for Clinical Services for the Division of Geriatric Medicine and Palliative Care, Dr. James Lai, to learn more about the clinic structure and vision. Dr. Lai was recruited to NYU Grossman School of Medicine from Yale School of Medicine in spring of 2023, and this clinic is one of many clinical expansion projects planned for Geriatrics and Palliative Care across the system which he will lead in an effort to strengthen care and integrate geriatrics principles across specialties.

What is the vision for the clinic? For geriatrics care at NYULH?

The vision for the NYULH 41st Street Geriatrics Consultative Clinic is to be the best clinical resource for our older NYULH patients facing the complexity of multi-morbidity, informed by geriatric principles of comprehensive functional assessment, shared decision-making for therapeutic challenges, and patient-centered goal concordant care. The geriatrics consultative clinic is also a resource for patients needing cognitive assessments complicated by other age-related disabilities.

Tell us more about the consultative nature of the clinic.

Given the critical impact cognitive function plays in the care and clinical decision-making of older adults, comprehensive memory evaluations are a key component in our evaluations, and we therefore maintain a close relationship with the NYULH Barlow Center—with access to all of their resources. This is a model of collaboration we seek with all our subspecialty colleagues whose patients' conditions are complicated by functional issues and the potential for frailty. The impact of our assessments will be most notably seen in the improved coordination of specialist care, refined patient goals, and in the optimization of patient cognition and function.

What metrics are you measuring to indicate success?

Patient and referring provider satisfaction will be the most rewarding measures of success. This will occur through an alignment between patient goals and function supported by advanced care planning. Through strong consultative relationships with sub-specialists—including cardiologists, oncologists, surgeons, and endocrinologists—and using more specific measurement, we expect to see reduced complications, readmissions, and hospital lengths of stay associated with surgical and procedural interventions; we will also strive for reduced health care utilization—ED visits and hospitalization—in our referral population.

The Digital Pulse

A roundup of select posts from our social media channels. Be sure to join the conversation, and don't forget to tag us as you share your accomplishments!



NYU Department of Medicine 🤡 @NYULH_DeptofMed

An outstanding Med #GrandRounds, highlighting our Junior Faculty Research Showcase! Congrats to Drs. Lama Nazzal, Adam Faye, & Angelica Cifuentes Kottkamp, on their impressive work. @lamanazzal @AdamFayeMD @angelickott @NYUGSOM_ID @nyugrossman #JuniorFacultyResearchShowcase



Medicine Grand Rounds: Junior Faculty Research Showcase eaturing (L-R) Lama Nazzal, MD, MSc Adam Faye, MD, MS Angelica Cifuentes Kottkamp, MD



NYU Department of Medicine 🥝 @NYULH_DeptofMed

Dr. Lama Nazzal's Med #GrandRounds on #Oxalate Cardiotoxicity in Chronic Kidney Disease offered key insights for advancing #CKD care. #Cardiology #Kidney #JuniorFacultyResearchShowcase @lamanazzal @DCharytan





NYU Department of Medicine 🤣

Dr. Adam Faye highlights research on Antibiotic Use & IBD Development at #JuniorFacultyResearchShowcase. Findings: 15% of #IBD diagnoses are in persons age 60+, antibiotic history ups IBD risk. #1 paper in Gut, 2023. #CrohnsDisease #UlcerativeColitis @AdamFayeMD @MarkPochapin

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NYU Department of Medicine 🥝 @NYULH DeptofMed

Dr. Angelica Cifuentes Kottkamp's talk on Mpox antibodies: Previous smallpox vax ups titers, vax method doesn't matter, 2nd dose vital. @angelickott @NYUGSOM_ID #MonkeyPox #JuniorFacultyResearchShowcase See @NEJM

nejm.org



Antibody Titers against Mpox Virus after Vaccination | NEJM In this observational study, mpox antibody responses were assessed in various patient groups, such as those with HI...

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What Are They Reading

Historical fiction elegantly meets themes of coming of age, friendship, and women in medicine in Lady Tan's Circle of Women by Lisa See. The story of bright and beautiful Yunxian's life in 15th century China (inspired by a true story) takes us through a journey from her childhood loss to being raised by her grandparents, who are doctors and healers and inspire her to forge her own unique place in society. I enjoyed seeing how she comes into her own surrounded by a multitude of relationships that span generations and social classlearning from all and also steadfast in her calling as a healer, wife, and mother; friendship between women throughout the different stages of her life was a strong theme of the novel. Lisa See's writing drew me in, and I felt transported to a different era of medicine and healing that was fascinating-reliant on traditional Chinese medicine but with no less astute diagnosticians (spoiler: I loved the wild helminth discovery towards the end). Yet, the ambitious, devoted, and seemingly ahead-of-their-time women of this story felt familiar to modern times.



Sapna A. Mehta, MD, FIDSA Medical Director, Transplant Infectious Diseases Clinical Director, NYU Langone Transplant Institute Associate Professor of Medicine



In The Righteous Mind, author Jonathan Haidt, Professor of Ethical Leadership at the Stern School and author of the recent best-seller, The Anxious Generation, suggests that we need a more nuanced approach to moral reasoning, one that recognizes the role of both intuition and reason. He provocatively argues that moral judgments are first based on intuition rather than rational thinking. We then produce reasons to justify those judgments. Haidt suggests that moral judgments are based on six foundations which are valued differently across groups and cultures: care, fairness, loyalty, authority, sanctity, and liberty. By understanding and respecting each other's moral frameworks, we can find common ground and work together towards shared goals. Not unimportant during these tumultuous times.



Steven B. Abramson, MD Executive Vice President and Vice Dean for Education, Faculty and Academic Affairs Chair, Department of Medicine



Featured Student Essay

Serendipity

A patient walks into a cardiology clinic for a follow-up appointment. He has known his doctor for years, ever since he was identified as "high risk" by his employer's screening program and referred to an in-network specialist on the company's insurance plan. Per usual, the patient and physician chat about the last several months; how have things been going? Not too well for the patient's family, it turns out; an aunt passed away from an aggressive form of cancer last night. Something similar happened to a great uncle some time back; the patient is not sure of the details. The patient thought about rescheduling today's visit, but it would take months to find a new date, and he needs a medication refill.

As it happens, the cardiologist's friend, an oncologist, had a similar family history, and joined a novel cancer monitoring program. The offered screening package may not be standard practice yet, but with some preliminary genetic testing and a couple of phone calls, it should not be too hard to enroll the patient. "Certainly, I'm interested," the patient replies. He only has one life, after all.

Months later, the patient qualifies for the program. He has a small pancreatic mass on imaging. No symptoms at this stage, and the tumor should be fully resectable if the team acts quickly. All goes well, and the patient walks out of the hospital after surgery with multiple decades ahead of him.

Medicine is often taught as an algorithmic process. Recognize this constellation of symptoms, give this treatment, follow up with these alternatives if the first approach does not work. And by and large, it works well. On a global level, numerous diseases that once decimated families and communities are little more than minor inconveniences with the help of modern therapies. And for many of the conditions that remain, our improved understanding of pathophysiology enables more effective, targeted interventions that our ancestors could not have dreamed of.

It is easy to forget how much of medicine comes down to luck, however. Certainly, some larger factors are obvious. Was a patient born into a middle-class American family at the dawn of the twenty-first century, or was she born into poverty in a warzone several decades prior? But so many variables affect each participant

in the medical machine, patient and doctor alike, that identifying all of them is likely impossible.

Take our cardiology patient with the early-stage pancreatic mass, for instance. What if he had never met his cardiologist? What if he had rescheduled his appointment? What if his aunt had died the day after he spoke to his cardiologist, rather than the day before? What if his cardiologist had never met a friend in a similar predicament, and therefore did not know a specific screening program to recommend, or what if that friend had been adopted and was unaware of the risk factors in his own family history? What if the DNA in a single cell in the patient's body mutated slightly earlier, or slightly differently, leading to more rapid tumor growth prior to screening? Or what if the scenario played out as described, but the patient qualified for screening in March 2020 that was postponed by the COVID-19 pandemic?

Textbooks present the scientific method as a regimented cycle that gives rise to new discoveries. The reality is often more complicated. Did the right minds meet at the right moment? Did a mistake lead to an interesting observation, as with the tale of penicillin, and what steps followed? Who was willing to pay to pursue the findings in question? Add in the narrative process of compiling scientific results into a compelling, logical, and linear story, and it isn't hard to craft a false "creation myth" of how therapeutic advances inevitably came to be.

So how much of medicine really is serendipity? And as physicians, what roles can, and should, we undertake in shaping fate?

Laura McCulloch is an MD/PhD student at NYU Grossman School of Medicine. Originally from New Canaan, CT, Laura completed her undergraduate studies at MIT, where she majored in biology and minored in history. She conducted her PhD research in synthetic biology and genetics in the laboratory of Jef Boeke, and defended her thesis, titled "Applications of Synthetic Biology in Yeast, Mice, and Beyond," in August 2023. While at NYU, Laura has also mentored numerous students both formally and informally, helped develop high-throughput COVID-19 PCR testing, and cochaired the BASIS Middle School Mentoring Program, Academic Medicine Club, and Translational Medicine Club. Now in the middle of her clinical clerkship year, Laura ultimately hopes to combine her clinical and research interests as a physician-scientist.



News & Awards

Invited Lectures & Keynotes















Morgan Grams, MD, PhD delivered the Richard Yu Endowment Lecture at the Hong Kong Society of Nephrology. She will also be giving a plenary lecture at the UK Kidney Week, to be held in Edinburgh in June.

Anne Marie Schmidt, MD was invited to deliver the Robert B. Greenblatt Distinguished Lecture at Augusta University's Medical College of Georgia in February 2024.

George D. Thurston, ScD delivered the keynote address, "Emerging Issues in Environmental Public Health: Dissecting Genetic and Exposome Perspectives," at the Air Pollution Epidemiology Indo-US Workshop held in Nagpur, India on January 3rd. He also was a panelist on "Climate Change Mitigation in the Context of Fine Particulate Matter (PM2.5) Air Pollution Health Effects" at the European Union Commission Research Perspectives on the Health Impacts of Climate Change Summit in Brussels, Belgium.

Faculty Honors

Souptik Barua, PhD received the American Heart Association's Second Century Early Faculty Independence Award for his proposal "Digi-Moms: A Wearables and AI Framework for Early Detection of Cardiometabolic Complications in Pregnancy."

David B. Beck, MD, PhD received the Julia Zelmanovich Young Alumni Award at the 2024 NYU Grossman School of Medicine Alumni Reunion.

Glenn I. Fishman, MD received the 2024 Distinguished Basic Scientist Award by the Heart Rhythm Society.

Morgan Grams, MD, PhD received the National Kidney Foundation Garabed Eknoyan Award at the NKF Spring Clinicals. Read more about the honor <u>here</u>.











Wayne Holman, MD received the Solomon A. Berson Medical Alumni Achievement Award at the 2024 NYU Grossman School of Medicine Alumni Reunion.

Michael Janjigian, MD was appointed the NYUGSOM 2024 Murray J. Berenson, MD Distinguished Scholar in Physician-Patient Communication.

Robert Pitts, MD was presented with the Organization Leadership Award for NYC Health + Hospitals/Bellevue Pride Center at the Building the Next Generation of Academic Physicians' (BNGAP) LGBT Health Workforce Conference.

Ravichandran Ramasamy, PhD was elected a 2023 council member on the Board of the North American Section of International Academy of Cardiovascular Sciences.

Harmony Reynolds, MD received the American College of Cardiology 2024 Bernadine Healy Leadership in Women's CV Disease Award.







Griguriy E. Gurvits, MD was promoted to Professor of Medicine.

Chunyuan Jin, MD, PhD was promoted to Professor of Medicine.

Select Publications

Leon H. Charney Division of Cardiology

van Opbergen CJM, Narayanan B, Sacramento CB, Stiles KM, Mishra V, Frenk E, Ricks D, Chen G, Zhang M, Yarabe P, Schwartz J, Delmar M, Herzog CD, Cerrone M. AAV-mediated delivery of plakophilin-2a arrests progression of arrhythmogenic right ventricular cardiomyopathy in murine hearts: preclinical evidence supporting gene therapy in humans. *Circ Genom Precis Med*. 2024
Feb;17(1):e004305. doi: <u>10.1161/CIRCGEN.123.004305</u>. Epub 2024 Jan 30. PMID: 38288614; PMCID: PMC10923105.

Yamaguchi N, **Chang EW**, Lin Z, Shekhar A, **Bu L**, Khodadadi-Jamayran A, **Tsirigos A**, Cen Y, Phoon CKL, Moskowitz IP, **Park DS**. An anterior second heart field enhancer regulates the gene regulatory network of the cardiac outflow tract. *Circulation*. 2023 Nov 21;148(21):1705-1722. doi: <u>10.1161/CIRCULATIONAHA.123.065700</u>. Epub 2023 Sep 29. PMID: 37772400; PMCID: PMC10905423.

Eberhardt N, Noval MG, Kaur R, Amadori L, Gildea M, Sajja S, Das D, Cilhoroz B, Stewart O, Fernandez DM, Shamailova R, Guillen AV, Jangra S, Schotsaert M, Newman JD, Faries P, Maldonado T, Rockman C, Rapkiewicz A, Stapleford KA, Narula N, Moore KJ, Giannarelli C. SARS-CoV-2 infection triggers pro-atherogenic inflammatory responses in human coronary vessels. *Nat Cardiovasc Res*. 2023 Oct;2(10):899-916. doi: <u>10.1038/s44161-023-00336-5</u>. Epub 2023 Sep 28. PMID: 38076343; PMCID: PMC10702930.

Holman Division of Endocrinology, Diabetes & Metabolism

Bergman M, Manco M, Satman I, Chan J, Inês Schmidt M, Sesti G, Vanessa Fiorentino T, Abdul-Ghani M, Jagannathan R, Kumar Thyparambil Aravindakshan P, Gabriel R, Mohan V, Buysschaert M, Bennakhi

Promotions

Tamas A. Gonda, MD was promoted to Professor of Medicine.

A, Pascal Kengne A, **Dorcely B**, Nilsson PM, Tuomi T, Battelino T, Hussain A, Ceriello A, Tuomilehto. International Diabetes Federation position statement on the 1-hour post-load plasma glucose for the diagnosis of intermediate hyperglycaemia and type 2 diabetes. *J Diabetes Res Clin Pract*. 2024 Mar;209:111589. doi:.2024.111589. Epub 2024 Mar 7. PMID: 38458916.

Dorcely B, DeBermont J, Gujral A, Reid M, Vanegas SM, Popp CJ, Verano M, Jay M, Schmidt AM, Bergman M, Goldberg IJ, Alemán JO. Continuous glucose monitoring captures glycemic variability in obesity after sleeve gastrectomy: A prospective cohort study. *Obes Sci Pract.* 2024 Jan 4;10(1):e729. doi: 10.1002/osp4.729. PMID: 38187121.

Shibao C, Peche VS, Williams IM, Samovski D, Pietka TA, Abumrad NN, Gamazon E, **Goldberg IJ**, Wasserman D, Abumrad NA. Microvascular insulin resistance associates with enhanced muscle glucose disposal in CD36 deficiency. *medRxiv*. 2024 Feb 18:2024.02.16.24302950. doi: <u>10.1101/2024.02.16.24302950</u>. PMID: 38405702.

Division of Environmental Medicine

Opoku F, Flaws JA, **Zelikoff JT**. Reproductive effects associated with phthalate mixture exposure. *Explore (NY)*. 2024 Feb 26:S1550-8307(24)00051-X. doi: <u>10.1016/j.Explore.2024.02.006</u>. PMID: 38423834.

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Division of Gastroenterology and Hepatology

Shaukat A, Levin TR, Church TR. Screening for colorectal cancer in asymptomatic average-risk adults. *Ann Intern Med*. 2024 Apr;177(4):542-543. doi: <u>10.7326/L24-0014</u>. PMID: 38621268.

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Division of General Internal Medicine and Clinical Innovation

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Division of Geriatric Medicine and Palliative Care

Martin JL, Cadogan M, **Brody AA**, Mitchell MN, **Hernandez DE**, Mangold M, Alessi CA, Song Y, **Chodosh J**. Improving sleep using mentored behavioral and environmental restructuring (SLUMBER). *J Am Med Dir Assoc*. 2024 Mar 14:S1525-8610(24)00132-4. doi: <u>10.1016/j.jamda.2024.02.003</u>. Epub ahead of print. PMID: 38493807.

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Division of Hospital Medicine

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Division of Infectious Diseases and Immunology

Kottkamp AC, **Samanovic MI**, **Duerr R**, **Oom AL**, Belli HM, Zucker JR, Rosen JB, **Mulligan MJ**; NYC OSMI Study Group. Antibody titers against mpox virus after vaccination. *N Engl J Med*. 2023 Dec 14;389(24):2299-2301. doi: <u>10.1056/NEJMc2306239</u>. PMID: 38091537; PMCID: PMC10754300.

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