

# INSIDE *Medicine*

The Newsletter of the Department of Medicine

## Pride and Gratitude

### A Message from the Chair, Steve Abramson

We learned this past month that NYU Langone Health has been recognized for the second consecutive year by Vizient Inc. as the number one academic medical center for quality and safety in the nation. We are grateful to the prominent institutional leaders and members of the Department of Medicine, including Fritz Francois, Brian Bosworth, Ilseung Cho, and Kathy Hochman, whose unwavering commitment to quality care was instrumental in achieving this recognition (photo below). In addition, it is important to acknowledge the contributions of the physicians in our department, including hospitalists, intensivists, specialists, house staff, and fellows, whose collective efforts are crucial to the exceptional care that resulted in this award. As we reflect on this extraordinary national achievement, let us take great pride in the pivotal role that members of the Department of Medicine play in making NYU Langone a model of excellence in quality and safety for its patients. Let us also consider our gratitude for the opportunity to be a part of an institution that fosters an environment where we can each contribute to the success of these collective efforts for our patients.



Members of the Department of Medicine, including Fritz Francois, MD, Kathy Hochman,

MD, Brian Bosworth, MD and Ilseung Cho, MD gather to receive the Vizient Inc. 2023  
Bernard A. Birnbaum, MD Quality Leadership Award for #1 Comprehensive Academic  
Medical Center.

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## Support the Department of Medicine House Staff and Fellowship Research, Education and Wellness Fund

We are pleased to announce an opportunity for you to recognize and support our outstanding medical interns, residents and fellows by contributing to a new *Department of Medicine House Staff and Fellowship Research, Education and Wellness Fund*. This fund will be used exclusively to support resident and fellow research, provide house staff and fellows the opportunity to attend medical meetings and other educational activities, and create social events to promote wellness. The fund will also allow us to express our appreciation to trainees who make such important contributions to the care of our patients and teaching of our medical students. To make a tax-deductible donation today, please use this secure form on our Development site: <http://giving.nyulangone.org/DOMHouseStaffandFellowshipFund>. Your generosity will help us continue to support the growth and development of our exceptional house staff and fellows. Thank you for your support!

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### The Advisor Is In



Joshua Chodosh, MD, MSHS

Several weeks ago, **The Economist** published a piece, "America's Missing Doctors," about the growing shortage of geriatricians in the U.S. The number of people aged 65 or older is expected to quadruple in the next two decades. The surge will impact all medical specialties, but especially geriatrics, because an older population requires greater medical attention, including Emergency Room care and extended hospitalization. Ideally, the nation will need an additional 25,000 geriatricians by 2040—an impossibility given the limited number of young physicians entering the field.

As fortune would have it, Joshua Chodosh, MD, MSHS, Director of the Division of Geriatric Medicine and Palliative Care, and collaborators have just received a \$54 million federal grant to study one aspect of this looming problem and to provide workable solutions.

#### TELL US ABOUT THE GRANT.

It's estimated that there are close to 1.5 million Emergency Department visits each year in the U.S. by people known to have dementia, and likely many more by those who are undiagnosed. We will be leading a national research study involving 82 hospital Emergency Departments, the flagships being NYU Langone and the University of Wisconsin-Madison. Our interdisciplinary team includes leaders in Emergency Medicine, Geriatrics, Palliative Care and Nursing. Our aim is to improve emergency and post-emergency care in ways that benefit both the person with dementia and their care-partners.

#### HOW DO YOU GO ABOUT THIS?

We'll focus on three different types of intervention: emergency care redesign, nurse-led telephonic care management, and a paramedic-led intervention that includes home visits to better connect the patient and

care partner to essential community services. We'll study these interventions individually and in various combinations to assess how well they address the needs of dementia patients who come through the Emergency Department.

#### HOW WILL YOU JUDGE SUCCESS?

An interesting question. Our determinants will include the number of ED revisits within 14 days, thirty days and six months of discharge; hospitalization within the same time parameters; and "healthy days" at home within six months of discharge. We'll focus heavily upon care partner resilience, a vital component that is too often overlooked.

#### WHAT ROLE IS NYU LANGONE HEALTH CURRENTLY PLAYING?

We've become a leader in the field. We have the Pearl I. Barlow Center for Memory Evaluation and Treatment, the Center for Cognitive Neurology, a New York State Center of Excellence for Alzheimer's Disease, and a CDC-funded Public Health Center of Excellence on Early Detection of Dementia. We are also making great strides in palliative care. It's clear that we'll never have enough geriatricians to handle the growing caseloads, so our strategy is one of collaboration and leadership. Our division plays a key role in partnering with other fields at NYU Langone and Bellevue: surgery, neurology, nephrology, to name a few. We intend to train leaders from across the medical disciplines. One of our fellowships does just that; another will allow physicians in mid-career to complete fellowship training in geriatrics.

We're also involved in a host of other issues, from advances in nutrition to providing personal amplifiers to veterans to deal with hearing loss—an additional challenge for dementia. We're studying "triadic encounters"—those involving the patient, the care partner, and the physician—to see how communication can be improved. We're working with nursing home providers like ArchCare to increase dementia-friendly environments in the private sector, and we're engaged in studying people over 90 years-of-age who are in good mental and physical health. We likely have over 20,000 living "super-agers" who receive some sort of medical care at our facilities. It's an exciting time.



Illustration by Michael Natter,  
MD

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## The Generative AI Prompt-A-Thon in Health Care



NYU Langone Health hosted the inaugural Generative AI Prompt-A-Thon in Health Care, sponsored by the MCIT Department of Health Informatics, on August 18th. The Department of Medicine was well represented as both leaders and participants. The goal of the event was to energize and educate the workforce on the transformative potential and risks of large language models like chatGPT in healthcare. The event was co-chaired by **Drs. Jonathan Austrian** and **Yindalon Aphinyanaphongs**, both faculty in the Department of Medicine.

The first half of Prompt-a-Thon featured talks by experts in Generative AI, including Department of Medicine faculty **Marc Triola** and **Devin Mann**. Subsequently, teams comprised of clinicians (including DOM faculty **Holly Lofton**, **Cristina Richardson**, and medical resident **Lauren Heery**), researchers, and educators used NYU Langone Health's private instance of GPT4 to interrogate real de-identified clinical data like H&P's and discharge summaries. Experiments included whether GPT4 could arrive at a differential diagnosis or identify biases when supplied with clinical documentation. All the while, teams were mentored by additional experts in Generative AI within the Department of Medicine, including **Drs. William Small**, **Eduardo Iturrate**, **Paawan Punjabi**, and **Safiya Richardson**.

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## What Are They Reading

I just finished a remarkable series of published essays, "When We Cease to Understand the World," by the Chilean author Benjamin Labatut. It carefully analyzes the major scientific discoveries of the 20th Century, intimately connecting each discovery with the social and political events of that time. Labatut's goal is to demonstrate the impact of human ingenuity upon both science and the world at large—and he succeeds brilliantly. It was recommended to me by a friend from grad school who, to be honest, had trouble explaining it beyond "I think you'll like it." I suspect that the driving thesis—the interface between science and society—will resonate deeply with my colleagues because it helps to explain our current situation as we struggle to show the benefits of this increasingly fraught relationship.



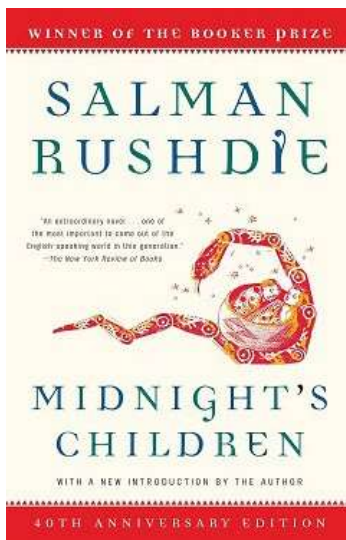


**David DiTullio, MD**  
Executive Chief Resident

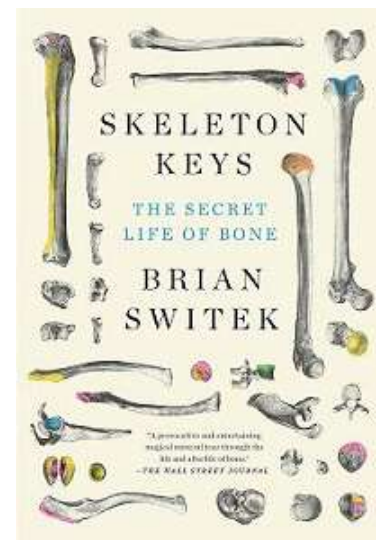


One of my New Year's resolutions was to finish unread books in my partner's library. That is how I finally read Salman Rushdie's "Midnight's Children" which I am still thinking about a month after finishing. It really is a literary masterpiece where he takes events from India's history and spins them into tales of fantasy: how magical realism can be used to make narratives from the chaos of human history.

I also like to read a fair amount of non-fiction. By chance, I picked up "Skeleton Keys: The Secret Life of Bone" by Riley Black. It's basically everything related to bones, from how a genetic fluke billions of years ago created linear body organization to the cultural significance humans place on a person's remains. The writer has a personal stake in the story; she transitioned genders but comments on how her bones will always be male. As a paleontologist, she realizes that preserved bones are the only things that achieve immortality, surviving millions of years after extinction.



**Luke O'Donnell, MD**  
Clinical Assistant Professor,  
Department of Medicine

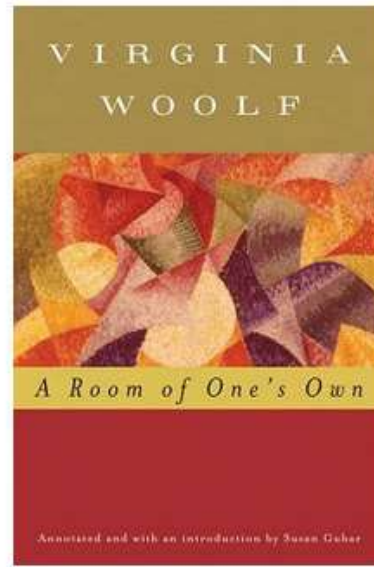


A 93-year-old friend recently recommended the classic "A Room of One's Own." Published in 1929, it is a passionate essay based on two lectures Virginia Woolf gave to a couple of women's colleges at the University of Cambridge. The work essentially focuses on women's rights and how there are both financial and social barriers specific to women in academia; the well-known line is "a woman must have money and a room of her own if she is to write fiction." Woolf speaks in the context of women in the arts, yet while reading I found myself changing the context to medicine. I am fascinated how even over a hundred years later she could be speaking at a grand rounds on a Wednesday morning, replacing "fiction" with "an R01." The essay provoked feelings of gratitude for her courage to advocate for women to be allowed to receive an education and pursue a career. I appreciate that she doesn't rally for women to be the same as men,

but instead advocates for the same opportunities to be extended to women. I couldn't agree more and my only regret with this book is I didn't read it sooner!



**Megan Rau, MD, MPH**  
Assistant Professor, Department of  
Medicine



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## The Historian Is In: The Nobel Prizes in Physiology or Medicine



It's that time of year. The winners of the 2023 Nobel Prize in Physiology or Medicine, Katalin Karikó and Drew Weissman, whose work on mRNA helped develop the Covid vaccines used today, were announced in Stockholm on October 2nd.

Below is a quiz to test your knowledge of this—the ultimate—award in medical science. Good luck—and enjoy.



### Question

Rank these nations in terms of the number Nobels in Physiology or Medicine won by their citizens:  
Sweden, United Kingdom, Germany, United States, France

### Answer

The United States has won more Nobels in this field than the rest of the world combined.

US (104)

UK (31)

Germany (17)

France (11)

Sweden (9)

### Question

Which of these researchers has won the Nobel Prize in Physiology or Medicine more than once:

- a) Sir Alexander Fleming
- b) Robert Koch
- c) Barbara McClintock
- d) Joshua Lederberg

### Answer



Curie and Pauling

None. No researcher in this field has received more than one award. It has been accomplished twice in Chemistry, by Frederick Sanger (1958, 1980) and Barry Sharpless (2001, 20022); and once in Physics, by John Bardeen (1956, 1972). In addition, two people have won the Nobel Prize in different categories: Marie Curie for Physics in 1903 and for Chemistry in 1911; and Linus Pauling for Chemistry in 1945 and for Peace in 1962.

### Question

Who is the only polio researcher to have won a Nobel Prize?

- a) Jonas Salk
- b) Albert Sabin
- c) Isabel Morgan
- d) John Enders

### Answer

JOHN ENDERS shared the 1954 prize with his two young assistants, Frederick Robbins and Thomas Weller, for discovering “the ability of polio virus to grow in various types of tissue.” Their culture technique proved invaluable for the mass production of numerous vaccines. Salk and Sabin, while far better known to the public, were viewed by the

Nobel committee as practical scientists who relied on the building blocks of others for their life-saving products.



L to R: Weller, Robbins, and Enders

### Question

Which annual scientific/medical prize is widely and accurately viewed as a precursor for winning the Nobel Prize?

- a) Medallion for Scientific Achievement
- b) Lasker Award
- c) Maxwell Finland Award
- d) Wolf Prize in Medicine

### Answer



LASKER AWARD.

Known as “the American Nobel,” 86 of its winners have gone on to receive a Nobel Prize in Physiology or Medicine.



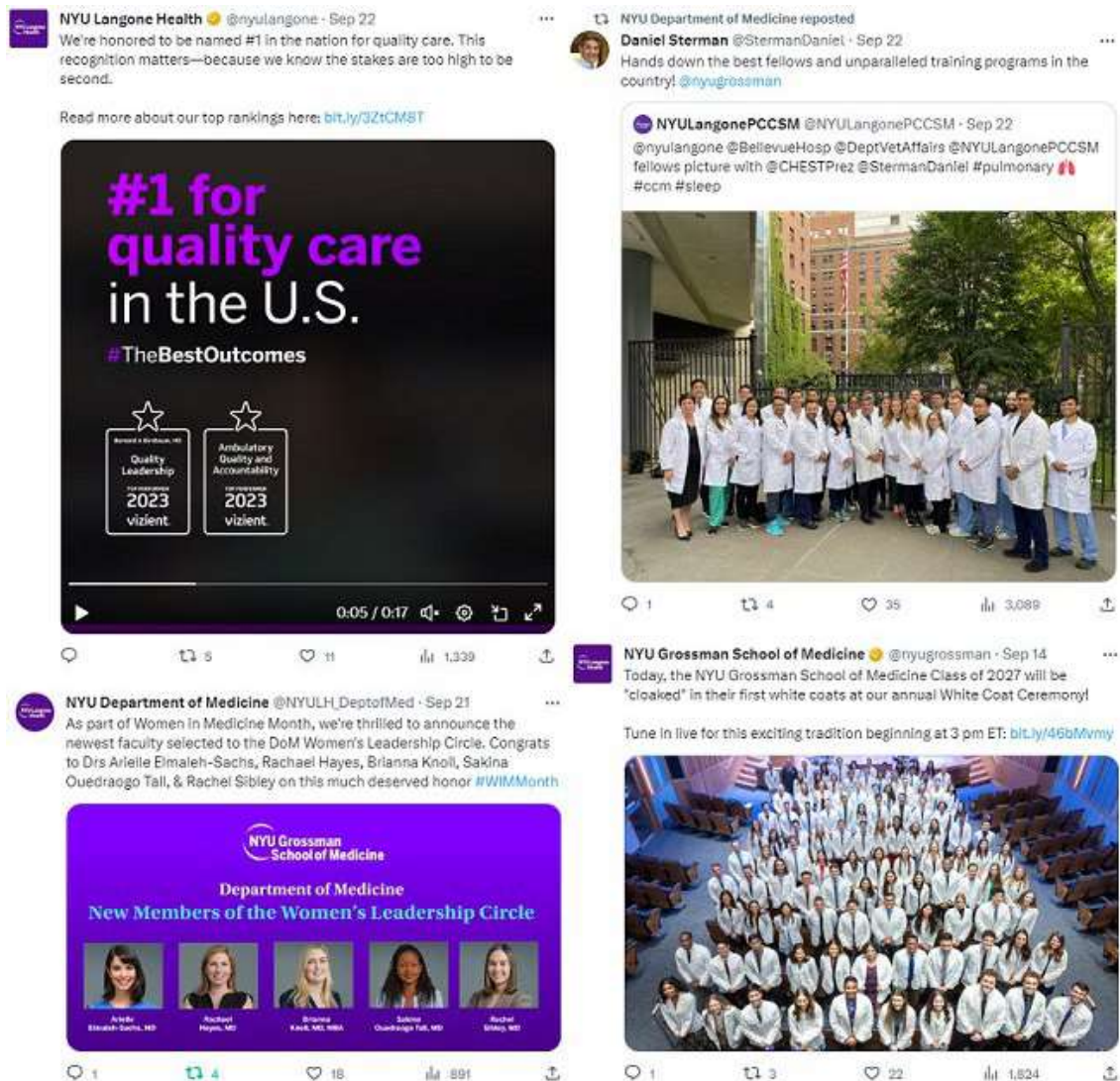
**David M. Oshinsky, PhD**  
Professor, Department of Medicine  
Director, Division of Medical Humanities

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## 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!*





## Featured Student Essay

February 24, 2022, is a day forever seared in my memory. I stayed up watching videos of Russian attacks on Ukraine, as I desperately tried to reach my family in Kyiv to make sure they were okay. During those first few weeks, I was in the pulmonary and renal blocks of my pre-clerkship curriculum. As we learned about ventilator settings and dialysis, I could not avoid thinking about how these high-resource healthcare services were being allocated, let alone administered, during the war.

Ukraine's entire healthcare system shifted to support wounded civilians, soldiers, and the critically ill. Every news article describing the state of the healthcare system spoke to the heroic work of medics, many of whom were working and sleeping in hospitals and makeshift medical centers at the front lines. Even a year later, medical professionals stationed near Bakhmut describe the continued need to "never let their guard down...as every day is unpredictable with 30 to 45 wounded soldiers arriving." One 59-year-old combat medic summarized it as, "we keep working, and then, well, then I cry."

It is not only Ukrainian medical professionals who are stepping in to provide critical medical support, but also the international community. NYU Langone's Dr. Robert Montgomery has gone on multiple trips to Ukraine, bringing medical supplies and spending weeks training local doctors on the latest transplant

techniques. Every time I hear about Dr. Montgomery's work, an overwhelming wave of gratitude overtakes me. He is putting his own life in harm's way to support the lives of those in need.

"Those in need" is a broad term covering not only Ukrainian civilians and soldiers, but also Russian troops. The provision of medical care to enemy combatants echoes a broader ethical dilemma faced by healthcare providers in times of armed conflict. Since the war began in 2014, Ukraine has experienced disturbing atrocities committed by Russian soldiers and separatist forces, from indiscriminate shelling of civilian areas to torture, rape, and extrajudicial killings, making it particularly difficult for Ukrainian healthcare providers to reconcile the provision of care with the horrors inflicted by invading troops.

Over the past few months of clerkship year, I have frequently thought about the fact that doctors are expected to treat both victims as well as their offenders. In such situations, doctors may feel conflicted about providing care to individuals who are incarcerated and have caused harm to others. Providing medical care to incarcerated individuals can be challenging due to the stigma and negative attitudes that surround this population, much like those relating to care for enemy soldiers after war crimes.

However, it is important to remember that all individuals have a right to medical care, regardless of their past actions or current circumstances – diseases and illnesses do not discriminate based on past actions or current circumstances—whether they be civilian convicts or enemy combatants.

I have been proud of the medical care provided to incarcerated individuals at Bellevue by the medicine teams I am on. I have been proud time and again reading about the care Ukrainian medical professionals are providing to injured Russian troops, even in the midst of a conflict that has caused immense suffering for the Ukrainian people. Ukrainian medical professionals have shown incredible bravery and resilience and remind us of the importance of the integral role healthcare providers play in building a more compassionate and just society, in times of war and peace.

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Katherine Loboda Stone is a third year medical student at New York University Grossman School of Medicine and has been accepted into the three-year accelerated pathway for Internal Medicine. She is passionate about serving older adults and is engaged in geriatrics, gastroenterology, and cardiology research. On campus, she served as the student body president and held leadership roles in the New York City Free Clinic as well as the High Value Care Club. Prior to medical school, Katherine worked as an engagement manager at McKinsey & Company serving healthcare clients, and graduated Magna Cum Laude from Harvard College in 2018 with a degree in statistics. While Katherine is originally from Philadelphia, her family is from and currently lives in Ukraine.



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## News & Awards

### Faculty Honors

**Nany Amoroso, MD** will receive the prestigious Master Clinician Award at Dean's Honors Day.



**Jose Scher, MD** was appointed Director of the Colton Center for Autoimmunity.



**David E. Bernstein, MD** was elected as Trustee to the American Association for the Study of Liver Diseases (AASLD) Foundation.



**Nina Blachman, MD, MHPE** was awarded the David Berg Foundation Fellowship for Geriatric Medicine.



**Simon Hong, MD** was accepted to the American College of Gastroenterology's Early Career Leadership Program, 2023-2024 cohort.



**Violeta B. Popov, MD, PhD** was named to the Advisory Board, Association for Bariatric Endoscopy.



**Andrew Wallach, MD** received the New York BIO COVID Hero Award.

**Renee L. Williams, MD, MHPE** has been appointed Section Editor for the American Society for Gastrointestinal Endoscopy's Self-Assessment Program (GESAP) Diversity, Equity, Inclusion, and Professional Development Section, 2024-2026. She is also the course director for the American Society for Gastrointestinal Endoscopy postgraduate course at the upcoming American College of Gastroenterology's Annual Scientific Meeting and Postgraduate Course, to be held in Vancouver on October 20-25.

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## Grants Awarded

Peter Izmirly/Jill Buyon: Stopping Hydroxychloroquine In Elderly Lupus Disease (SHIELD)

Jill Buyon: NOSI Supplement on Cutting Edge Pain Research: Lupus Omics Cutaneous and Kidney Investigative Team (LOCKIT)

Michael Pillinger/Michael Toprover: Treat-to-Target Serum Urate versus Treat-to-Avoid Symptoms in Gout: A Randomized Controlled Trial (TRUST)

Joshua Chodosh and team: Emergency Departments LEADING the transformation of Alzheimer's and Dementia care (ED-LEAD)

Congratulations to the 2023-24 PrMEIR & IIME Collaborative Grant Recipients:

Omar Moussa, MD (co-PIs: Drs. Marc Triola and Daniel Santori)

Carolyn (Carl) Drake, MD (Co-PI: Dr. Jesse Rafael)

William Small, MD (Co-PI: Dr. Daniel Santori)

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## 2023 Saul Farber/TULA Health Equity Research Award

The recipients of the 2023 Saul Farber/TULA Health Equity Research Award, which provides up to \$10,000 to housestaff engaged in health equity and/or health disparities research within the Department of Medicine, have been announced:

Identifying Barriers to Care in Patients with Inflammatory Bowel Disease

**Awardee: Sharon Klein, MD PGY-3**

Evaluation and Quality Improvement of Rapid Antiretroviral Therapy Linkage for Patients with HIV at Bellevue Hospital

**Awardee Shree Sundaresh, MD PGY3**

Assessment of the Use and Effectiveness of Obesity Pharmacotherapies for Weight Loss and Identifying Racial/ Ethnic Disparities Across Groups

**Awardee: Diana L. Torres Pinzon, MD PGY3**

Impact of Implementing a Dedicated Advanced Heart Failure and Transplant Cardiology Service at Bellevue Hospital Center on Heart Failure Related Outcomes

**Awardee: Erin Flattery, MD PGY6 – Cardiology Fellow**

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## Events & CME

### **Dietary and Lifestyle Strategies for Cardiovascular Risk Reduction**

October 13th

Learn more [here](#)

### **Advancing LGBTQ+ Health in Practice: Updates from Experts with Simulation for Active Learning**

October 13th

Learn more [here](#)

### **Annual Focus on Men's Health 2023**

October 14th

Learn more [here](#)

### **3rd Annual NYU Langone Critical Care Cardiology Symposium**

October 20th-21st

Learn more [here](#)

### **Patient Experience Bookclub:**

#### **What My Bones Know by Stephanie Foo**

October 24th, 12:00-1:00 PM

[Webex](#)

October 26th, 1:00-2:00 PM

[Webex](#)

### **19th Annual Irwin D. Mandel Advances in Cardiovascular Risk Reduction: Improving Treatment for Patients with Diabetes**

December 7th

Learn more [here](#)

### **9th Annual NYU Langone Advanced Seminar in Psoriasis & Psoriatic Arthritis**

December 8th

Learn more [here](#)





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