

September 2025

# INSIDE *Medicine*

The Newsletter of the Department of Medicine

## A Message from the Chair, Steve Abramson

### To Every Thing There Is a Season

As you learned from Dean Kimmelman's recent email, after thirteen years as Chair of the Department of Medicine, and more than a decade as the Director of the Division of Rheumatology, I have decided to step down from the Medicine Chair position after the appointment of my successor. A national search will be led by Dr. Steve Galetta, Chair, Department of Neurology to fill my role as Chair.

It is deeply gratifying to reflect on how, over the past decade, we have collectively elevated the Department of Medicine into one of the premier academic departments in the nation. Our divisions have achieved national distinction across all three missions—clinical care, research, and education—and have been crucial to the historic ascent of NYU Langone under the leadership of Bob Grossman and Ken Langone. Leadership across our Manhattan and Brooklyn campuses has been exemplary, as we've worked with purpose and unity toward our "One Faculty" vision. The dedication and teamwork of our faculty, house staff, and administrative staff have been the cornerstone of this success, and I am profoundly grateful to each of you for your contributions.

I want to extend special recognition to our Vice Chairs—Mark Pochapin, Glenn Fishman, and David Stern—and to Patricia Gaeta, our Senior Department Administrator. Their tireless commitment and leadership have driven excellence across all domains of our mission. I am also proud that members of our department have risen to senior leadership roles over the past decade within NYU Langone, Bellevue and the Dean's Office of Medical Education, extending their talents and influence across the entire enterprise.

So why step aside now, when the department is growing so impressively? Several months ago, I came to a clear conclusion: succession planning is essential to our department's future success. New expertise will be needed to address the rapidly changing advances in medicine and science and the challenges that face

academic medical centers such as ours. To borrow the wisdom of Branch Rickey—the Brooklyn Dodgers executive who signed Jackie Robinson—“Trade a player a year too early rather than a year too late.” It is time to make space for the future.

In the meantime, as the search committee proceeds, we will continue to provide the devoted care, education and research that represent our core values. I have confidence that the department’s momentum and the excellence of each division, campus and every individual will continue to grow.

With gratitude,

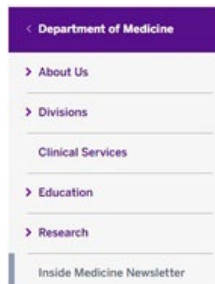
Steve

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issues.

**Inside Medicine  
Newsletter Archive**



## Inside Medicine Newsletter



### Pride Without Complacency: Someone might be gaining on you.

July 2025

New Chief Residents Share Words of Wisdom; Medical Student Summer Research Fellowship Seminar Series; Innovations in Medicine featuring Michael P. Jarugian, MD; Beyond the White Coat featuring Mark B. Pochapin, MD; Humanities and Art in Medicine Program Updates; The Book Report featuring Chidera Ubah on The Poppy War; Faculty QuickTake Video featuring Mark B. Pochapin, MD; Featured Student Essay by Mallory Ehlers



### Whither the White Coat

June 2025

Whither the White Coat: State of the Department and Award Ceremony; Graduation Ceremony Highlights; Department of Medicine 22nd Annual Research Day Symposium at NYU - Washington Square; Incoming Chief Residents Inducted: Reflections from the Outgoing Chief Residents; Innovations in Medicine featuring Steven Lamm, MD; Beyond the White Coat featuring Sunil V. Rao, MD; 2nd Annual TEDxNYU Langone Health Event: Historian Is In - Graduation Address; Faculty QuickTake Video featuring Sunil V. Rao, MD; Featured Student Essay by Felicia Pasadyn

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## Department Welcomes John P. Leonard, MD



**John P. Leonard, MD**

Member of the Faculty, Department of Medicine  
Director, Center for Blood Cancers, Perlmutter Cancer Center  
Division Chief, Hematology and Medical Oncology  
Senior Advisor, to the Dean and Chief Clinical Officer for  
Enterprise Cancer Strategy & Operations

The Department of Medicine is proud to welcome John P. Leonard, MD, as Division Chief of Hematology and Medical Oncology. Dr. Leonard will also serve as Director of the Center for Blood Cancers at the Perlmutter Cancer Center and Senior Advisor to the Dean and Chief Clinical Officer for Enterprise Cancer Strategy & Operations, bringing decades of expertise in lymphoma and blood-cancer care and research to NYU Langone.

In his new role, Dr. Leonard will lead efforts to foster collaboration across divisions and disciplines, advancing innovation in cancer research and strengthening integration between the Department of Medicine and the Cancer Center. His vision includes building multidisciplinary programs in areas such as gastrointestinal and lung cancers, expanding cellular therapies, and enhancing supportive care partnerships.

To drive this work, Dr. Leonard plans to establish working groups and steering committees, host joint meetings, and support pilot grants through philanthropy. He also emphasizes co-mentoring trainees and

junior faculty, underscoring his commitment to breaking down silos to maximize shared success—all with the goal of delivering world-class, integrated, patient-centered cancer care.

Dr. Leonard is an internationally recognized leader in lymphoma research, having led numerous clinical trials and contributing to practice-changing insights in non-hodgkin lymphoma, chronic lymphocytic leukemia, and related conditions. He has authored more than 400 peer-reviewed publications and chairs the Lymphoma Committee for the Alliance for Clinical Trials in Oncology, part of the National Cancer Institute's Clinical Trials Network. His work has helped to shape practice guidelines worldwide and continues to expand access to innovative therapies for patients.

The department looks forward to working with Dr. Leonard to forge new collaborations, expand access to innovative therapies, and enhance the education of our next generation of cancer specialists.

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## The Research Bridge Fund Initiative

### Keeping Research Moving Forward in the Department of Medicine



Exterior photo of NYU Langone's Tisch Hospital

Recent shifts in federal funding policy have created uncertainty for biomedical research, with grant terminations, delays in funding decisions, and a narrowing scope of support from the National Institutes of Health (NIH). These changes pose a challenge to investigators and to the progress of discovery and innovation in medicine. In response, and with the generous support of philanthropic funds—primarily those raised through the Chairman's Circle—the Department of Medicine has launched the Research Bridge Fund Initiative. Designed to provide short-term support for faculty whose programs have been directly affected, the initiative offers up to a year of funding to help researchers regroup, pursue new grants, and continue advancing their impactful work. Glenn I. Fishman, MD, Vice Chair for Research, shares insights into the department's broader research mission, challenges posed by federal policy changes, and how this initiative is supporting faculty across divisions during a pivotal moment for academic medicine.

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#### **Can you tell us overall about the research mission within the Department of Medicine and the importance of its potential impact on the field of medicine?**

By virtue of the many divisions that comprise the Department of Medicine, the scope of research carried out in the department is exceptionally broad – perhaps more so than any other academic unit at NYU Langone Health. Indeed, our faculty are engaged in the full spectrum of investigation – from fundamental discovery research using molecular and cellular biology to identify novel molecules and pathways that are implicated in disease pathogenesis, to clinical trials testing new therapeutic drugs and devices, to population health and implementation science. A unifying theme is that the great majority of investigation

is linked to the diseases we encounter as internists and sub-specialists and making discoveries that ultimately improve the duration and quality of life for the patients we encounter.

**How did the recent change in federal research funding policy affect our research teams and their work, and how did the department's Research Bridge Fund Initiative come to be?**

It goes without saying that the recent changes in federal research funding policies have dramatically changed the landscape for biomedical investigation throughout the country and of course here at NYU Langone Health and our Department of Medicine. Rather than funding decisions being made primarily by peer review, the executive branch has assumed a much larger role in determining what research topics and types of research should be funded. Investigators with emerging or established investigative programs in some of these threatened areas have seen their existing funding abruptly terminated and/or opportunities for future funding dry up. Moreover, the size of the new overall NIH budget remains uncertain – with the executive branch proposing draconian cuts but Congress looking to maintain the budget at levels comparable to the current year. The department has tried to adapt to the new funding landscape in several ways. First, we have taken a fresh look at prioritizing research that we believe is highly impactful. While the definition of “impactful” is arguably quite fuzzy – in this context it includes at least three elements, and likely more: first – does it have the potential to uncover new knowledge about normal biology and disease pathogenesis?; second – does it lead to new approaches for disease diagnosis and treatment?; and third – can it improve healthcare delivery, such that proven therapies can be made more widely available to our patients? The department's bridge fund initiative arose based upon the realization that highly talented investigators – both promising junior faculty and established investigators – were threatened by these funding changes and our goal was to establish a program that will help them survive and adapt. Toward that end, philanthropic funds, primarily those raised through the Chairman's Circle, were allocated for this purpose.

**What are the goals of the Research Bridge Fund Initiative, and what has been the scope of impact thus far?**

The bridge fund initiative was designed for investigators impacted by changes in federal funding policies, allowing them time to regroup and secure new funding within a relatively short period of time (12 months or less). Eligible faculty included those who had been impacted by award termination; mid-award non-renewal; delay in funding decision; and recent well-scored but unfunded applications. To date, the department has funded eight faculty members, which is the majority of those who have applied for support. This includes faculty in multiple divisions and programs that span the gamut from laboratory-based translational research to clinical investigation and data sciences.

**What is the process for researchers who would like to apply for bridge funding? How are the recipients chosen?**

The application process begins at the divisional level, where leaders identify faculty with substantial research effort who may qualify for bridge support. Each case is evaluated on several factors, including career stage, history of funding success, likelihood of obtaining alternative support, and, importantly, the overall impact of the research program. Applications require a biosketch, details of the affected grants, a bridging budget and justification, and a clear plan for resubmission or new applications. Proposals are reviewed on a rolling basis, and given the limited resources available, priority is given to meritorious applications submitted earliest. Our goal is to allocate support where it can have the greatest impact—helping promising and impactful investigators sustain their momentum during this challenging funding environment.

**What outcomes or metrics are being used to evaluate the effectiveness of this initiative?**

The major metric we will track is the success of the investigator in preparing and submitting a new grant application and securing alternative external funding.

**What do you see as the future of the bridge fund initiative, and how does it fit into the department's broader strategy to sustain research momentum?**

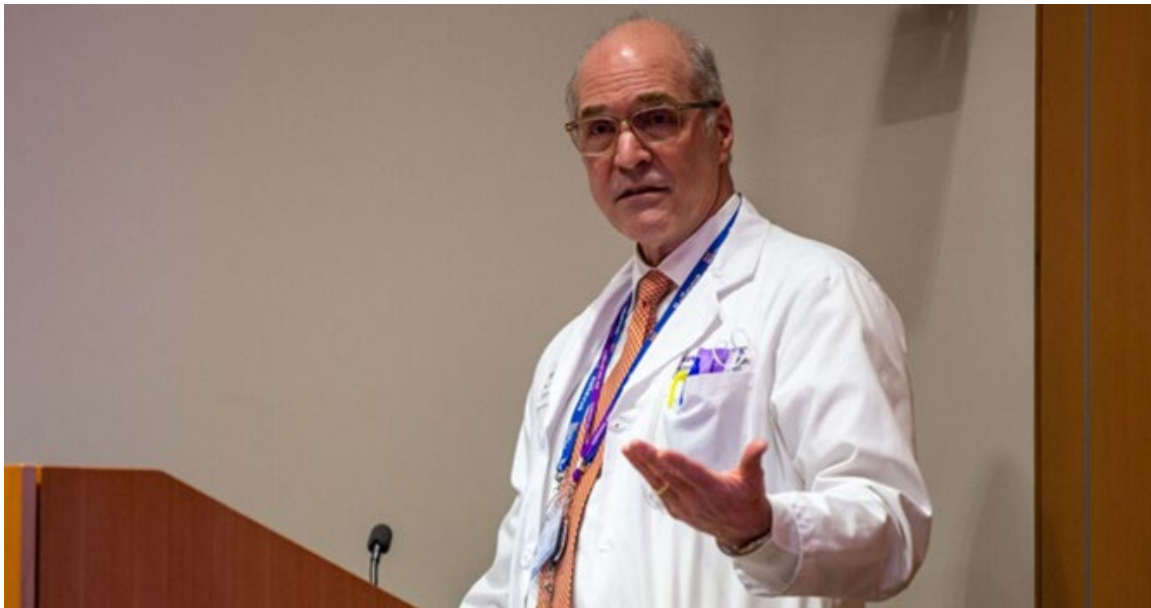
Ideally, the bridge fund initiative will be a temporizing measure that addresses a transient decrease in NIH funding. However, the severity and duration of changes at the NIH are unknown and our current philanthropic support cannot replace lost NIH funding indefinitely. Therefore, if deep funding cuts are sustained, the department will need to consider downsizing and focusing our discretionary resources on what are considered the most impactful and promising research areas, while at the same time exploring alternative funding sources such as industry, venture philanthropy, municipal and state funding, and others.

**What would you say is the take-home message in terms of the Department of Medicine's commitment to our research community and to maintaining scientific progress in medicine?**

Research is a fundamental feature of an academic medical center and central to our mission as a leading Department of Medicine. These clearly are challenging times – perhaps the most challenging I can recall during my four decades as an independent investigator. Nonetheless, as exemplified by our outgoing Dean and CEO, *we need to be pathologically optimistic!* The pendulum will swing back toward the center and the country will once again recognize that biomedical investigation – and the individuals who pursue investigative careers – are national treasures. The Department of Medicine is here to support our stellar faculty as we navigate through these trying times.

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## Retirement of Mark J. Mulligan, MD



Mark J. Mulligan, MD, speaking at an NYU Langone Health vaccine town hall meeting

As we bid farewell to Mark J. Mulligan, MD, who will be retiring as of September 30th, we honor not only his exceptional leadership and dedication to the Department of Medicine and NYU Langone Health, but also the enduring impact he's made on infectious disease research and vaccine innovation.

Dr. Mulligan has served as the Director of the Division of Infectious Diseases and Immunology and Inaugural Director of the Vaccine Center during one of the most challenging periods in the history of modern medicine, where his vision shaped a collaborative hub for clinical, translational, and public health research. He also held the distinguished title of Thomas S. Murphy Sr. Professor in the Department of Medicine.



His pioneering work includes leading groundbreaking trials for COVID-19 and other vaccines that guided global vaccine strategies. Notably, his team contributed key findings to studies on mRNA booster immune responses, mucosal immunity, and the management of infectious outbreaks—insights published in premier journals like the *Journal of Infectious Diseases* and *NPJ Vaccines*.

Dr. Mulligan's impact extends beyond research. As a mentor and educator, he fostered the development of the next generation of scientists and clinicians through dedicated mentorship and an unwavering commitment to scientific excellence.

Thank you, Dr. Mulligan, for your many contributions to our institution, our field, and the patients and communities we serve. Your leadership, scholarship, and humanity have strengthened our department in countless ways. We wish you a fulfilling and joyful retirement, knowing that your legacy will continue to inspire and uplift.

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## Beyond the White Coat

### Plot Twists and Photo Finishes

For a workaholic like me, asking to reveal what else I engage in besides medicine and science is even more challenging than enrolling patients with very rare diseases into studies or designing a complex laboratory experiment that the NIH doubts can be done. So, after sweating bullets and giving this too much thought, I must confess it is my love of grisly psychological thriller novels and my crazy obsession with competitive swimming.

I have been hooked on thriller novels for years and pass these along to our research team, faculty, fellows, students, family and friends – anyone who shows the slightest interest and might be intrigued by my selections. I strive to be the curator of the best of the best in this class of "literature", trying to outguess all the twist endings and competing with fellow readers on predicting big reveals. I will never forget reading "Disclaimer" by Renee Knight simultaneously with a friend, another lupologist who happens to read a lot faster than I. I watched her very visceral reaction of shock while reading a disturbing scene at the end, and she warned me I would be pretty horrified. When I got to the defining chapter, I merely smiled, assuring her it could have been much worse, even though I too had not seen it coming. Nothing written shocks me. When not obsessing over a difficult lupus patient, reviewing experimental results of our research team, or writing grants, or struggling with Epic, I turn to Amazon for a new find and then see if I can get a deal on eBay. Hint, I highly value the reviews of the folks who give the lowest scores which often provide important insights.

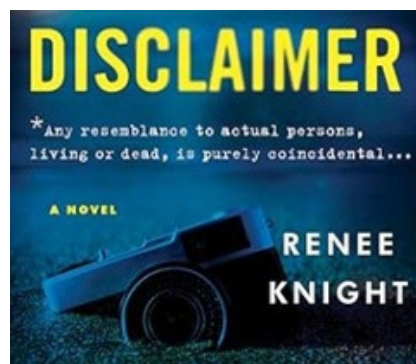
My other beyond-white-coat passion is competitive swimming probably because a) my daughter was an age group and college swimmer up through college, b) it is my favorite event at the Olympics, c) my science husband was a swim meet referee, and d) I have no problem sitting for hours in a chlorinated environment. There is something about watching the swimmers on the blocks and their sheer determination, the fluidity of the strokes and the rush of photo finishes. Nothing beats a close relay. Here I might admit a bit of a cheat regarding beyond-the-white coat as follows. Many of you may know that my translational research is in neonatal lupus and congenital heart block. One day a family came to visit me while vacationing in Manhattan. Their 12-year-old daughter has heart block and a pacemaker. I asked her what she liked, and she said swimming. I asked her if she was good and she beamed, proudly saying she had made Junior Olympics more than once. Next pastime for me: following all her times on the Meet Mobile app. She is quite talented, not hindered in the least by her heart condition. I watch her videos with jaw dropped every time she swims the 200 backstroke. Fate really favored me when my son-in-law became the head swim coach at NYU, and now I spend even more past white coat time engaging as a swimming spectator, obsessing over swim times and predicting whether the outside lane swimmer can pull

an upset. And reading gripping thrillers between heats – almost as exciting as being a translational physician.



**Jill P. Buyon, MD**

Sir Deryck and Lady Va Maughan Professor of Rheumatology  
 Director, Division of Rheumatology  
 Co- Director, Colton Center for Autoimmunity  
 Director, Lupus Center



One of Dr. Buyon's favorite thrillers

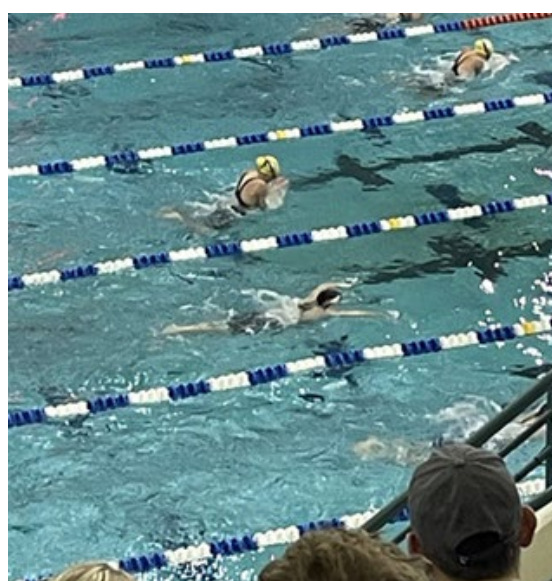


Photo from a recent swim meet that Dr. Buyon attended

## Humanities and Art in Medicine

### Program Updates



The Humanistic Medicine Program is pleased to offer three humanities seminars this fall. These seminars are open to all students, staff, and faculty across the NYU Langone Health community.

**Art and Anatomy:** This 8-session seminar focuses on drawing bones, cadavers, and live models taught by current graphic medicine cartoonist and former massage therapist, Kriota Willberg.

**Exploring Clinical Stories Through Dance:** This 4-session seminar explores patient encounters through dance and the four bodies (physical, social, spiritual, and emotional). This course is co-taught by medical students, dancers, and clinicians.

**Creating a Graphic Medicine Comic:** This 4-session seminar is taught by artist Gianna Paniagua who combines narrative medicine and graphic medicine to tell stories about health, medicine, and experiences of illness through writing and comics.

In addition to the seminars, we are excited to offer three individual workshops, re-start the Literature, Arts, and Medicine Database (LitMed), open our fall 2025 portal for our arts and literary magazine *Agora*, and start a new Humanities Advisory Board for medical students and clinicians to help inform the direction of the program. An outline of our fall semester is shown in the graphic below.

Please email [Jordan.Reif@nyulangone.org](mailto:Jordan.Reif@nyulangone.org) if you would like to be added to our mailing list or get more involved.

If you are interested in the seminars, [please RSVP here](#).

[RSVP to Seminars Here](#)

#### Fall 2025 Programming Schedule

[Seminars](#) | [Workshops](#) | [Other](#)

#### Monthly

- Workshop with Artist-in-Residence, Desmond Beach on the first Monday every month
- Humanities and Wellness Hub one Friday every month
- Music Companionship in Tisch lobby and at patient bedsides

## The Book Report

### *Adam Faye, MD, MS - The Fabric of the Cosmos*

This summer I took a deep dive into physics, exploring a topic that has always fascinated and perplexed me: space and the theory of relativity. For years I've wondered how time can be experienced differently. To pursue this curiosity, I picked up *The Fabric of the Cosmos* by Brian Greene, which explores the hidden architecture of reality, space, time, and the fundamental forces that govern the universe. Greene begins with Newtonian physics (how everyday life works), then delves into the theory of relativity (the space-time continuum), and quantum mechanics (where particles may not exist in one defined place, but rather as a probability of locations).

Although not obvious to me at first, the book's themes resonate with our medical practice. Just as physics seeks to uncover the unseen rules that shape the universe, medicine continually strives to illuminate the hidden mechanisms of the human body and the underlying pathophysiology of disease. Both fields also demand humility in the face of complexity, curiosity to push beyond established knowledge, and rigor to translate abstract theory into practical application.

For all of us in medicine, Greene's work is a reminder that progress comes from questioning assumptions and looking beneath surface appearances. In this sense, *The Fabric of the Cosmos* serves as both an inspiration and a metaphor: our task in medicine is to keep exploring the "fabric" of health with the same wonder, persistence, and openness that physicists bring to the cosmos. In sum, I highly recommend this

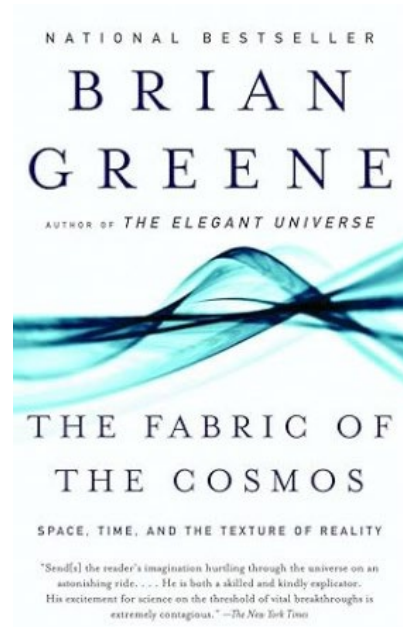


book, not only for the new avenues of thought it inspires, but also as a perfect companion on summer nights outside of NYC, when looking up at the stars can't help but feel a little metaphysical.

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**Adam Faye, MD, MS**  
Assistant Professor, Department of Medicine  
Assistant Professor, Department of Population Health



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## Faculty QuickTake Video

*A brief glimpse into the journeys of those who make our department exceptional.*

*In each QuickTake video, a Department of Medicine member answers a few rapid-fire questions about their path to medicine, their passion for the work, and the advice that's stuck with them.*

**Featured: Jill P. Buyon, MD | Specialty: Lupus**



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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!*

 **Simone Jarrett**  
@SimoneJarrettMD

I am so grateful to be completing my fellowship training at not only the #1 hospital in NY but also #4 in the country for GI!! How amazing is that? I absolutely adore my co-fellows & faculty, and it's a true privilege to provide the highest quality of care to our patients 🥰🌟🌟

**Ranked #1 in New York  
for GI and GI Surgery  
and #4 in the U.S.**

 **NYU Department of Medicine** @NYULH\_DeptMed · Jul 29 · Promote

We're proud to share that the Department of Medicine is home to six top-10 ranked specialties in the U.S., according to @usnews 2025-2026 "Best Hospitals" rankings, released today! Congratulations to our faculty, house staff, & staff across the department whose dedication to excellence ensures the very best care for our patients each and every day. Thank you all for your exceptional commitment to teach, to discover, to care. #USNWR #BestHospitals #TopHospitals #NYULangoneHealth #TheBestOutcomes

Learn more about the rankings: [nyulangone.org/news/nyu-langone-health-ranked-top-10-specialties](https://nyulangone.org/news/nyu-langone-health-ranked-top-10-specialties)

**Six Top 10-Ranked Specialties  
in the Department of Medicine**



- No. 1 - Pulmonology & Lung Surgery
- No. 1 - Cardiology, Heart & Vascular Surgery
- No. 1 - Geriatrics
- No. 4 - Diabetes & Endocrinology

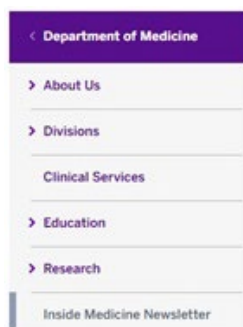


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### Pride Without Complacency: Someone might be gaining on you.

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### 183 and Counting

May 2025

Internal Medicine Residency Advising Reception; 3-Year Pathway & Summer Research Fellowship Alumni Career Night; The Empathy Project; CME Highlight featuring Asthma, Airways, and Environment Symposium; Innovations in Medicine featuring Jennifer M. Reckrey, MD; Beyond the White Coat and Faculty QuickTake Video featuring Sapna Mehta, MD; Featured Student Essay by Abigail Korenek



### See One, Do One, Teach One

April 2025

Shaping the Future of Medicine: Alec C. Kimmelman, MD, PhD, Appointed Chief Executive Officer of NYU Langone Health and Dean of NYU Grossman School of Medicine; Healthcare Policy Headwinds; Match Day 2025; 4th Annual Hospital Medicine Symposium; CME Highlight featuring the NYU Langone Health Seminar in Advanced Rheumatology; Innovations in Medicine featuring Anoma Nellore, MD; Humanities and Art in Medicine; Featured Student Essay by Jeffrey Park

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## Featured Student Essay

### *Clerkship Award for Outstanding Essay in Medical Humanism*

### **The Role of Total Body MRI Screening for the Average Adult**

I have a close friend who is not in medicine, but like myself is into Formula One and being a generally healthy person. He put me onto a book called *Outlive: The Science and Art of Longevity*. The author is Peter Attia, who embodies Formula One (he named his kid Ayrton) and health far more deeply than either of us. My curiosity was piqued, who doesn't want to live longer? In his book, he explores several themes of preventative medicine, one of them being to aggressively screen for cancer using MRI, which was thought-provoking.

Clearly, being able to feasibly and reliably detect tumors at an early stage would significantly improve cancer survival rates. A convincing example in imaging is mammography, a well-established method of screening for breast cancer. A recent assessment by the United States Preventive Services Task Force (USPSTF) demonstrated that biennial screening in patients aged 40-74 had a moderate net benefit.<sup>1</sup> This prompted the USPSTF to lower the recommended starting age for breast cancer screening from 50 to 40. Notably, within the last few years, there have been similar changes in the USPSTF recommendations in favor of earlier screening for other cancers such as prostate and colon cancer.

Extending surveillance imaging to total body screening is a different story. According to the American College of Radiology, “to date, there is no documented evidence that total body screening is cost-efficient or effective in prolonging life.” Imaging by way of CT to screen for cancer is not recommended in average-risk adults given that it subjects patients to ionizing radiation, paradoxically increasing their risk of cancer. A recent study even suggests that with our current CT utilization, CT imaging will eventually account for 5% of new cancer diagnoses annually.<sup>2</sup>

MRI screening on the other hand has no risk of ionizing radiation, but it is unclear if full body MRI screening is a viable option for cancer screening. MRI can detect several cancers as well as pulmonary nodules (>1 cm) with remarkably high sensitivity.<sup>3-8</sup> In this case, is it better to be safe than sorry? The caveat with that argument is that the patient is subjected to an increased risk of finding “incidentalomas”, incidental findings that are generally benign but may cause distress to the patient. For instance, in the thyroid, MRI may detect a nodule or an indolent thyroid tumor which are clinically insignificant. However, this may cause extreme distress for the patient or prompt unnecessary intervention.<sup>9</sup> These responses likely stem from the fact that MRIs give a single snapshot in time, without any information about the aggressiveness of the tumor. Instead of not doing any imaging, Dr. Daniel Sodickson of NYU envisions more frequent MRI screening over time to establish longitudinal monitoring, giving us information about tumor growth velocity.<sup>5</sup> Frequent MRI screening can be incredibly expensive and there have been no studies to show whether there is a cost-benefit to doing total body MRI screening. With advancements in MRI technology that will be bolstered with concomitant advancements in AI technology, I expect that the costs of MRI will significantly reduce in the coming years. In addition, techniques such as diffusion-weighted MRI or combining MRI with PET scans can improve the specificity of MRI in detecting a carcinoma. Although the cost-benefit has not been assessed, I am hopeful that just as with screening for other cancers, total body MRI screening will provide increasing value and be more extensively utilized.

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**Jasper Du** is a seventh-year MD/PhD student at NYU Grossman School of Medicine. He graduated from Tufts University in 2017, where he studied biochemistry. During his PhD, he worked to elucidate the underlying mechanisms of how immune checkpoint receptors inhibit T cells. This year he is applying into diagnostic radiology with a specific interest in oncologic imaging. In his free time, Jasper enjoys trying new recipes in the kitchen, growing plants, and slow Sunday afternoons watching TV on the couch with his wife Tiffany and cat Appa.



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## News & Awards

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### Faculty Honors

#### *Holman Division of Endocrinology, Diabetes, and Metabolism*



**Michael A. Weintraub, MD**, was selected as Faculty Chair of the grant-funded *New England Journal of Medicine* obesity program series: *Advancing Obesity Care: Leveraging Evidence-Based Medicine and Shared Decision-Making for Effective Weight Management*, launching this fall.

#### *Division of Environmental Medicine*



**George D. Thurston, ScD**, was selected as Co-Chair of the Policy Committee of the International Society for Environmental Epidemiology.



**Arul Veerappan, PhD**, was selected as Vice President of the Mid-Atlantic Chapter of the Society of Toxicology.





**Judith T. Zelikoff, PhD**, received the Achievement Award in Inhalation and Respiratory Toxicology by the Society of Toxicology.

#### **Division of General Internal Medicine & Clinical Innovation**



**Elaine De Leon, MD**, along with Cristina M. Gonzalez, MD, and Tavinder Ark, PhD, has been awarded a National Board of Medical Examiners Stemmler Grant. Their project: *Novel Assessment Tool for Physician Communication Skills Related to Racial Implicit Bias: AI “Coach” in the Exam Room* seeks to develop an assessment tool for providing near-real-time feedback to physicians on their communication skills.

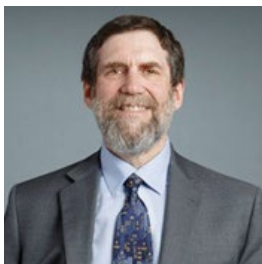


**Cristina M. Gonzalez, MD**, along with Elaine De Leon, MD, and Tavinder Ark, PhD, has been awarded a National Board of Medical Examiners Stemmler Grant. Their project: *Novel Assessment Tool for Physician Communication Skills Related to Racial Implicit Bias: AI “Coach” in the Exam Room* seeks to develop an assessment tool for providing near-real-time feedback to physicians on their communication skills.



**Melanie R. Jay, MD**, is featured as an Editor's Pick in her TEDx Talk on the TEDx YouTube channel: In her TEDxNYU Langone Health talk, Dr. Jay explores how groundbreaking obesity treatments—and a shift from stigma to science—are changing the future of care. View her TEDx Talk [here](#).

#### **Division of Nephrology**



**David S. Goldfarb, MD**, was named Chair of the Sustainability Program Committee of the American Society of Nephrology.



**Jennifer S. Scherer, MD**, was selected to be part of the American Society of Nephrology Kidney Health Guidance Conservative Kidney Management Work Group.

#### **Division of Pulmonary, Critical Care & Sleep Medicine**



**Rashmi N. Aurora, MD**, was selected for the Sleep and Respiratory Neurobiology Executive Committee of the American Thoracic Society. She will also be the keynote speaker for the New York State Gynecology Society meeting in September.



**Deepak R. Pradhan, MD, MHPE**, was selected as the recipient of the 2026 CHEST/APCCMPD Medical Educator Diversity Scholar Fellowship Mentor Award.

## Promotions

### *Division of Pulmonary, Critical Care & Sleep Medicine*



**Rashmi N. Aurora, MD**, Clinical Associate Professor of Medicine



**Matthias C. Kugler, MD**, Associate Professor of Medicine



**Leopoldo N. Segal, MD**, William Rom and David Kamelhar Professor of Medicine with Tenure

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## Upcoming Events & CME

### **CME: Hypertrophic Cardiomyopathy - Comprehensive Management of a Complex Disease; a Case-Based Symposium**

September 12, 7:40am – 5:30pm

*Details and registration link [here](#)*

### **CME: Advances in the Diagnosis and Treatment of Amyloidosis**

September 18, 7:45am – 5:30pm

*Details and registration link [here](#)*

### **10th Annual Colton Center Symposium and Philip K. Moskowitz, MD Lecture**

September 19, 2:00pm – 4:45pm

*Details and registration link [here](#)*

### **CME: Big Gut Seminars: Focus on Complex Liver Disease**

September 20, 7:30am – 4:45pm

*Details and registration link [here](#)*

### **CME: 2nd International VEXAS Workshop: From Cellular & Biochemical Mechanisms to Therapies**

September 25-26, 7:30am – 4:45pm

*Details and registration link [here](#)*

### **CME: New York Point-of-Care Ultrasound**

October 6-7, 7:00am – 6:00pm

*Details and registration link [here](#)*

### **CME: 10th Annual Dietary and Lifestyle Strategies for Cardiovascular Risk Reduction**

October 10, 7:30am – 4:40pm

*Details and registration link [here](#)*

### **CME: The 5th Annual NYU Langone Critical Care Cardiology Symposium**

October 17-18, 7:00am – 6:00pm

*Details and registration link [here](#)*

### **CME: NYU Langone Health's Annual Focus on Men's Health 2025**

October 18, 7:45am – 4:05pm

*Details and registration link [here](#)*

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## Select Publications

### ***Leon H. Charney Division of Cardiology***

Tompkins R, Venkatesh P, **Small AJ**, Halpern DG. Lifelong care of females with congenital heart disease. *Circ Res*. 2025 Mar 14;136(6):553-565. doi: [10.1161/CIRCRESAHA.124.325596](#). Epub 2025 Mar 13. PMID: 40080536.

**Slater J**, Maron DJ, Jones PG, **Bangalore S**, Reynolds HR, Fu Z, Stone GW, Kirby R, **Hochman JS**, Spertus JA; ISCHEMIA Research Group. Evaluating the appropriate use criteria for coronary revascularization in stable ischemic heart disease using randomized data from the ISCHEMIA trial. *Circ Cardiovasc Qual Outcomes*. 2025

Mar;18(3):e010849. doi: [10.1161/CIRCOUTCOMES.124.010849](https://doi.org/10.1161/CIRCOUTCOMES.124.010849). Epub 2025 Feb 26. PMID: 40008421.

**Massera D, Sherriid MV**, Scheinerman JA, Swistel DG, **Razzouk L**. Medical, surgical, and interventional management of hypertrophic cardiomyopathy. *Circ Cardiovasc Interv*. 2025 Mar;18(3):e014023. doi: [10.1161/CIRCINTERVENTIONS.124.014023](https://doi.org/10.1161/CIRCINTERVENTIONS.124.014023). Epub 2025 Feb 10. PMID: 39925290.

#### **Holman Division of Endocrinology, Diabetes & Metabolism**

**Vanegas SM**, Curado S, Zhou B, Illenberger N, **Merriwether EN**, **Armijos E**, **Schmidt AM**, Ren-Fielding C, Parikh M, Elbel B, **Alemán JO**, **Jay M**. Variations in weight loss and glycemic outcomes after sleeve gastrectomy by race and ethnicity. *Obesity (Silver Spring)*. 2025 Jun 16. doi: [10.1002/oby.24320](https://doi.org/10.1002/oby.24320). Epub ahead of print. PMID: 40524421.

**Barua S**, **Upadhyay D**, Berube LT, Popp CJ, Curran M, Pompeii ML, Hu L, **Aleman JO**, **Bergman M**, Sevick MA. Weight loss is associated with improved daytime time in range in adults with prediabetes and non-insulin-treated type 2 diabetes undergoing dietary intervention. *Diabet Med*. 2025 Aug;42(8):e70052. doi: [10.1111/dme.70052](https://doi.org/10.1111/dme.70052). Epub 2025 Jun 3. PMID: 40460001.

Zheng Y, **Iturrate E**, Li L, Wu B, **Small WR**, **Zweig S**, Fletcher J, Chen Z, Johnson SB. Classifying continuous glucose monitoring documents from electronic health records. *J Diabetes Sci Technol*. 2025 Mar 12;19322968251324535. doi: [10.1177/19322968251324535](https://doi.org/10.1177/19322968251324535). Epub ahead of print. PMID: 40071848; PMCID: PMC11904921.

#### **Division of Environmental Medicine**

**Yu W**, **Thurston GD**. Reductions in respiratory hospital visits after a coal coking plant closure: A natural experiment. *Am J Respir Crit Care Med*. 2025 Jul 21. doi: [10.1164/rccm.202410-2005OC](https://doi.org/10.1164/rccm.202410-2005OC). Epub ahead of print. PMID: 40691837.

**Thurston GD**, Andersen ZJ, Belesova K, Cromar KR, Ebi KL, Lumsden C, de Nazelle A, Nieuwenhuijsen M, Soares da Silva A, Teixidó O, Rice MB. Transitioning from climate ambitions to climate actions through public health policy initiatives. *Environ Epidemiol*. 2025 Mar 6;9(2):e373. doi: [10.1097/EE9.0000000000000373](https://doi.org/10.1097/EE9.0000000000000373). PMID: 40060026; PMCID: PMC11888974.

#### **Division of Gastroenterology and Hepatology**

**Gross SA**. Scoping the future: what endoscopists really think about artificial intelligence. *Gastrointest Endosc*. 2025 Aug;102(2):170-171. doi: [10.1016/j.gie.2025.04.023](https://doi.org/10.1016/j.gie.2025.04.023). PMID: 40670015.

Wilson N, Bilal M, Westanmo A, Karna R, Gravely A, **Shaukat A**. Post-colonoscopy colorectal cancer in fecal immunochemical test-positive individuals: prevalence, predictors, and root-cause analysis in a nationwide cohort. *Am J Gastroenterol*. 2025 Jul 7. doi: [10.14309/ajg.00000000000003635](https://doi.org/10.14309/ajg.00000000000003635). PMID: 40622402. Online ahead of print.

Crosby TW, Lebowitz J, Balou S, Ezech UC, **Khan A**, **Knotts R**, **Chablaney S**, Kwak PE, Amin MR. Correlation of the VFSS esophageal screen to high-resolution esophageal manometry. *Laryngoscope*. 2025 Jul;135(7):2283-2290. doi: [10.1002/lary.32157](https://doi.org/10.1002/lary.32157). PMID: 40156431.

#### **Division of General Internal Medicine and Clinical Innovation**

Gonzalez CJ, Perez-Mejia CN, Hernandez N, Flaxman H, Stephenson-Hunter C, Gil E, **De Leon E**, Formagini T, Chambers EC, Shapiro MF, Gonzalez JS. Engagement in the national diabetes prevention program among hispanic men. *JAMA Netw Open*. 2025 Jun 2;8(6):e2515046. doi: [10.1001/jamanetworkopen.2025.15046](https://doi.org/10.1001/jamanetworkopen.2025.15046).

PMID: 40531536; PMCID: PMC12177656.

Ladapo JA, **Orstad SL**, Sheer AJ, Tseng CH, Rebecca Chung UY, Shu SB, Goldstein NJ, **Jay M**, Wali S. Association between sociodemographic characteristics and weight loss in a financial incentive intervention for adults with obesity living in low-income neighborhoods. *Am J Health Promot*. 2025 Jun 10:8901171251348223. doi: [10.1177/08901171251348223](https://doi.org/10.1177/08901171251348223). Epub ahead of print. PMID: 40493360.

Bihuniak JD, Byer A, Simpson CA, Sullivan RR, Dudzik JM, Insogna KL, **Beasley JM**. Protein supplementation, plasma branched-chain amino acids, and insulin resistance in postmenopausal women: an ancillary study from the supplemental protein to outsmart osteoporosis now (SPOON) trial. *Nutrients*. 2025 Jun 25;17(13):2104. doi: [10.3390/nu17132104](https://doi.org/10.3390/nu17132104). PMID: 40647209; PMCID: PMC12250933.

#### **Division of Geriatric Medicine and Palliative Care**

**Jang C, Seecof OM, Georgia A**. Impaired decision-making capacity in a patient with oral squamous cell carcinoma: weighing the benefits and harms of treatment against objection. *J Palliat Care*. 2025 Oct;40(4):275-296. doi: [10.1177/08258597251339870](https://doi.org/10.1177/08258597251339870). Epub 2025 Jun 3. PMID: 40458845.

David D, Jimenez V, **Brody AA**. Primary palliative care in assisted living and residential care: a metasynthesis. *J Hosp Palliat Nurs*. 2025 Aug 1;27(4):182-194. doi: [10.1097/NJH.0000000000001121](https://doi.org/10.1097/NJH.0000000000001121). Epub 2025 Mar 12. PMID: 40072876.

Groom LL, Schoenthaler AM, Budhrani R, Mann DM, **Brody AA**. Patient utilization of remote patient monitoring in a pilot implementation at a federally qualified health center. *Telemed J E Health*. 2025 Jul 29. doi: [10.1177/15305627251362373](https://doi.org/10.1177/15305627251362373). Epub ahead of print. PMID: 40735809.

#### **Division of Hospital Medicine**

**Rabinowitz R, Drake CB, Talan JW, Nair SS, Hafiz A, Andriotis A, Kogan R, Du X, Li J, Hua W, Lin M, Kaufman BS**. Just-in-time simulation training to augment overnight ICU resident education. *J Grad Med Educ*. 2024 Dec;16(6):713-722. doi: [10.4300/JGME-D-24-00268.1](https://doi.org/10.4300/JGME-D-24-00268.1). Epub 2024 Dec 13. PMID: 39677310; PMCID: PMC11641875.

**Wang E, Samaroo A, Weisstuch J, Rudy B**. The use of a single risk assessment tool for mortality and numerous hospital-acquired conditions. *J Healthc Qual*. 2024 Nov-Dec 01;46(6):370-379. doi: [10.1097/JHQ.0000000000000456](https://doi.org/10.1097/JHQ.0000000000000456). Epub 2024 Oct 15. PMID: 39405523.

**Drake CB, Rhee DW, Panigrahy N, Heery L, Iturrate E, Stern DT, Sartori DJ**. Toward precision medical education: Characterizing individual residents' clinical experiences throughout training. *J Hosp Med*. 2024 Aug 5. doi: [10.1002/jhm.13471](https://doi.org/10.1002/jhm.13471). Epub ahead of print. PMID: 39103985.

#### **Division of Infectious Diseases and Immunology**

Oot A, Kapadia F, Moore B, **Greene RE, Katz M, Denny C, Pitts R**. A mixed-methods evaluation of an HIV pre-exposure prophylaxis educational intervention for healthcare providers in a NYC safety-net hospital-based obstetrics and gynecology clinic. *AIDS Care*. 2024 Oct;36(10):1537-1544. doi: [10.1080/09540121.2024.23642](https://doi.org/10.1080/09540121.2024.23642). Epub 2024 Jun 29. PMID: 38943674.

#### **Division of Nephrology**

**Charytan DM, Moss AH, Shalak M, Wu W, Dember LM, Hsu JY, Kuzla N, Esserman D, Kalim S, Kimmel PL, Lockwood MB, Miyawaki N, Pellegrino B, Pun PH, Qamhiyeh R, Scherer J, Schrauben S, Weiner DE, Mehrotra R; HOPE Consortium**. Fall risk in maintenance hemodialysis patients: a secondary analysis of the



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**Krieger A**, Zaidan N, **Zhao P**, **Borin JF**, **Goldfarb DS**. Questionable role of opioids for analgesia in renal colic and its urological interventions. *BJUI Compass*. 2025 Jun 11;6(6):e70038. doi: [10.1002/bco2.70038](https://doi.org/10.1002/bco2.70038). PMID: 40503371; PMCID: PMC12152362.

**Jaber K**, **Zaidan N**, **Ho M**, **Xiong X**, **Mishra R**, **Nair A**, **Mishra A**, Chu Y, Mokadem M, **Nazzal L**. Spontaneous ileitis and post-surgical murine models of enteric hyperoxaluria. *Am J Physiol Gastrointest Liver Physiol*. 2025 Apr 15. doi: [10.1152/ajpgi.00043.2025](https://doi.org/10.1152/ajpgi.00043.2025). Epub ahead of print. PMID: 40235154.

#### **Division of Precision Medicine**

Gambi G, Boccalatte F, Rodriguez Hernaez J, **Lin Z**, **Nadorp B**, Polyzos A, Tan J, Avrampou K, Inghirami G, Kentsis A, Apostolou E, Aifantis I, **Tsirigos A**. 3D chromatin hubs as regulatory units of identity and survival in human acute leukemia. *Mol Cell*. 2025 Jan 2;85(1):42-60.e7. doi: [10.1016/j.molcel.2024.11.040](https://doi.org/10.1016/j.molcel.2024.11.040). Epub 2024 Dec 23. PMID: 39719705.

**Mehta SS**, **Surapaneni AL**, **Pandit K**, Xu Y, **Horwitz L**, **Blecker S**, Blum MF, Chang AR, Shin JI, **Grams ME**. Glucagon-like peptide-1 receptor agonist and sodium-glucose cotransporter 2 inhibitor prescriptions in type 2 diabetes by kidney and cardiovascular disease. *J Am Soc Nephrol*. 2024 Nov 27. doi: [10.1681/ASN.0000000585](https://doi.org/10.1681/ASN.0000000585). Epub ahead of print. PMID: 39688374.

Xu Y, Shin JI, Wallace A, Carrero JJ, Inker LA, **Mukhopadhyay A**, **Blecker SB**, **Horwitz LI**, **Grams ME**, Chang AR. Shortfalls in follow-up albuminuria quantification after an abnormal result on a urine protein dipstick test. *Ann Intern Med*. 2024 Nov;177(11):1593-1595. doi: [10.7326/ANNALS-24-00549](https://doi.org/10.7326/ANNALS-24-00549). Epub 2024 Oct 1. PMID: 39348706.

#### **Division of Pulmonary, Critical Care, and Sleep Medicine**

**Wong KK**, **Wu BG**, Chung M, **Li Q**, **Darawshy F**, **Tsay JJ**, **Holub M**, **Barnett CR**, **Kwok B**, **Kugler MC**, **Chung C**, **Natalini JG**, **Singh S**, **Li Y**, **Schluger R**, Ficaro L, **Carpenito J**, **Collazo D**, **Perez L**, **Kyeremateng Y**, **Chang M**, **Czachor A**, **Singh R**, **Mccormick C**, Campbell CD, Keane R, Askenazi M, Hansbro PM, **Weiden MD**, Huang YJ, Stringer KA, Clemente JC, Li H, Jones D, Ghedin E, **Segal LN**, **Sulaiman I**. Microbial contribution to metabolic niche formation varies across the respiratory tract. *Cell Host Microbe*. 2025 Jul 9;33(7):1073-1088.e6. doi: [10.1016/j.chom.2025.06.002](https://doi.org/10.1016/j.chom.2025.06.002). Epub 2025 Jun 26. PMID: 40578342.

**Kim DH**, **Podury S**, **Fallah Zadeh A**, **Mahmoodi T**, **Kwon S**, **Grunig G**, Liu M, **Nolan A**. Gastroesophageal disease risk and inhalational exposure a systematic review and meta-analysis. *Sci Rep*. 2025 Jul 2;15(1):22581. doi: [10.1038/s41598-025-06620-7](https://doi.org/10.1038/s41598-025-06620-7). PMID: 40593094; PMCID: PMC12218983.

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#### **Division of Rheumatology**

**Toprover M**, **Shah B**, **Drenkova K**, **Leonard A**, **Pillinger MH**, **Garshick M**. Endothelial cell and neutrophil activation in untreated intercritical patients with gout. *J Rheumatol*. 2025 Jul 1:jrheum.2025-0255. doi: [10.3899/jrheum.2025-0255](https://doi.org/10.3899/jrheum.2025-0255). Epub ahead of print. PMID: 40592554; PMCID: PMC12225606.

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**Reddy SM**, Adhikari S, **Scher JU**. Burden and determinants of multi-b/tsDMARD failure in psoriatic arthritis. *Arthritis Res Ther*. 2025 Mar 4;27(1):46. doi: [10.1186/s13075-025-03518-7](https://doi.org/10.1186/s13075-025-03518-7). PMID: 40038720; PMCID: PMC11877731.

**Scher JU**, Nayak R, Clemente JC. Microbiome research in autoimmune and immune-mediated inflammatory diseases: lessons, advances and unmet needs. *Ann Rheum Dis*. 2025 Jan;84(1):9-13. doi: [10.1136/ard-2024-225735](https://doi.org/10.1136/ard-2024-225735). Epub 2025 Jan 2. PMID: 39874238; PMCID: PMC11822223.

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