



# Scoop

Aug. 9, 2002

THE UNIVERSITY OF TEXAS MEDICAL SCHOOL AT HOUSTON

## Events to Know

### August

#### 9 Doctors Orchestra of Houston

will hold auditions for new String members, 4:30 - 6:30 p.m. For information e-mail <llebel@flash.net> or call 713-842-1520.

#### 14 Clinical Research Curriculum,

Scientific Writing Course, "Publishing Ethics and Authorship," presented by Walter Pagel, UT M. D. Anderson Cancer Center, MSB 2.135, 5-6:30 p.m.

## UTMost Interest

**Dr. Kevin Morano**, Microbiology and Molecular Genetics, will be an invited speaker at the Inaugural Conference on the Hsp90 Molecular Chaperone Machine, being held Aug. 24 - 28 in Arolla, Switzerland.

## CHANGE OF ADDRESSES

Offices of the Dean, Community Affairs and Public Education, Continuing Medical Education, Alumni Affairs, and the Offices of Educational Programs and Graduate Medical Education, have moved to the Jesse Jones Library. The Dean's offices are located in JJL 410; the main number is 713-500-5010. Community Affairs and Public Education is located in JJL 400; the main number is 713-500-5109. Continuing Medical Education is located in JJL 450; the main number is 713-500-5249. Alumni Affairs is located in JJL 450; the main number is 713-500-5121. The Office of Educational Programs is located in JJL 304; the main number is 713-500-5140. The Office of Graduate Medical Education is located in JJL 310; the main number is 713-500-5151.

All phone numbers and FAX numbers remain the same.



## WHITE COAT CEREMONY MARKS BEGINNING OF CLASS OF 2006

The White Coat Ceremony for the Medical School's Class of 2006 will take place at 6:30 p.m., Wed., **Aug. 14**, at the Edwin Hornberger Conference Center, 2151 W. Holcombe Blvd.. Approximately 200 new students will sign an ethical pledge and take the Oath of Hippocrates. Students will don their white coats for the first time, representing the first milestone in their quest to become physicians dedicated to excellent patient care.

**Dr. Oscar Rosales**, medical director of the Coronary Care Unit at Memorial Hermann Hospital, will be the keynote speaker. He is the 2002 recipient of the Healthcare Foundation of New Jersey Award for Humanism in Medicine. **Dean Max Buja** said the event is an opportunity for faculty to welcome new students, enlist them as colleagues in the medical profession, and challenge them to live up to the high standards of the doctor-patient relationship and service to the community. - **M. R. Middleton**

## SUMMER PROGRAM ON CHILDHOOD INJURIES WRAPS UP

The Office of Community and Educational Outreach, in partnership with the Department of Emergency Medicine at LBJ Hospital, presented a five-week summer safety program for children at Harris County and Houston Public Libraries. The program, called CHIPS (Childhood Injury Prevention Services), included a videotape, a memory game, and a coloring book featuring "Chips," a cartoon character created by **Marjorie Lygas**, nursing trauma coordinator at Memorial Hermann Hospital. Over 300 children and 53 adults from the Houston area participated in the program.



**Martha Molina and Alvaro Moreno** (in "Chips" costume), help Houston children learn safety rules this summer.

The objectives of the program are to increase awareness of safety measures among young children and to reduce the high incidence of preventable childhood injuries seen in area hospitals. Such injuries often occur in the car and around the household. They include auto fatalities, often due to lack of adequate seatbelt protection; head injuries from bicycle accidents, due to lack of helmet protection; gunshot wounds; ingestion of toxic substances; and accidental drownings.

The program was coordinated by **Liliana Rodriguez**, MPH, director of special projects, Community and Educational Outreach, and **Dr. Christine Koerner**, assistant professor of emergency medicine, and presented by **Martha Maria Molina**, first-year medical student. **Alvaro Moreno II**, a first-year medical student from UTMB, played the "Chips" character.

"The program was a big success in teaching children about safety issues; Martha and Alvaro did a wonderful job," Dr. Koerner said. "We are planning to continue collaboration and would like to take this program to elementary schools in the fall. We also would like to work with the nursing trauma coordinators across the state to bring CHIPS to other Texas hospitals."



The University of Texas

Health Science Center at Houston

Medical School

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*Faculty Profile***DR. TERRI MAJOR-KINCADE ASSISTS OUR LITTLEST SURVIVORS**

**Terri Lynn Major-Kincade, M.D., M.P.H.**, assistant professor in the Department of Pediatrics, Division of Neonatal-Perinatal Medicine, was a prominent feature on the recent six-part TV series, *Houston Medical*. She also is directly involved with the day-to-day care of up to 80 tiny critically ill infants in Memorial Hermann Children's Hospital's Neonatal Intensive Care Unit (NICU)—one of only two Level III nurseries in the Texas Medical Center. Highly technical services are provided, including heart monitors, feeding tubes, and Extra Corporeal Membrane Oxygenation (ECMO), the latter for babies with severe respiratory distress.

Taking care of acutely ill newborns is the stuff not only of high-tech medicine but also of legal and ethical questions, and, in some cases, science fiction. Infants weighing less than 1-lb. are often born with a host of problems, including brain or lung damage, infection, the inability to swallow, pneumonia, high blood pressure, or diabetes. The 1983 case of Baby Jane Doe, a Long Island infant born with spina bifida and hydrocephalus, set off a host of ethical questions involving the treatment of seriously ill or disabled newborns. Twenty years ago, saving the life of a 3-lb. newborn was considered doable. Today, infants as low as a 1.5 lb., 22 to 24 weeks gestation, and in some cases, lower, can be helped thanks to the wonders of technology. It's anybody's guess how far the bar will be lowered. "It's incredible," Kincade said. "Twenty years from now I envision three-month old babies in a giant aquarium with a huge mechanical amniotic sac."

But right now, infants in the NICU, with crib covers and in some cases ear plugs, to encourage them to sleep soundly, have an optimal survival rate if they're born 2.5-3 lbs. (1,000-1,500 grams). Their chances are less optimal if they're born 1.5-2 lbs. at birth. The survival rates for preemies are largely related to delivery in a center with a Level III NICU and a highly skilled maternal fetal medicine staff.

"What a difference a few ounces, and a few more gestation weeks make," Kincade said. "Sometimes the mother miscalculates her missed menstrual date. But in a best case scenario, if we see the baby at 26 to 28 weeks gestation, say in September, then that baby normally will go home at their full-term delivery date in December. We celebrate when the NICU babies move on up to the clinic; they're on their way at that point."

An annual graduation celebration for the NICU babies who've reached the age of 2 includes four gifts: a baby T-shirt that says "I was a tiny tot and I graduated from NICU," a canvas tote bag for the mother with a picture of the infant, a Target or Wal-Mart gift certificate, and validated parking. "I have two children of my own, Stevi Nicole, age 4, and Terrence Youngblood (a.k.a. Ty), age 2, said Kincade. "I can really relate to the parents of my high-risk babies. When my child gets a cold, or a fever, I'm like a mother bear; I want relief for them now. I think a big part of my career passion comes from a feeling of connection with these parents; as a parent myself, I know what they're going through."

Not all babies survive. "Medical school training really doesn't prepare you for death," she said. "After all, we come into the field because we want to *save* lives." Sometimes it's just as courageous, Kincade said, for a parent to say goodbye to their preemie, who they know doesn't have a chance, as it is to hold out hoping that the baby will live. "The baby cemetery in Pearland is really touching," Kincade said, who's been asked to speak on "Grief, Bereavement, and Loss" at Baylor College of Medicine's Compassion and the Art of Medicine lecture series. "You see fire trucks, teddy bears, choo choo trains, and dolls—left by parents at their baby's burial site."

Kincade has one sister and two brothers and grew up in Baton Rouge. What got her involved in her specialty was the low birth weight of her sister, Bridgette Annisa, who is 10 months her junior. Bridgette Annisa was born a "robust" 2 lbs., in 1968. "My sister is 4 ft., 8 inches, and we often kid her that back when she was born, they fed preemies condensed milk, and that's why she's so tiny," Kincade said.

Kincade earned her medical degree at UCLA School of Medicine. She earned her MPH, she said, because she wanted to solve the question of why African American women have such high incidences of infant mortalities—higher than even some Third World countries. "We still haven't solved that question, but we're closer to it," she said. "We suspect that infection plays a predominant role in pre-term delivery infant mortalities, either from an infection in the fetus, or in the mom. The body then attempts to rid itself of the infection."

Kincade will have been with the NICU two years in September, and in addition to her other duties, runs a High Risk Infant Follow-up Program at LBJ Hospital. She assists **Dr. Brenda Morris**, the director of the Neonatal Follow-up Clinic at Memorial Hermann Children's Hospital and a neonatologist in the Department of Pediatrics, Division of Neonatology. The follow-up program provides weekly parental contact during hospitalization, and home visits following hospital discharge for high-risk infants. "We do neurological evaluations after the baby leaves the hospital," Kincade said. "Most infants with multiple medical problems are seen monthly. Once acute medical problems have resolved, they are seen every six months for neurological evaluations."

- C. O'Brien