

AMWA Connections

Message from the President

None of us will forget where we were on September 11, 2001. I was sitting in my townhouse, minutes from Reagan National Airport, the Pentagon and the White House, talking to an airline agent. I was making reservations to go to California to present Senator Barbara Boxer a leadership award from AMWA's Los Angeles branch. The agent asked me had I heard the news that the World Trade Center had been hit. Not knowing an airplane had been used as a missile in New York, I called AMWA and spoke with Eileen McGrath, who was very upset. She said AMWA was closing its Alexandria headquarters because they had heard the blast from the Pentagon. They perceived that the proximity to the Pentagon put them in danger. Now I know that boom which

shook the high-rise building of my complex was American Flight 77 crashing into the Pentagon! To all the families of the people who lost their lives on that tragic day, on behalf of AMWA, I express profound sympathy and hope that you will find a way to heal.

By now, all of you have the events of September 11th, firmly etched in your collective memories. Young people have flooded the armed services recruiting stations, the US military has been dispatched and the war rooms are active with generals conducting the war against terrorism. The President and Congress have a right and a responsibility to protect Americans from terrorism and the President has said to the countries of the world, "You are either with us or against us." How does a nation fight terrorism and root out



Omega C. Logan Silva, MD, FACP

terrorists without the loss of innocent lives? However the US has been involved covertly or overtly in much of the violence around the globe. We used Osama bin Laden in our zeal to defeat the spread of communism in Afghanistan. After the Soviet Union left Afghanistan, bin Laden stayed on to advance his brand of Islam and terrorism. What is needed worldwide are more

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Women Who Embrace Mid-Life Receive Grants to Fuel Dreams

Fifteen women from across the country are proving that mid-life is a time for new beginnings through volunteerism, dedication and creativity. Actress and women's health activist Meredith Baxter joined Dr. Susan Fox, internist and AMWA member in announcing the winners of the Speaking with an Active Voice grant program.

Speaking with an Active Voice is a nationwide grant program, sponsored by AMWA with funding from Pharmacia Corporation, that recognizes

women between the ages of 45-55 who celebrate an active and meaningful life. All of the women selected are being honored for their health or education-based programs, which range from helping the terminally ill to creating computer software for people with speech impairments. The \$6,500 grants will help initiate new outreach initiatives, as well as expand existing programs. This year's recipients represent seven states:

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Promote Breast Cancer Awareness

This year an estimated 192,200 new cases of breast cancer are expected to occur in the United States. Although mammography use has risen, many women are still not making mammography screening part of their routine health care. A primary reason that women do not get mammograms is their physician has never recommended they do so. As part of AMWA's ongoing efforts to enhance the lives and health of American women, please take the time to talk to your patients, and your friends, about the importance of early breast cancer detection.

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**New Annual
Meeting
Dates!
January 31–
February 3,
2002**

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Insight into Medicine

This summer, Lisa Schlitzkus, one of the young women interning in the national office had the opportunity to shadow AMWA member Deborah Edge, MD, FACP. Dr. Edge was named, by her peers, as one of the best primary care physicians in the Washington, DC area in last August's Town & Country magazine. She works at Washington Primary Care Physicians, a practice she helped found in 1981. An internist, Dr. Edge has been an AMWA member since 1975.

Mentoring is a valuable tool for those of us who want to learn more about a career in medicine. Shadowing Dr. Edge, I was able to see medicine in practice, reaffirming my commitment to becoming a physician. Dr. Edge explained to me not only what she was doing, but also why she was doing it and what it would tell her, so that I could begin to understand the logical deductions made by those in the medical field. She was not content with me merely following or standing in a corner. With patient consent, she insisted that I see the dilated eye, feel the heart thrill and hear the murmur, and sit in with the patient while discussing STDs and contraception. In her practice, I was able to see how technology had been incorporated into medicine, including keeping all medical records and writing prescriptions on a computer.

The majority of Dr. Edge's patients are women. She may only see one man a day in her average of 16 patient visits. She finds that often women patients insist on seeing women physicians. Dr. Edge believes that the greatest challenge facing physicians—

both men and women—is how to spend enough time with patients and still be reasonably compensated as a result of managed care. While her specialty is Internal Medicine, she is a primary care physician, a “title as a result of managed care—not medical.”

At every chance she gets, Dr. Edge advocates for prevention and screening. She wholeheartedly believes that following basic health guidelines pay off in the long run. But, she notes, “It is important to reassure the patient that when they become ill or are diagnosed with a disease that it is not their fault. However, they must adjust their lifestyle to bring the illness under control.” She considers helping her patients realize when a health issue needs addressing one of the most important parts of her job. “It is important to help the patient not associate the illness with guilt—sometimes health issues arise as a result of just plain bad genes or other unavoidable factors, such as environment or poor luck.”

Dr. Edge exemplifies the type of doctor that I want to be. Before Dr. Edge examines

a patient, she spends at least ten minutes talking with the patient about symptoms, lifestyle, and tells them what she is going to do. She thoroughly explains to patients what they can do to help lower their risks. She discusses all alternatives, possible side effects, and provides handouts. I admire the way Dr. Edge praises patients for doing their absolute best to follow all of her instructions. Her communication style with patients is a model of the kind of doctor-patient relationship that I hope to have when I am a physician.

As I sit in front of a pile of medical school applications, all seeking students with medical experience, Dr. Edge has provided me this opportunity. I imagine that shadowing Dr. Edge was much different than shadowing a male physician would have been. I was more comfortable asking questions of Dr. Edge. She included me in her daily routine – the best learning experience I have had thus far. Young women looking to study medicine desperately need women physician mentors. ♦

International Women in Medicine Hall of Fame

The inductee:

Must be a woman who has made an outstanding contribution to the health of her country and/or the world. She should be a pioneer in an important area of health education, clinical work, research or academic achievement. The Induction may be contemporary or posthumous.

How to apply:

Please submit a curriculum vita with a photograph suitable for reproduction for inclusion in the program and the traveling exhibit should she be selected. If the candidate is to be inducted posthumously, please inform AMWA of the nearest (or any) living relative who may be able to receive the award.

AMWA held a gala in May to inaugurate the International Women in Medicine Hall of Fame.

We would like to invite members to submit their nominations for the hall of fame.

National SWAV Winners

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Arizona, California, Florida, Georgia, Illinois, New Jersey and Washington.

Alex Bond plans to use her grant to produce a two-week show-case production of her play “LOPSIDED”. Inspired by her aunt's courageous battle with breast cancer, “LOPSIDED” poignantly depicts a support group of eight breast cancer survivors: seven women and one man. Carolyn Scott Brown plans to host workshops, “Do Menopause with an Attitude,” for low-income African-American women in Seattle. The workshops will educate women on how to cope with menopause, including symptoms, treatments, and other intimate issues that affect women during this life-changing period.

Indepth project highlights can be found on AMWA's website at www.amwa-doc.org. ♦

RHI News

- ◆ RHI is pleased to report that we are revising and expanding the Reproductive Health Model Curriculum and that it should be completed during the winter of 2002. The curriculum is being revised to ensure that it contains the most recent medical information and research, so as to provide medical educators with a comprehensive reproductive health resource. The revised curriculum will include updates on the seven modules from the previous version, a new module on international reproductive health and additional sections on infertility, sexual functioning, older adult sexuality, menopause, male reproductive health and the latest information on medical abortion. RHI is also exploring the option of placing the entire curriculum on the Internet and on CD-ROM.
- ◆ RHI is developing an interna-

tional exchange program for medical school professors and students, focusing on international reproductive health.

- ◆ RHI has a team of physicians prepared to present CME accredited educational programs on medical abortion to interested schools, hospitals, and health organizations. These educational programs will provide accurate information about medical abortion to physicians and other health professionals; increase the number of health care providers who are knowledgeable about medical abortion; and increase the number of health care providers who can advocate for medical abortion training and service delivery within their communities.

If you are interested in these or any other RHI activities, please contact Stephanie Seeger, RHI Project Assistant, at sseeger@amwa-doc.org or at (703) 838-0500.

Calling All AMWA Artists....

Do you draw or paint? How about photography or needlepoint? AMWA is hosting an exhibition of two-dimensional artwork by women physicians and medical students at our upcoming 2002 Annual Meeting in San Antonio. If you have a work you'd like to exhibit, please contact Jannine Jordan, Director of Meetings at jjordan@amwa-doc.org or call 703-838-0500 for details. Artwork may be for display only or sold with 100% of the proceeds benefiting the AMWA Foundation. Come on and show your talent! ◆

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women in leadership positions. Many of the men seem to be too anxious to continue their childhood games of cops and robbers in a more serious and devastating call to arms. Perhaps, it is the role of women to ask that the leadership pause and consider solutions without the certainty of the loss of many lives on both sides including those not in the fight.

In the midst of all the outcries for revenge and war, some sobering voices have been heard. Congresswoman Barbara Lee of California was the sole dissenter on the resolution to authorize the President to use military force. I was so proud to see AMWA's Maryland State Director, Marcia Ormsby, MD, on national TV as part of a Quaker group, passionately and eloquently, calling for a peaceful approach. In another TV show, which interviewed children, each and every child called for a peaceful solution, saying we can't do what that terrorists did and kill a lot of people! Students on college campuses are mobilizing to call for a solution that doesn't involve war with more deaths of US citizens, as well as citizens of other

countries where we will fight. The US should find those individuals who are responsible for the September 11th tragedy and bring them to justice, but we should not declare war on innocent people.

The members of the health profession who were working through the day and night to save as many lives as possible are to be thanked for their dedication. As we look to the future, the medical profession, including the women of AMWA, must prepare to meet acts of terrorism head-on. We must have the medical skills and knowledge to combat biological or nuclear terrorism as well as physical and emotional trauma. We need to help ensure that there is an adequate supply of appropriate vaccines.

As we mourn for all the families of those who died, we realize that in many instances a breadwinner, who supplied the family's income and its health insurance, has been lost. AMWA must sustain the fight for universal healthcare, which if already a reality would have relieved one of the many burdens from the survivors of the tragedy of September 11th. One of the best ways AMWA can remember those who perished that terrible day is to make universal healthcare and the security it brings, a reality for all Americans. Let us rededicate ourselves to this task. ◆

Looking Back:

Fifty Years as a Woman Doctor

Renate G. Justin, MD, AMWA member since 1975

In the third segment of this series, Dr. Justin, a retired family practice physician from Colorado, shares her experiences as a resident in the 1950s.

During the Korean War, when I started my residency in a large metropolitan hospital in Cleveland, OH, many of my fellow residents were foreign medical school graduates with few English skills. The United States' young male doctors had been drafted into the army, which made residency even more harrowing than usual. Not only did we cover our own patients, but the nurses had to rely on the few English speaking women doctors to interpret the orders of the foreign born physicians. The staff was on call for 48 hours and off for 24. We were not paid, but our room and board was considered income and taxable. We had to moonlight to pay our income taxes.

On the campus of the hospital was a large free standing tuberculosis unit and an infectious disease hospital, which served the whole country. Polio was by far the most common admission to the latter, but we had a ward for pediatric tuberculosis, meningitis, and one for pertussis. The memories of the whooping and grinding of teeth in this division make me shiver yet today. Nor will I forget the swishing sighs of the iron lungs that confined both children and adults in their cavernous, metal tubes. Working on that ward brought me back to the polio epidemic I had experienced in Holland. Because I had escaped that epidemic, as well as Hitler's conflagration, with minimal long-term disability, I developed a sense of wonderment and responsibility. Life was an extraordinary joy, but I also felt an obligation to work hard because I had survived.

The polio vaccine was developed shortly after I finished my residency. I was one of the many volunteer physicians who stood on the streets all day administering the vaccine to people who lined up for several blocks waiting to receive this miraculous, preventative injection.

At the end of the day, my fingers were blistered from the syringes.

During my residency I started attending medical meetings in smoke filled rooms, often the only woman among many male doctors. If I dared to ask a question after the lecture, I often received a sarcastic putdown, embarrassing even to a few of the males doctors present, who more than once apologized to me after the meeting for the bad manners of the speaker.

I was pregnant in my third year of residency, when I was assigned to the tuberculosis hospital. As part of my duties, I spent hours in the administration of pneumothorax and pneumoperitoneum. It was considered safe for me to work on the contagious wards even though I was pregnant because one of my medical school classmates had contracted military tuberculosis, after which we all received the bacillus Calmette-Guerin vaccination. Most of my male fellow residents resented my pregnancy, as my maternity leave meant more nights on call for them. It was during the residency years, however, that most of the young married doctors started their families. The feeling was, nonetheless, that as a woman, I had forfeited the privilege of motherhood when I committed myself to medicine. Those of us who wanted to enter family practice in the early fifties spent two years in rotating internships. In addition, I spent a year in internal medicine, as well as a few months in obstetrics. My child was expected at the end of my residence years. After my daughter arrived, I faced a dilemma. If I did not go back to work for six weeks, as my obstetrician advised, I would lose credit for a whole year of residency. My only other choice was to ignore his advice of 'no stairs, bed rest and no work' and to return to the floor two weeks postpartum as the administration demanded. I did the latter and survived. ♦

This series will be continued in the December/January issue of AMWA Connections, as Dr. Justin describes her experiences as a young physician in a small town hospital.

Shape AMWA Policy

In order for AMWA to continue to take a stand on current issues impacting women physicians and current women's health issues, we need to hear from our members. As members of AMWA, we encourage you to submit resolutions for consideration by the House of Delegates at the Annual Meeting.

Proposed resolutions may focus on any medical, health, social or political issues you believe are important or affect women physicians and medical students. The deadline for submitting resolutions is November 30, 2001. Helpful hints on how to write a resolution can be found on AMWA Online. Sign up today by going to AMWA's website at www.amwa-doc.org.

Register for the Annual Meeting Today

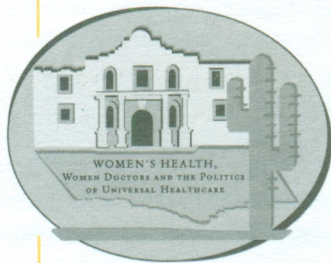
Register now for AMWA's 86th Annual Meeting and receive early bird prices through November 6, 2001. The theme of the 2002 meeting is "Women's Health, Women Doctors and the Politics of Universal Healthcare" and takes place January

31st-February 3rd at the Adams Mark Riverwalk Hotel in San Antonio, Texas. A \$25.00 discount off meeting registration will be given to AMWA members that bring a colleague who has never attended an Annual Meeting.

Come to the Opening Ceremony on Friday, February 1st, to hear the Keynote Speaker, Pamela Peeke, MD, physician, scholar, and author of "Fighting Fat After Forty", address personal health and well-being.

Dr. Peeke is an internationally recognized expert and speaker in the fields of nutrition and stress as well as integrative medicine. Saturday's Plenary Session will address universal healthcare policy on the national and grassroots levels.

Committee meetings are scheduled on Thursday, January 31st for the following committees and sub-committees: Archives, Awards, Bylaws, Career Development, Continuing Medical Education, Credentials, Finance, Leadership Development, Membership, Nominating, Program, Resolutions, Web site and Women's Health. A schedule of committee meetings will be included with the membership mailing. Register on-line today at www.amwa-doc.org!



PAMWA Meeting Fernandina Beach, Florida

The Pan American Medical Women's Alliance will hold its next meeting in Fernandina Beach, Florida, October 23-27, 2002. The meeting theme is "Emerging Diseases: Old and New." Plan ahead to attend this international meeting to be held on Amelia Island, off the northeastern corner of Florida. Fernandina Beach, the oldest continuously occupied settlement by Europeans on the North American Continent, is the only town on this 11 x 3-mile island founded by the Spanish in 1564. An airport shuttle to Fernandina Beach from Jacksonville Airport is available. The conference hotel is the Hampton Inn and Suites, situated on the waterfront of the Amelia River. The hotel address is 19 South Second St., Fernandina Beach, FL 32034; phone number: 904-491-4911; Fax: 904-491-4910 (rates are being negotiated).

PAMWA's travel agent is Lynanne at The Travel Agency, Fernandina Beach. Telephone: 904-261-5914 or write, The Travel Agency, 401 Park Avenue, Fernandina Beach, Florida 32034.

For more information contact Anne Barlow Ramsay, MD, at czardaska@aol.com or call her at 904-261-6423.

On-line Resources on Bio-Terrorism

In the wake of recent events involving the use of the biological agent anthrax, AMWA would like to provide you with information on what resources are available on how best to respond to this threat. This is not a complete list, for more information please check back on our website at www.amwa-doc.org.

- ◆ The Centers for Disease Control and Prevention - www.bt.cdc.gov/
- ◆ ACP-ASIM Bioterrorism Resources - www.acponline.org/bioterro/
- ◆ The Johns Hopkins Center for Civilian Biodefense Studies - www.hopkins-biodefense.org/index.html
- ◆ The Oct. 19, 2001 issue of *Morbidity and Mortality Weekly Report* had an article on Recognition of Illness Associated with the Intentional Release of a Biologic Agent. This can be found at <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5041a2.htm>

Calendar

November 1, 2001

Proposed Position Papers Due

November 30, 2001

Proposed Resolutions Due

November 30, 2001

Committee Reports Due

January 31–February 3, 2002

AMWA 86th Annual Meeting, San Antonio, Texas

October 23-27, 2002

PAMWA Meeting, Fernandina, Florida



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The Complete Family Health Book

In honor of October being Family Health Month, AMWA would like to announce our newest publication, *The Complete Family Health Book*. Written by Donna Shelley, MD, Roselyn Epps, MD and AMWA Past Presidents Sharyn Lenhart, MD, and Roselyn Payne Epps, MD, MPH, MA, it featuring numerous photographs, illustrations, and charts in a lively magazine-style format. AMWA's *Complete Family Health Book* empowers women to take control of their health, well being, and quality of life. Order yours today by calling 703-838-0500 or go online at www.amwa-doc.org.

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