



THE IOWA WAY

Department of Otolaryngology—Head and Neck Surgery

SUMMER 2003 VOL. 2



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Molecular Genetics of Familial Laryngeal Paralysis

Jose M. Manaligod, M.D.

Our laboratory performs research on the molecular genetics of laryngeal paralysis, which is currently supported by a five-year grant from the National Institute on Deafness and Other Communication Disorders (NIDCD). Laryngeal paralysis is a frequent cause of congenital stridor and airway obstruction. Persistent hoarseness, dysphagia and recurrent pneumonias are complications that may develop because of laryngeal immobility. Significant airway obstruction is a potentially life-threatening condition, often requiring a tracheostomy to provide adequate airway support. Laryngeal paralysis can be further differentiated according to whether the primary defect is in laryngeal abduction (glottic opening) or laryngeal adduction (glottic closure). Some common causes of laryngeal paralysis are birth trauma, neurologic abnormalities and iatrogenic injury, but the majority of described cases have an unknown cause. Recently, families with different forms of hereditary laryngeal paralysis have been described. These families provide an opportunity for understanding the genetic basis and mechanisms underlying laryngeal

paralysis.

To briefly summarize the known syndromes of laryngeal dysfunction, Plott syndrome is an X-linked recessive form of congenital laryngeal abductor paralysis associated with mental retardation. In contrast, Gerhardt syndrome exhibits autosomal



Jose Manaligod, M.D.

dominant or X-linked inheritance without associated mental retardation, although subtle central neurologic abnormalities can be demonstrated in some kindreds. Other neurologic syndromes, such as Charcot-Marie-Tooth Disease type IIC, feature laryngeal paralysis in addition to diaphragmatic and extremity weakness.

Previous studies of familial laryngeal paralysis have concluded that the most likely anatomic site affected is the *nucleus ambiguus*, because the neurons for the larynx reside in this area. Genetic



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Notes from the Chair: The Iowa Research Mission

Dear Colleagues:



Bruce J. Gantz, M.D., F.A.C.S.

We at the University of Iowa Department of Otolaryngology – Head and Neck Surgery believe that medical research is a vital part of our academic mission. Physician generated research is disappearing throughout medicine as clinical demands occupy more of our time. The National Institutes of Health (NIH) is very concerned about the dramatic loss of the clinician researcher.

One way to expand the pool of clinician scientists is through Institutional National Research Service Awards or T-32 training grants. T-32 grants provide funds for predoctoral and postdoctoral research training in specific shortage areas. The Department took advantage of this mechanism by creating the first two year otolaryngology research training fellowship ten years ago. We now regularly match two trainees into the research track and three into the clinical track. The research trainees spend an additional two years in research following their year of general surgical training. They then complete four years of clinical residency. John Lee, M.D., our newest faculty member, (see accompanying article on page 6) as well as two new faculty members joining the Department this July, Marlan Hansen, M.D. and Doug VanDaele, M.D. have completed the research training program. One of the objectives of the research program is to create competitive clinician scientists. We believe we are achieving this goal.

The Department has a number of very talented and creative investigators who have been at the forefront of research in our specialty. In fact, we rank number four in NIH research dollars for all otolaryngology departments. For 2002, our research funding was over \$3.5 million. We anticipate continued growth in research dol-

lars as our faculty expands. The NIH ranking is most impressive when one considers that most of this money was generated by physician researchers competing for research dollars in addition to their clinical responsibilities. The institutions that rank ahead of Iowa contain large groups of Ph.D. investigators. We are proud that we can continue to provide an environment for faculty to pursue competitive research investigation.

We plan to highlight in this and future issues of the *IowaWay* some of the NIH funded work that is currently being conducted in the Department.

In this issue we welcome John Lee, M.D. as one of our newest staff members. Dr. Lee was recently awarded a K08 career development award from the National Institutes of Health. This award is designed to help develop young investigators through education, collaboration and experience. In addition, we highlight the work of Jose Manaligod, M.D. Dr. Manaligod's laboratory performs research on the molecular genetics of laryngeal paralysis with the help of a five-year grant support by the National Institute on Deafness and Other Communication Disorders (NIDCD).

I am proud of all of our medical research accomplishments and look forward to our continued growth in this area.

A handwritten signature in black ink that reads "Bruce J. Gantz". The signature is written in a cursive, flowing style.

Bruce J. Gantz, M.D., F.A.C.S.

Professor and Head

Brian F. McCabe Distinguished Chair in
Otolaryngology – Head and Neck Surgery
University of Iowa Hospitals and Clinics

Molecular Genetics

Continued from front cover -

abnormalities that affect the development of this central nucleus may also affect other portions of the brain and brainstem that develop concurrently. However, vocal fold paralysis can result from any aberration on the path from motor neuron to laryngeal musculature. Other possibilities such as neuropathies or myopathies should also be considered as theoretical disease mechanisms.

The question of affectation status for this disease is complex; no objective measurements like audiograms or biochemical assays exist to conclusively confirm the presence or absence of vocal fold movement. The determination of vocal fold paralysis is primarily subjective, and depends on the experience and skill of the physician examining the patient. Studies on laryngeal EMG and congenital vocal fold paralysis have been performed with the hopes of objectively diagnosing vocal fold paralysis with conflicting results. Although laryngeal EMG has a great deal of potential as an objective tool, its role has not been clearly established in the management of congenital vocal fold paralysis.

Our study of the molecular genetics of familial laryngeal paralysis is focused on the identification of genetic mutations that may be responsible for this disorder. This will shed light on the genetic pathways that not only underlie this particular disease, but are also crucial for normal laryngeal innervation and development. Genetic linkage analysis led to the localization of one form of familial laryngeal paralysis to chromosome 6q16-21. This finding constituted the first report of a genetic locus for any form of laryngeal disease or dysfunction. Our current research is now focused on candidate gene screening in this region by direct DNA sequencing to ultimately identify the mutation responsible for this disorder. We have identified other families with similar hereditary laryngeal paralysis syndromes, and we are using similar methods to analyze these families.



Dr. Hoffman (right) prepares for a trans-nasal esophagoscopy.

"Best Doctors in America"

One hundred forty-four University of Iowa Health Care physicians have been selected for inclusion in the 2002 Best Doctors in America® database, www.bestdoctors.com.

The Best Doctors database consists of survey information gathered by *Best Doctors Inc.*, a provider of information about the best medical care available in the U.S. *Best Doctors* uses its database to link individuals with serious illness to expert medical specialists.

To compile the current database, more than 30,000 doctors throughout the U.S. were asked to rate the clinical abilities of other doctors in their areas of specialty. Only physicians who earned the consensus support of their peers were included.

We congratulate the following University of Iowa Otolaryngology physicians:

Gerry F. Funk, M.D.

Bruce J. Gantz, M.D.

Henry T. Hoffman, M.D.

Richard J.H. Smith, M.D.

Plastic Surgery:

John W. Canady, M.D.



Janusz Bardach, M.D.
with young patient

Janusz Bardach

A plastic surgeon who survived imprisonment in the Siberian gold mines

Janusz Bardach was forced to dig his grave and sleep in it the night before a court martial, where conviction was certain. He escaped death, survived years in Stalin's gulag, and became a famous plastic and reconstructive surgeon. He developed innovative techniques for cleft lip and palate repair, working in Poland and then in the United States as head of the division of plastic and reconstructive surgery at the University of Iowa's Hospitals and Clinics in Iowa City.

Dr. Bardach was born into a Jewish family in Odessa, Russia, in 1919. A year later his father moved the family back to his native Poland. When Bardach was a young man, newly married to his high school sweetheart, the Second World War broke out. Poland was overrun and he was conscripted into the Red Army. An incident driving a tank and outspoken comments about politics led to the court martial.

On the way to execution an officer of the NKVD – the Communist secret police – pulled him aside. He asked where Bardach was from and for details about his family in Odessa. Then the officer said, "I grew up next door to your cousin." Convinced that Bardach was truthful and loyal, the officer got his sentence reduced to 10 years' hard labour in Siberian goldmines. "You have a better chance of surviving in labour camps than I do on the front," he said.

"He was lucky his whole life," says Kathleen Gleeson, who co-wrote two books with Dr. Bardach, *Man is Wolf to Man: Surviving the Gulag* (University of California Press, 1998), and *Surviving Freedom*, to be published in spring 2003.

In the Kolyma prison mines, Bardach suffered cold, hunger, and brutality. After a truck incident in which many prisoners died, he convinced hospital staff that he was a medical student because he knew Latin and had learned medical terminology from his father, who was a dentist, and physician relatives. He talked his way into a job at the hospital. After the war his sentence was reduced and he was freed. Meanwhile, his young wife and his entire family, except for his brother, had been killed by the Germans.

Bardach talked his way into medical school in Moscow without taking exams and received a scholarship from the Polish government. He completed medical studies and a residency in plastic and reconstructive surgery.

For 18 years Dr. Bardach practiced in Lodz, Poland, specializing in maxillofacial surgery. He developed a two-flap technique for repairing a cleft lip that reduced the number of operations that children had to undergo, and techniques for lengthening the upper lip. He published textbooks and papers, though not in Western journals. However, as a Jew, he experienced anti-Semitism in Poland.

In 1968, when many intellectuals were leaving Poland, doctors from the University of Iowa College of Medicine learnt of his work at an international meeting. The medical school, which had an expert division in cleft lip and palate surgery, was looking for a new chair. Dr. Bardach was invited for three months as a visiting professor and then asked to stay permanently. The question was how to get his second wife, Elena, and their daughter, Ewa, out of Poland. The university invited them for a "vacation," the Polish government granted visas, and they arrived in Middle America. Elena later returned to Poland and died there. Dr. Bardach married Phyllis Harper.

Dr. Bruce Gantz, chair of otolaryngology at the university in Iowa, says: "I met him as a medical student and worked with him as a resident and a faculty member. I wanted to emulate him as a physician. Kids he'd cared for would jump on his lap as if he were a grandfather." After working with him on scientific papers, Dr. Gantz suggested, "Why don't you write about something else?"

The result, *Man is Wolf to Man*, received a spectacular review from the *New York Times*. Dr. Bardach's colleagues were amazed to hear his life story. "He was someone with tremendous courage and insight," says Dr. Robert Kelch, dean of the University of Iowa College of Medicine. His cardiologist, Dr. Richard Kerber, says, "He had tremendous warmth and compassion and a lack of bitterness and rage."

He leaves his wife, Phyllis Harper; a daughter; and a granddaughter. [Janice Hopkins Tanne]

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Janusz Bardach, M.D.

Janusz Bardach, M.D., 83, died of pancreatic cancer on Friday, August 16, 2002. Dr. Bardach received his medical degree in Moscow. After completing his residency, he moved to Poland to practice medicine and quickly developed an international reputation in plastic and reconstructive surgery, particularly in treating cleft lip and palate. In 1970 he accepted an invitation to be a visiting professor in the Department of Otolaryngology – Head and Neck Surgery at the University of Iowa and officially joined the department in 1972 as chairman of the Division of Plastic and Reconstructive Surgery. In 1977, Dr. Bardach received a joint appointment to the Department of Surgery and in 1985 created the Division of Plastic Surgery. Over the years, Dr. Bardach authored several textbooks on plastic and reconstructive surgery and published over 200 scientific articles. He retired from the University in 1991. Janusz Bardach is also known for a book he co-authored entitled “Man Is Wolf to Man,” a book about the 4 ½ years he spent in a Soviet labor camp during World War II. The book tells of how he narrowly escapes death several times and about the years of torture he endured as a prisoner of war.

Steven Gray, M.D.

Steven Gray, M.D., died on Sunday September 29, 2002 after a long battle with Wegener’s granulomatosis. Dr. Gray completed his residency at the University of Iowa, Department of Otolaryngology – Head and Neck Surgery from 1982-1986. During his residency he also obtained a Master of Science Degree. Over the course of his career, Dr. Gray studied the human airway, particularly as it relates to pediatric otolaryngology. He served as past president of the American Society of Pediatric Otolaryngology and investigated cellular and molecular approaches to wound healing for voice disorders focusing primarily on the voices of teachers, performers, public speakers and children. Dr. Gray was an Assistant Professor at the University of Iowa, Department of Otolaryngology – Head and Neck Surgery from 1987 - 1990.

John E. O’Connor, D.D.S., M.D.

John O’Connor, DDS, MD died in Hanoi, Vietnam in 2002 while performing humanitarian medicine. Dr. O’Connor was born and raised in Nebraska and attended the University of Nebraska where he earned a degree in dentistry. Following graduation, he served as a Naval dentist, but later returned to the University of Nebraska to complete his medical degree. Dr. O’Connor completed his residency at the University of Iowa, Department of Otolaryngology – Head and Neck Surgery from 1965-1968. He is survived by three sons, their spouses and six grandchildren.

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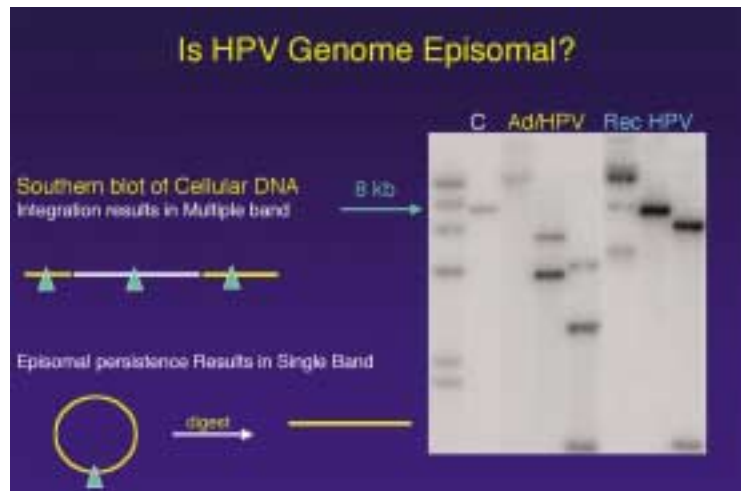
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As a new staff member in the Department of Otolaryngology – Head and Neck Surgery, I intend to study the human papilloma virus in many different ways. First, (through collaborations with Dr. Elaine Smith in the Department of Preventive Medicine and Dr. Lubomir Turek in the Department of Pathology), I will continue to link epidemiology data to the molecular analysis of the infected tissue in order to help better understand how the HPV infection leads to cancer. In addition, I hope to determine the risk factors, other than the presence of the virus in specimens that may contribute to cancer pathogenesis. Second, a model that can be used to simulate HPV infection in the laboratory has been developed. This model should prove useful in helping us better understand HPV infection and allow us to find a course of treatment for the viral infection. Finally, I will focus on developing an animal model to test potential therapies and to study side effects prior to clinical trials.



Alumni Weekend

Please reserve
Friday, Oct. 3, and Saturday, Oct. 4, 2003 for
Iowa Alumni Weekend.

The University of Iowa Hawkeyes will host the University of Michigan Wolverines on the football field for this year's Homecoming game. We anticipate an exciting weekend. David Schuller, M.D. has graciously agreed to be our guest faculty. Dr. Schuller is Professor and Chair of the Department of Otolaryngology at Ohio State University College of Medicine and Public Health and is the current Director of the American Board of Otolaryngology. Not only will Dr. Schuller update us on the newest management strategies in head and neck oncology, but will also join us in witnessing Michigan's second straight loss to Iowa! A block of rooms has been reserved as well as a block of tickets at Kinnick Stadium. Our clinical conference will begin at 9 a.m. Friday followed by a dinner on Friday evening, a tailgate event on Saturday morning, and of course, the game. Come and renew old friendships and meet new colleagues. Please reserve your seats for the game and get CME credit for learning the newest and latest clinical strategies: *The Iowa Way!* Please write or call Gareth Smith for more information.

Gareth Smith, University of Iowa Hospitals and Clinics, Department of
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319-384-5600 Tel; e-mail: gareth-smith@uiowa.edu

Resident Research Awards

On Friday, April 19, 2002 the Department of Otolaryngology – Head and Neck Surgery hosted *Resident Research Day*. This occasion provided residents the opportunity to present research that they have completed while at The University of Iowa. Two awards are routinely given, one to a resident who has gone through a two-year research track and one to a resident who has completed two 10-week research rotations. Award recipients were chosen by the invited research-scientist, Professor Herman A. Jenkins. Dr. Jenkins, M.D., Ph.D. is the chair of the Department of Otolaryngology, University of Colorado School of Medicine. His clinical interests include otology, neurotology and skull base surgery, and his research interests focus on vestibular physiology and compensation. We congratulate **Dr. Eric Johnson** and **Dr. John Lee** for receiving the 2002 Resident Research Awards.

Creating a High Titer Delivery Method for HPV-16 to Human Epithelium

John Lee, Su Min Yi, Mary Anderson, Al Klingelhut, and Michael Welsh

Abstract: HPV infection of human epithelium results in two known pathologic processes, papilloma formation and cancer. Currently, no effective medical therapy exists to treat the viral infection. A major obstacle to the development of therapies is the inability to grow and study the viral lifecycle in culture. To overcome this obstacle we have developed a novel method to deliver the viral genome to airway cells using adenovirus. We inserted HPV-16

flanked by Lox-P sites into an E1, E3 deleted adenovirus. The creation of an adenovirus shuttle plasmid involved a complex cloning strategy. Prior to insertion into adenovirus this construct was tested using Cre recombinase. Enzymatic digestion, PCR over the recombination sites and sequencing were all completed to insure fidelity of the designed construct.



Chad Spanos removes cancer cells stored in liquid nitrogen.

Once the Ad:HPV vector was produced, simultaneous infection of HAE with Ad:Cre and As:HPV suggest that this method could deliver recombined HPV to airway cells. Simultaneous infections showed evidence of recombination by PCR, fluorescence and real time PCR. We are currently using this method to study persistence of the HPV viral genome in HAE. Future studies using this novel technique to deliver HPV will likely be valuable to study the viral lifecycle *in vitro* and possibly *in vivo*.

Measuring the Equilibrium Stress/Strain Relationship of the Isolated Tectorial Membrane

Eric Johnson, Kinuko Masaki, Andrew Copeland,
Dennis Freeman, Richard Smith

Abstract: Recent studies have shown that defects of the tectorial membrane (TM) underlie a number of important genetic disorders of hearing including deafness at the DFNA8/12 and DFNA13 loci (Verhoeven et al., Nat Genet 1998; McGuirt et al., Nat Genet 1999). Mouse models of these types of deafness show hearing loss and obvious abnormalities in molecular architecture of the TM (McGuirt et al., Nat Genet 1999). To understand how these defects cause hearing loss, we are interested in determining how molecular architecture affects micromechanics.

Our approach is to measure the relation between stress and strain of isolated TMs by varying the osmotic pressure in the bath using polyethylene glycol (PEG, 20,000 MW). We have found that at low osmotic pressures, the TM volume decreases in proportion to the osmotic pressure exerted by the PEG. At higher osmotic pressures, the constant of proportionality between stress and strain decreases and the volume reaches an asymptotic limit.

These results are consistent with a simple interpretation of the molecular architecture of the TM. The TM consists of a matrix of cross-linked macromolecules that exhibit both mechanical and electrical properties. Normally, the TM matrix is in tension because of electrostatic repulsion of charge groups fixed to those macromolecules. Small amounts of PEG in the bath generate small osmotic forces that tend to reduce mechanical

tension in the macromolecules. We can characterize the linear relation between stress and strain by the bulk modulus. From preliminary experiments (N=3), we have found the bulk modulus to be 33 +/- 12 kPa. As the osmotic pressure is increased, tension goes to 0 and the fibers collapse. Further osmotic increases are resisted by electrostatic repulsion due to fixed charge. We estimated the fixed charge concentration to be 30 +/- mmol/L. These measurements provide a basis for developing a physiologically plausible model of cochlear micromechanics whose parameters are molecular in nature and can be adjusted to model genetic pathologies.

In homozygous mice segregation for a Col11a2 null allele, our preliminary data suggest that as a result of the loss of collagen XI, the TM loses its ability to rebound after compression – it is like a broken spring. This finding is consistent with our hypothesis that abnormalities of the TM cause a pre-transductive hearing loss.



Eric Johnson, M.D., studies TM structures on the computer.

Post Graduate Year 2 Residents 2002-2003



Bruce A. Abkes, M.D.

Dr. Abkes received his medical degree in 1999 from the University of Iowa Roy J. and Lucille A. Carver college of Medicine. Prior to starting his clinical residency, he completed a research fellowship. As a research fellow he worked with Paul Abbas, Ph.D., and Jay Rubinstein, M.D., Ph.D in the Auditory Physiology Lab studying the effects of electrical and acoustic stimulation on the auditory nerve.



Mark El-Deiry, M.D.

Dr. El-Deiry received his medical degree from Rush Medical College in Chicago, Illinois in 2001. He completed a surgical internship at Swedish Medical Center in Seattle, Washington prior to joining the otolaryngology residency program at UI Hospital and Clinics. El-Deiry's clinical focus is head and neck oncology.



D. Luke Shellenberger, M.D.

Dr. Shellenberger received his medical degree from Baylor College of Medicine in 2001. He completed an internship at the University of Iowa prior to joining the Otolaryngology residency program at UI Hospitals and Clinics. Shellenberger's medical areas of interests consist of otology and rhinology.



Eric P. Wilkinson, M.D.

Dr. Wilkinson received his medical degree from Stanford Medical School. His educational background is in electrical engineering and his past research efforts have involved CT imaging and computer-aided surgery systems. Wilkinson's current areas of interest include otology and neurotology, head and neck oncology and endoscopic and computer-aided surgical techniques in otolaryngology.



Grace Shih-Yi Yang, M.D.

Dr. Yang received her medical degree from the University of California, San Diego in 1999. Prior to starting her clinical residency, she completed a general surgery internship and two years of NIH funded research. Yang's research interests consist of gene delivery utilizing viral vectors in the nervous system while her clinical interests include otology and pediatric otolaryngology.

Fellows/ 2002-2004

Christopher Brown, M.B.
2002-2003



Dr. Brown completed his M.B.B.S. in Australia in 1991. He completed his Otolaryngology – Head and Neck training in Melbourne in 2002. He is currently completing a fellowship in rhinology and paranasal sinus at UI Hospital and Clinics. Brown's research interests are in the relationship of immune deficiency to chronic recalcitrant sinusitis. In August he will take up duties as Associate Director of Rhinology and Sinus Diseases at the Royal Victorian Eye and Ear Hospital in Melbourne, Australia.

Benjamin Cable, M.D.
2002-2004



Dr. Cable earned his medical degree from the Uniformed Services University of the Health Sciences in 1996. Cable completed undergraduate studies at the United States Military Academy at West Point. He completed his Otolaryngology residency at Walter Reed Army Medical Center. He is currently completing a pediatric otolaryngology fellowship at the University of Iowa. His research interests include genetic hearing loss, cleft palate speech, vaccine therapies for recurrent respiratory papilloma, and wound healing. In July, Cable will assume a position at Tripler Army Medical Center in Honolulu.

Kristi Chang, M.D.
2002-2003



Dr. Chang earned her medical degree from the University of Southern California in 1997 and later chose to complete her residency at the same institution. Prior to moving to California she completed her undergraduate degree at Stanford. Chang specializes in Clinical Head and Neck Oncology, with a research interest in the outcomes following Head and Neck reconstruction. Chang will be joining the clinical staff at the UI Hospital and Clinics at the beginning of July.

Murad Husein, M.D.
2002-2004



Dr. Husein received his medical degree from the University of Western Ontario in London, Ontario. He subsequently completed his residency at McGill University, Montreal, Quebec. He also completed a Master of Science in Otolaryngology at McGill, focusing on the evaluation of the subglottis in the pediatric population. Currently, he is completing a pediatric otolaryngology fellowship at the University of Iowa. His research interests include the genetics of hearing loss. Husein's future goals include a career in academic medicine and being involved in third world medicine.

Ted A. Meyer, M.D., Ph.D.
2002-2004



Dr. Meyer is a graduate of the University of Illinois at Urbana-Champaign where he received his medical degree and a Ph.D. in Speech and Hearing Science. He completed his residency at Indiana University. Meyer is currently completing an otology-neurology fellowship with research interests consisting of speech perception, signal detection, auditory psychophysics, modeling phoneme and word recognition by cochlear implant users. Other interests include clinical outcomes research, retrospective series reports and prospective clinical trials. Future career goals include joining a faculty at a major teaching and research institution.

Upcoming Events

Iowa Basic Science Course in Otolaryngology: A Course for Otolaryngology Residents

Department of Otolaryngology—Head and Neck Surgery
The University of Iowa
Iowa City, IA

July 7–August 22, 2003

Under the instruction of Robert Morecraft, Ph.D., the Head and Neck Anatomy Section consists of anatomy lectures and supervised cadaver dissection. Individual assistance is offered in each daily laboratory session. The Anatomy Section is held for the first two weeks of the course (60 hours). Morecraft is currently a full Professor in Anatomy and Structural Biology at the University of South Dakota School of Medicine. He has instructed the Anatomy Section of the Basic Science Course since 1985.

The lecture series consists of approximately 150 lectures (220 hours) delivered by specialists from the University of Iowa Roy J. and Lucille A. Carver College of Medicine, Departments of Anesthesia, Dentistry, Dermatology, Internal Medicine, Neurology, Ophthalmology, Otolaryngology, Pathology, Pediatrics, Pharmacology, Radiology, and Surgery.

11th Annual Conference on Management of the Tinnitus Patient: For Patients and Professionals

Department of Otolaryngology—Head and Neck Surgery
The University of Iowa
Iowa City, IA

Thursday–Saturday,
September 25–27, 2003

This conference is intended for otologists, audiologists, psychologists, and nurses who provide clinical management services for patients with tinnitus. The conference will also provide information to patients who have tinnitus, their family, and friends, but it will NOT include individualized diagnosis and treatment. The purpose of this conference is to provide a review of current evaluation and management strategies for the treatment of tinnitus. Upon completion of the program, the participant will be able to discuss the management of tinnitus and the tinnitus patient.

Resident Research Day

Department of Otolaryngology—Head and Neck Surgery
The University of Iowa
Iowa City, IA

June 27, 2003

Resident research day is Otolaryngology- Head and Neck Surgery's opportunity

to allow residents to present research completed during the year. Two awards are presented and the recipients are chosen by the guest speaker. This year Robert Jackler M. D. Chief of the Division of Otolaryngology/Neurotology/Skull Base Surgery from the University of California, presents the awards. Dr Jackler is presently involved in research into innovative techniques in cranial base surgery, evidenced based outcomes and the biophysics of semicircular dysfunction.

Alumni Weekend

Friday–Saturday,
October 3–4, 2003

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Trans-Nasal Esophagoscopy

December 2003, exact date to be announced

Department of Otolaryngology—Head and Neck Surgery
The University of Iowa
Iowa City, IA

The Trans-Nasal Esophagoscopy (TNE) course includes the following topics: role of TNE in head and neck practice; equipment demonstrations; nursing considerations; live interactive case presentations and future directions for Speech Pathologists. Course director, Harry Hoffman, M.D.

THE IOWA WAY

Department of Otolaryngology—Head and Neck Surgery

The Iowa Way is published periodically by the Department of Otolaryngology—Head and Neck Surgery at The Roy J. and Lucille A. Carver College of Medicine for friends, colleagues, and alumni.

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