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Boston University

BOSTON UNIVERSITY GOLDMAN SCHOOL OF DENTAL MEDICINE

impressions

FALL 1996



a school without walls / learning without limits

The next millennium is no longer an abstraction—in August we welcomed the DMD Class of 2000. The School of Dental Medicine and dental education in general must continue to transform for the profession to remain vital and invigorated as we pass that calendar threshold.

We continue to build on the school's successes and forge a path that will fortify and nourish growth into the next decade. You will be pleased to know that your alma mater is thriving and we look forward to a continually brighter future. During a time of financial crisis for many dental schools and health care institutions, we have been able to balance the school's budget and see our academic, research, and patient care missions flourish.

On May 31, John Silber left the presidency to become chancellor and Jon Westling became the eighth president of Boston University. Although I have had the privilege to serve under four distinguished presidents during the past thirty-three years, I can attest that the contributions made by John Silber to the University have been incalculable. He has always been a steadfast friend and supporter, without whom our school could not have grown and developed. The strength of our school and our academic health center is testimony to Dr. Silber's leadership. In his successor Jon Westling, we are delighted to welcome a man of great intellect, integrity, and character as our president.

A milestone in the school's maturity occurred on January 1 when the school officially changed its name. 'Boston University Henry M. Goldman School of Dental Medicine' reflects the growth that we have experienced in the areas of education, research, health care, and community service. It is symbolic that the school persists in transforming itself in light of present and future market conditions and in enhancing its educational programs, customer service, environment, and communication.

Integral to the school's future success and the long-term value of your education is our evolving school-without-walls philosophy. As I have stressed over the years, we must look beyond our own physical surroundings and the accepted methods of educating students and delivering patient care. The School of Dental Medicine has pioneered and continues to implement innovations in educational programming. As we enter the next century, we commit ourselves fully to educating students in the context of the reality of the world in which they will practice after graduation.

We also are striving to remove any barriers that may separate alumni from the school and each other. I have enjoyed seeing many of you at regional alumni club meetings, continuing education courses, and receptions throughout the country. The recently established alumni clubs in particular have enabled graduates to become acquainted with each other in several cities throughout the United States and Canada.

In this issue, we talk about partnerships. None are more valuable than those we have forged with our graduates. I hope that Boston University Goldman School of Dental Medicine can continue to be your lifelong educational resource.



Spencer N. Frankel

Spencer N. Frankl, DDS, MSD
Professor and Dean

in this issue

Impressions

A publication for the alumni and friends of Boston University Goldman School of Dental Medicine

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without a school walls

Once students could find everything they needed for eventual success inside a structure of concrete and glass. They sat at the feet of the learned elders and shared trials and tribulations with the person in the seat next to them. Since all of their colleagues were taught in similar structures and were afforded the same experiences, the system worked well for a very long time.

Then a shift occurred during the past two decades, at first quietly. The world in which we deliver care, exchange information, and teach has changed. Fee-for-service, once an immutable absolute in dentistry, is now one of many options. Hospitals are merging and in some cases closing as ambulatory care sites are increasing rapidly. People are living longer and presenting more complex medical histories. Classmates sit not only across hallways but across continents, linked by technology. Change is no longer silent. It roars.

Clearly, dental medicine needed to transform itself to not only keep pace but to establish itself as a leader in the prevention and treatment of disease. For our school, that has meant taking down the walls that separate us from the practicing dentist, other health care professions, and the realities of the health care environment. It has also meant razing any residual barriers that may keep innovation in a box.

learning

For the past twenty years, the School of Dental Medicine has been challenging the “givens” in dental education. Whereas many educational and health care institutions are now undergoing full-scale “re-engineering” efforts, the school has been continuously reinventing itself.

As a result, we find ourselves in a vigorous position: our economic health has allowed us to improve each year; we have added faculty and staff and continue to improve facilities. Unlike many other dental schools that rely heavily on ever-shrinking federal and state support, our school has sustained and enriched itself and is growing.

It is easy to view change as negative especially when dealing with forces we may perceive as beyond our control. The danger is in letting nostalgia and sentiment cloud our judgment of the realities of today and tomorrow. A lasting foundation needs to be flexible or it will be destroyed by its own unyielding rigidity. We must prepare students to enter this highly volatile and challenging world—we must make them smarter than we are. As health professionals are learning across the board: the status quo will no longer go. In change, there is tremendous opportunity.

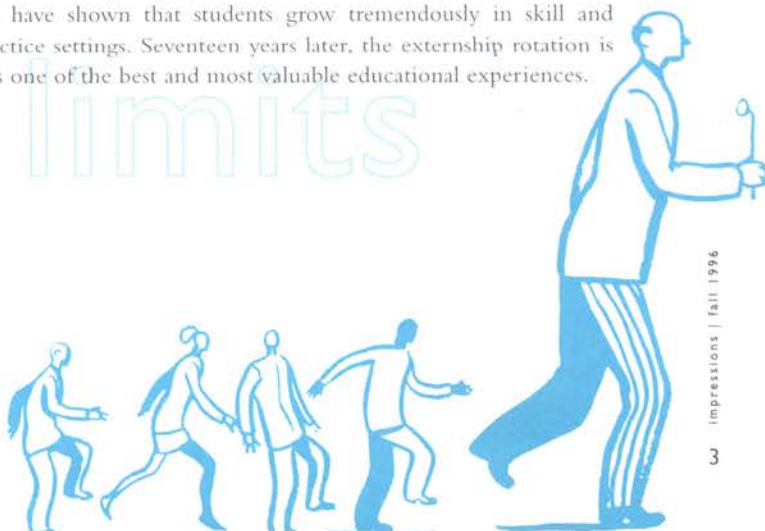
We can no longer simply ask where dental education is going, but where health education is going. Dentistry must acknowledge its inextricable link with the rest of the health care system and can no longer afford to be viewed in isolation. We must train professionals to be well-rounded generalists steeped in the basic sciences and problem solving. Postdoctoral and research programs must look at clinical programs through a different lens. Students must be prepared for a lifetime of learning in order to adapt to a constantly changing health care environment.

education without boundaries

Dental schools used to be able to provide students with a one-stop learning environment. Students would progress from basic sciences and didactic courses to training in on-site clinics. Under this system, upon graduation they had little or no experience in how an actual dental office functioned. Coming out of the hothouse environment of the dental school was for many akin to jumping into a winter lake.

Dean Spencer Frankl knew there was a better way to instill confidence and professionalism in students. Culling from his own postdoctoral training in pediatric dentistry, he began to look to the world outside the school to help educate students. In 1979, fourth-year predoctoral students entered the community to practice supervised dentistry under the guidance of mentors. Evaluations have shown that students grow tremendously in skill and demeanor in these outside practice settings. Seventeen years later, the externship rotation is rated by students and faculty as one of the best and most valuable educational experiences.

without limits



If exposure to the real world worked so well for senior students, why couldn't the tenets be broadened to include students starting in their first year? When Dean Frankl asked that question, he challenged basic assumptions about educating dental students. In 1989 the paradigm shift was realized when first-, second-, and third-year students stepped out of the school's physical confines to go on their first APEX rotations.

The APEX (Applied Professional Experience) Program helps enhance, integrate, support, and provide relevance to the didactic, preclinical, and clinical course materials. By exposure to "living laboratories"—private offices, community health centers, hospital ambulatory care facilities—students are able to gain perspectives on delivering patient care, treatment methods, and professionalism that dental schools cannot always provide.

The school committed itself to these programs in experiential learning long before it was fashionable or safe. Recent distinguished reports have corroborated that health education must redirect its teaching along these lines. Last year in *Dental Education at the Crossroads*, the Institute of Medicine recommended that dental schools rethink educational and clinical models in order to prepare students and faculty "for an environment that will demand increasing efficiency, accountability, and evidence of effectiveness." Meaningful extramural programs are recommended to achieve this goal.

Similarly, in its 1995 report, *Critical Challenges: Revitalizing the Health Professions for the Twenty-First Century*, the Pew Health Professions Commission stated: "Education should be carried out where it makes the most sense for lessons to be learned, is most convenient for the student, and where it is least expensive." Again advocating, as the Institute of Medicine has, for more experiential learning.

population-based care

Pediatric dentistry is a sterling example of how the school has evolved its educational setting to meet the needs of both students and patients. Since dentistry for children is generally most effectively practiced in the community, the postdoctoral pediatric program has long adopted this principle and has recently enlarged that concept. Residents now see a limited number of patients within the physical confines of the school; their learning environments have shifted almost wholly to neighborhood care centers.

By going where the patients are, residents see an abundant diversity of children and gain a breadth of experience relatively impossible to acquire in a single clinic in the school. Residents can truly practice preventive dentistry in the larger context of multi-service medical facilities.



By situating programs such as pediatric dentistry in the community, students learn to work with a broad spectrum of health professionals and better serve all patients. Unlike other health professions such as medicine, experts do not foresee a surplus of dentists in the coming years. If there is any trend, it is toward an undersupply of dentists to meet the needs of the entire population. Instead of increasing class size as schools have done in the past, recommendations are to increase the productivity of the dental work force.

In response to these recommendations, the school is keeping its entering predoctoral class stable, and providing those students with relevant, rich classroom and clinical experiences that will help them become flexible, well-rounded professionals of the future. Postdoctoral residencies have also remained constant for some years in recognition of the greater demand for generalists.

To broaden the generalist experience which reports show is critical for health professions, the school has enlarged its Advanced Education in General Dentistry Program. This year twelve residents will enhance their proficiency and abilities in a year-long general practice residency. For the first time this year, residents will practice not only in the school's care centers but also in community health centers. Two AEGD residents will be based at a Veteran's Administration Hospital, also for the first time.

partners

A school without walls or boundaries is only a theory without external allies willing to share a vision and take risks. For the past twenty years, the school has nurtured partnerships both within the university and the medical center and with external sites.

As experts stress, dental schools must link "more directly with the rest of the health care system" (Pew Commission) and the dental profession as a whole also "will and should (and must) become more closely integrated with medicine and the health system on all levels" (the Institute of Medicine). The relationship to medicine and the academic health center has never, therefore, been more critical.

This summer Boston University Medical Center Hospital merged with Boston City Hospital—the first-ever merger of a public and private hospital. The planning of this newly formed entity, Boston Medical Center, has spurred vast opportunity for the dental school. For several years the School of Dental Medicine has provided a dental health plan for the employees of the former University Hospital. Hopes are to expand the services to include personnel of Boston Medical Center. The school will also benefit from the relationships that the Medical Center is forming with other health care providers via the Boston HealthNet, which will provide outreach, prevention, primary care, and dental services to more than 200,000 residents in Boston and its surrounding neighborhoods.

The School of Dental Medicine's bond with the School of Medicine, the School of Public Health, and the Center for Advanced Biomedical Research is even more vital and apparent. Oral health is integral to total health and dentistry will ever more increasingly be valued for its role as a primary health care provider. The dental school continues its strong ties with the medical school in the teaching of the basic sciences. To help prepare students to deliver population-based care, the relationship with the School of Public Health will become more important especially in the areas of epidemiology and outcomes analysis.



Faculty from the Department of Periodontology and Oral Biology occupy a floor of the University's Center for Advanced Biomedical Research and have significantly increased the stature and scope of the school's research efforts. To capitalize on this achievement and the successes of the Department of Biomaterials, the school has taken the next step by establishing its own Clinical Research Center.

In partnership with Boston University, the school introduced a Dental Health Plan for employees seven years ago. With care centers on the Charles River and medical campuses, the plan offers personnel and their families a full range of dental services. Employees also have the option to be treated by a dentist outside the center. This natural partnership has helped further weave the school into the fabric of its parent university. Since dental education is the most costly for a university to provide, it is critical that schools of dental medicine prove their value with innovative programs such as cost-effective, patient-focused management of employee and student dental care.

Our relationships outside the medical campus and the university are also numerous. Integral to the education of our students is an experienced cadre of extramural preceptors. What began as a group of limited externship sites largely in New England has blossomed to myriad offices, military, and community health sites throughout the country. For their APEX rotations, students can now opt to train with approved dentists in their hometowns or in cities in which they hope to settle after graduation. These external partners are faculty in the truest sense: in their one-on-one mentoring relationships they help students gain skill, knowledge, and confidence.



Alliances continue to be forged. The school's partners are as varied as the East Boston Neighborhood Health Center, Roxbury Comprehensive Community Health Center, and the Veterans Administration Hospitals. These alliances afford students a wealth of clinical and practice management experience and improve the vitality of the school's intellectual health. By introducing an influx of outside energy, the school's faculty and staff stay challenged. Stasis never has an opportunity to take hold. By creating win-win opportunities with partners, the school can manage its fiscal resources most efficiently.

opening up the walls

It is clear that forging strategic alliances is not only the wave of the future but fundamental to an institution's survival. For relationships with external partners to be most *meaningful and solid*, the potential inside the organization must be open to change. In January the school began an initiative that will move the organization along a higher path of innovation and growth. By involving all members of the community in envisioning and planning for the future, the school engages in the process of becoming a learning organization.



The learning organization initiative has involved more than 200 members of the community including faculty, staff, students, alumni, and partners who represented all levels, and backgrounds. By establishing common ground, we have been able to arrive at a shared vision to which we can all contribute. Groups now are at work on several action areas including faculty/staff development, customer service, information technology, and communication.

Certainly as the world changes so too must our planning. Value and customer service will be paramount for both patients and students. Market forces have and will continue to dictate that we treat these audiences as consumers. This being the case we must grapple with issues of quality, cost, ethics, and location.

Advances in information technology cannot be underestimated in what has and will transpire at Boston University, in our neighborhoods, and throughout the world. The school has made great strides in linking students, faculty, and staff by computers throughout the school. We realize that successful relationships with our outside network will require innovative use of technology for learning and sharing information.

We have invested in advancements in our internal systems in the areas of patient records, financial management, and electronic mail. We will continue along this vein to make the school even more a "virtual institution"—extending distance learning continuing education programs, instituting simulation laboratories for our students, linking our alumni throughout the country and the world to us through a World Wide Web site.

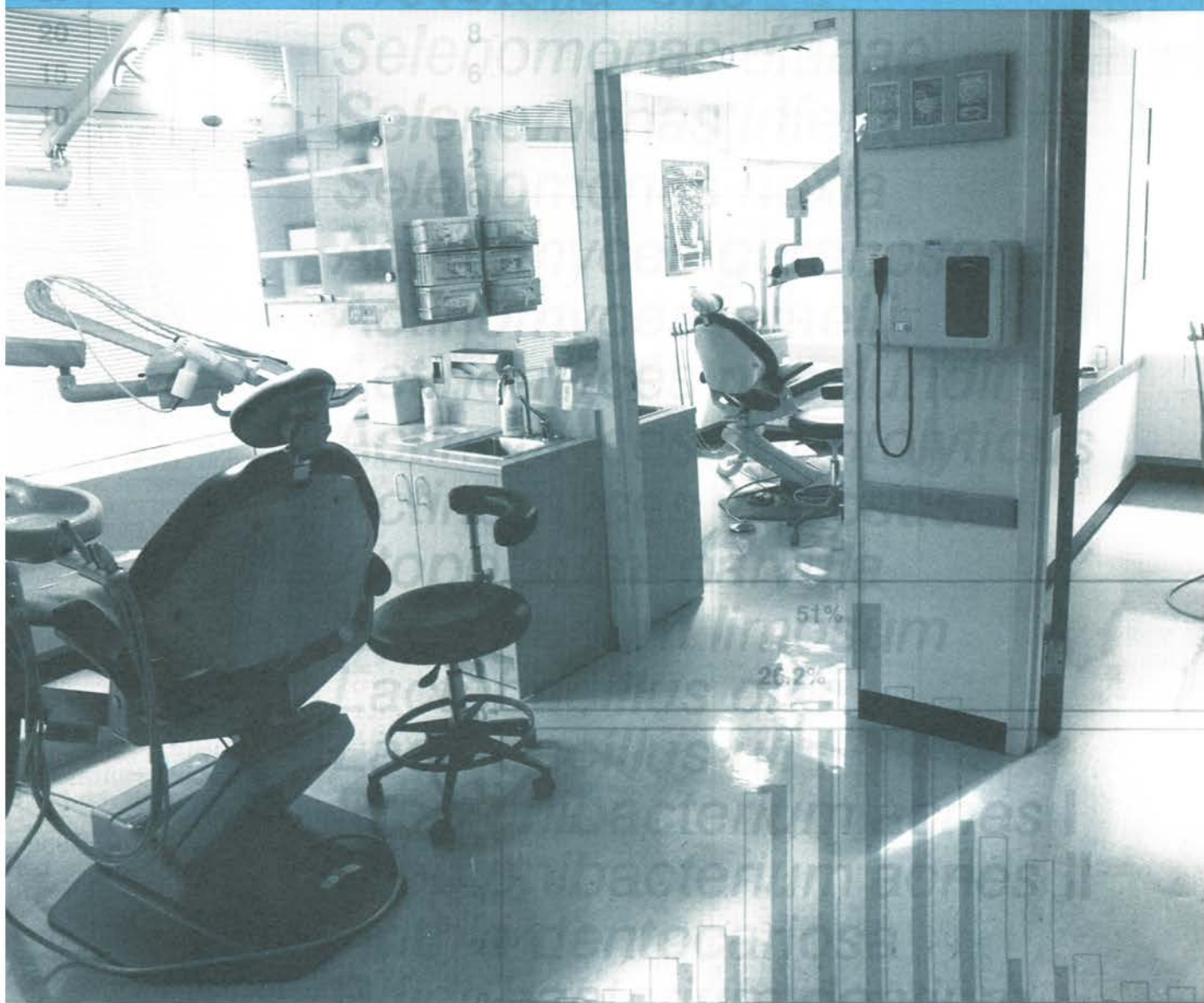


Superb communication is what makes the school-without-walls vision a reality. It is the quality and intelligence of our interactions with students, patients, alumni, faculty, staff, and strategic partners that will cement the mission of the school and construct its future. Through innovations without and within, Boston University Goldman School of Dental Medicine continues to provide the community with the foundation needed for a lifetime of learning long into the next century.

at the forefront

Capnocytophaga spungensis
Fusobacterium nuc. nucleatum
Fusobacterium nuc. vincentii
Haemophilus parvulus
Prevotella uenuecola
Prevotella intermedia
P. nigrescens
Prevotella loeschell
Prevotella melaninogenica
Prevotella oris

45
40
35
30
25



<-1.5 1.5 1.25 1.0 0.75 0.5 0.25 0 0.25 0.5 0.75 1.0 1.25 1.5 >1.0

micro3

of discovery

Researchers at the dental school had been pursuing ambitious studies and trials long before the Institute of Medicine recommended that dental schools cultivate collaborative research opportunities with corporations, government, and other institutions. Establishing a centralized area, however, allows the dental school to take on a more comprehensive range of clinical research. Comprised of four fully equipped, dedicated dental chairs, the Clinical Research Center provides a state-of-the-art multidisciplinary facility within the school where long-term clinical trials and clinical research in areas such as dental materials, radiology, implantology, and periodontology will be conducted.

The School of Dental Medicine is one of a limited number of dental schools in the country with this caliber of dedicated research center. "Creating an environment for performing extensive clinical research and providing a central source for data management benefits the school in several areas," said Dr. Thomas Van Dyke, director of the Clinical Research Center. "Residents and students can participate in research, enhancing their educational experience. There will be opportunities to bring resources into the school through grants and sponsored clinical research. The studies provide a service to patients and to industry, and conducting studies fosters national visibility for the school."

According to Van Dyke, the center was immediately in demand by industry. Several contracts are in negotiation in addition to the trials presently underway. "The center fills a void that should facilitate the conducting of trials, such as efficacy studies (making sure a product can

do what it claims), product testing, and pharmaco-economic studies (studies that test the cost efficiency of various treatment.)"

The school benefits exponentially from the breadth and number of clinical research activities. According to Dr. Dan Nathanson, chairman of the Department of Biomaterials, "Procedures or materials tested in our facility provide us with the results right away; we do not need to wait for the publication of information. The school stays at the forefront of product development since most products and procedures included in clinical research are tested before they are available on the market, modernizing and sharpening our clinical teaching and patient service." Dr. Zhimon Jacobson, director of the Center for Implantology, who has cultivated collaborative research with corporations for a number of his implant studies, is enthusiastic about the center as a training ground. "One of the aspects we emphasize in our negotiations for studies is participation by residents," Jacobson said. "The studies and trials should be inclusive endeavors, providing the residents with the best possible training. And of course, the patients benefit by receiving advanced care."

By encouraging and supporting investigator-initiated research, the center will enhance faculty development opportunities. Staff is available to assist faculty as well as students who want to conduct clinical research. They will provide guidance on grant writing, study design, research protocols, documentation, any necessary data management, and data analysis.

Nancy Mickels, research coordinator for the center, says, "The center is a conduit for taking what we

learn in basic science and applying the results to real-life situations or challenges in modern dentistry. You can't take a product automatically from the lab to the dental office." She went on to say that the center collaborates with the dental school's biomedical research laboratories on the second floor of the Center for Advanced Biomedical Research Building, which complement the Clinical Research Center by providing comprehensive scientific analysis of data acquired from clinical trials.

While the straightforwardness of conducting a trial may seem obvious, there is the consideration of how the tests affect the subjects (patients). The Center also represents patients' interests in conjunction with the medical campus' Institutional Review Board (IRB), a special committee residing on the medical campus that determines whether a study's design is ethical. Working with the IRB, the center will ensure that the trial will not exploit patients, and requires that the researchers obtain the patients' informed consent prior to implementing the product testing.

As much as for the modern facilities, corporations will partner with the center because of services it provides. As Mickels points out, "We standardize practices and bring order to the process. Corporations can be assured of controls, and therefore, of reliable outcomes."

Where will the center go from here? According to Nathanson, opportunities are boundless. "Direct contact with manufacturers lays the groundwork for future support and partnerships in research and development, licensing and patenting of products and procedures."

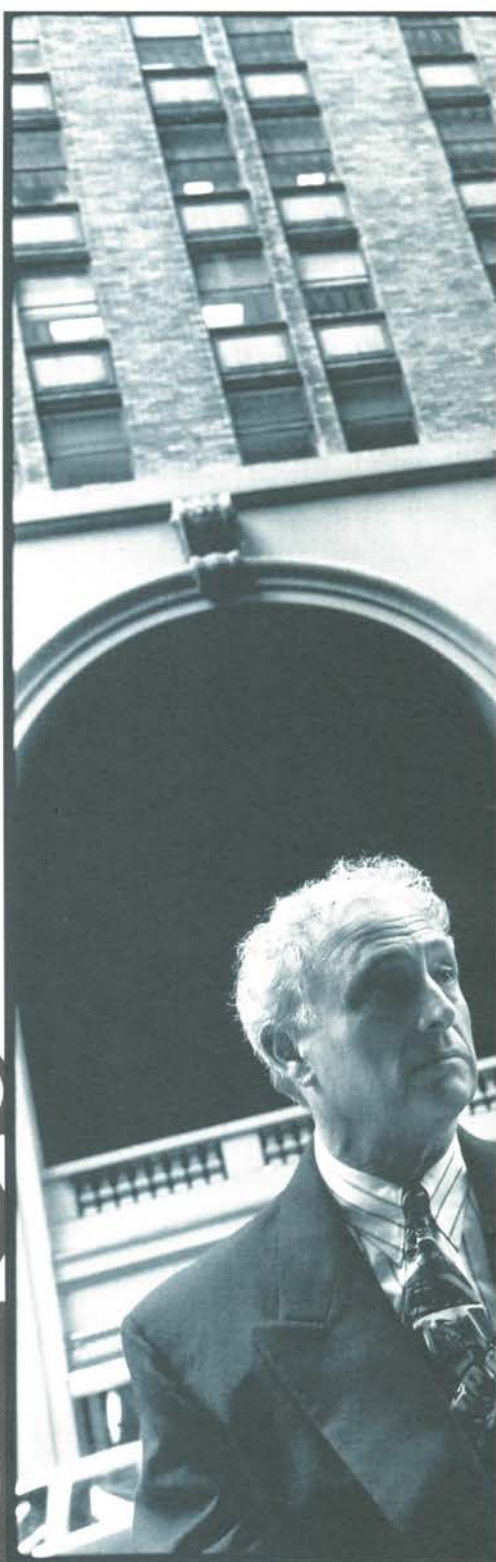
"New York is a granite beehive, where people jostle and whirl like molecules in an overheated jar."

—NIGEL GOSLIN, *The Saturday Review*, 1962

We traveled to Manhattan to profile some New York alumni who find a unique energy practicing dentistry here. Each thrives on the inherent challenge of their patients who expect first-class service. Not unlike the standards their Boston University instructors expected of them during their education, we discovered.

NEW YORK Profiles

PHOTOGRAPHY BY KENT DAYTON





Fred Goodman ENDO 66

NY ALUMNUS: Fred Goodman ENDO 66

PRACTICE: 342 Madison Avenue (Mid-Town)

TRANSPORTATION TO WORK: I walk. It's four miles to and from the office. I wear out a lot of Rockport shoes.

FAVORITE SPOTS: Gotham Bar & Grille, Cafe Charlotte, Portico, Bloomingdale's (for browsing)

CURRENT READING: I just finished *The Sisterhood* by Michael Palmer. Reading mystery novels balances the necessary journal reading.

PHILOSOPHY OF PRACTICE: Always remember there is a person attached to those teeth. Think of your patients as persons, not as procedures. I always take the time to explain a procedure and its necessity.

ON BOSTON UNIVERSITY: At the time, it was a challenge, especially when I remember freezing in the old East Concord Street building, taking exams with my winter gloves on. But it was an excellent experience. The school was very small—I think there were five people in my class—and it had this unique intensity. We were there to learn and the faculty were dedicated to us. Harold Levin and Seymour Melnick were my teachers. I was the first endodontist to practice in New York who was actually trained as one.

ON TEACHING: I've been teaching since 1966. It keeps me challenged and gets me out of the office so when I'm there I love my work. I teach graduate endodontics at Columbia University and chair the Section on Endodontics at Lenox Hill Hospital. Students are always open, always asking me questions. It's a nice give-and-take.

MEMORABLE PATIENT: Leonard Bernstein. He didn't care for the diverse pop music I usually played in my office, so he wouldn't sit in the chair until I put on some classical music.

ON NYC: Living in New York makes you very streetwise. It also forces you to be more of a parent because your children's sophistication will never cease to amaze you. New York has a unique pace set by so many people trying to do so many things in the same geographic location. Noise is part of the flavor. My son, Michael, is a music agent so I know about noise. He drags me to every jazz and rock club downtown.

HOBBIES: I consider Knicks games inexpensive therapy. Cooking relaxes me. I like to cook Italian dishes and grill seafood. If I ever get the time, I'm going to enroll in cooking school.

PARTING THOUGHT: If you stop and look up at the sky—everyone else does.

NY ALUMNA: Constance Pinover Winslow ORTHO 78

PRACTICE: 111 East 71st Street (Upper East Side)

TRANSPORTATION TO WORK: I walk. It's seven minutes door-to-door. I love not needing a car.

FAVORITE SPOTS: Montebello, Central Park

CURRENTLY READING: *A World Lit Only by Fire* by William Manchester (for the second time)

PHILOSOPHY OF PRACTICE: Orthodontics is physical psychotherapy because you change people's feelings about themselves. Psychotherapy is hard to quantify but with orthodontics you get tangible results. There is joy in making people look good.

ON BU: I can say with confidence that Boston University offers the best orthodontics education in the country. Dr. Gianelly is brilliant and he cares about his students. He uses all of his knowledge from his multiple degrees and voluminous research. Both the faculty and the curriculum provided me with superior training.

MEMORABLE PATIENT: Anthony Michael Hall acted in three movies wearing my orthodontic work: *National Lampoon's Vacation*, *Sixteen Candles* (with headgear, for which I did not receive recognition in the movie credits) and *The Breakfast Club*. His braces were ready to come off before he left for Chicago to begin filming *The Breakfast Club* but his mother called me and said, "Don't take the braces off yet. They're part of his character."

ON NYC: From the time you wake up there is energy vibrating from the sidewalk. I often like to stay in the city on the weekends because it is empty. Sunday mornings are wonderful because the energy still reverberates but it is quiet.

OFFICE AMBIANCE: My office is small and very homey. I have a table with a hollowed-out section devoted to Legos, which entertains my patients and greatly amuses the adults. I also have a card catalog from the old 42nd Street Library with little prizes in the drawers for my patients' little brothers and sisters.

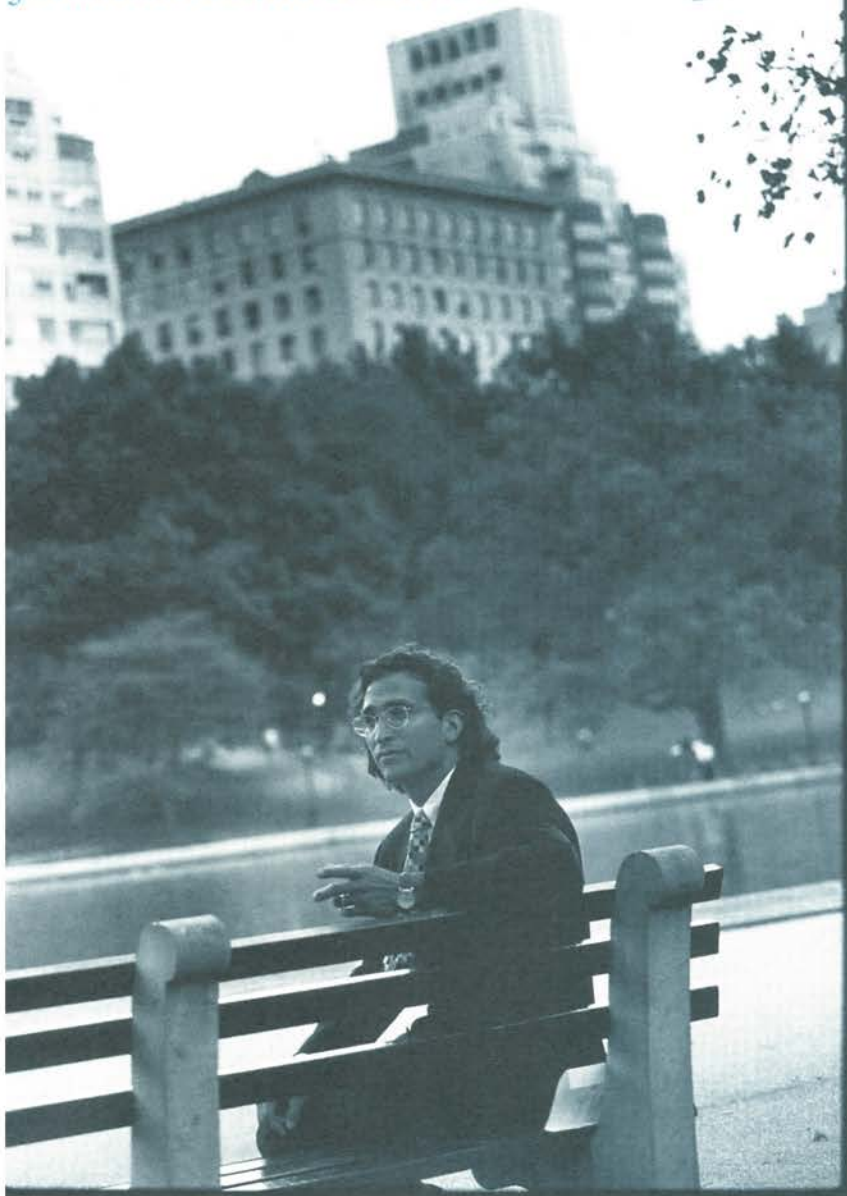
ON LIFE BEFORE DENTISTRY: I had graduated from the University of Pennsylvania as a pre-med but had never finished chemistry. I had a choice to become a police detective or a dentist. Since I couldn't try out being a detective, I tried out being a dentist by working as a dental assistant. The dentist I worked for was fabulous so I finished chemistry and enrolled in dental school.

ON SUCCESS: You love what you do. It's a real shot in the arm when you make a patient smile and change the way they feel about themselves.

Constance Pinover Winslow
ORTHO 78



Jonathan Levine DMD 81



NY ALUMNUS: Jonathan Levine DMD 81

PRACTICE: 923 Fifth Avenue (Central Park)

TRANSPORTATION TO WORK: I take the subway. It gives me time to catch up on my reading.

FAVORITE SPOTS: S.O.B.'s jazz club, Soho, the theater district

CURRENT READING LIST: *Business Management Theory—The Learning Organization* by Peter Senge; *Enlightened Leadership* by Oakley and Krug

PHILOSOPHY OF PRACTICE: I spend a lot of time with my patients, educating patients is crucial to changing their attitudes about dentistry. I think of my office as a learning organization. The difference between mediocrity and excellence is attitude.

ON BU: I couldn't have done any of this without my BU training. Only later when I was practicing did I fully realize the level of sophistication at which the school operated, through the rigor of the curriculum and the caliber of the instructors. We received a unique education. The postdoctoral programs undeniably strengthened the predoctoral program. In a word my education was superb.

PRACTICING IN NYC: New York is very fast-paced; the well-known and successful have no time to wait. My practice is a cross between a classical prosthodontist's office and a high fashion hair salon. This work is challenging so I try to control as many variables as I can by putting together the best possible team (fourteen on staff) to solve my patient's esthetic needs. Good technical back-up is critical. During the past ten years, dentistry has become a service industry.

RECENT TRAVEL: Bolzano, Venice, Rio de Janeiro, and Sao Paulo. Lecturing keeps me well-informed and well-traveled.

RELATED PURSUITS: I'm writing a chapter on computer imaging, which I have incorporated into my practice since 1987, and writing software.

CONTINUING EDUCATION: It's essential. Continuing education courses sharpen my lecturing, keep me focused and challenged. Participating benefits both the teachers and the participants.

HOBBIES: Mountain biking, coaching my son's soccer team, the Big Red Warriors.

ON SUCCESS: Success is making a difference in your field to others.

Madeline Apfel DMD 80

NY ALUMNA: Madeline Apfel DMD 80

CURRENT CONNECTION: Goldman School of Dental Medicine Alumni Board member. Co-chair of the New York Alumni Club.

PRACTICE: 7 Gramercy Park West (Park Ave. and 20th St.)

TRANSPORTATION TO WORK: I walk.

FAVORITE SPOTS: Park Avalon, Gramercy Tavern, Bouley's in Tribeca, Gramercy Park itself.

CURRENT READING LIST: I just finished *A Time to Kill* by John Grisham.

PHILOSOPHY OF PRACTICE: My patients run the gamut from professionals to artists and actors. People are what motivate me—getting to know them, relieving their pain.

ON NYC: Generally, people see it as a metropolis, full of traffic and noise, but I don't feel that way living here. I see people I know walking their dogs; I know all the shopkeepers in Gramercy Park. New York has everything you could ever possibly want, more than you could ever do or experience. New Yorkers are savvy. I have to be current on all subjects—politically, socially, economically. Patients feel more comfortable when you're on their wavelength.

ON LIFE BEFORE DENTISTRY: I sang showtunes and Top 40 hits with a piano backup at local bars like J.C. Hillary's on Boylston Street during college and dental school to earn extra money.

ON BU: I appreciate my BU training, especially working in New York. This is a challenging environment—my patients expect excellence. When I'm performing a procedure, I'll think back to a particular professor or class, and I'll hear the instructor's exact words telling me what to do all over again. The discipline was rigorous but the faculty were human. One of the reasons I serve on the Alumni Board is that I want to give something back.

ON PATIENTS: I find cosmetic dentistry especially fulfilling. When I put on laminates, I can change the way patients feel about themselves. I treated a middle-aged man who had lived with an unattractive smile. When I finished applying porcelain laminates to his front teeth, he told me, "I've wanted to look like this all my life." He was crying with happiness and I almost began crying. At that moment I felt that all my training and experience were worth it.

INTERESTS: I love the half-price ticket booth at 47th and Broadway. I play tennis, piano, guitar, and I belong to two gourmet clubs.

ON SUCCESS: Success is both being a happy person and an accomplished professional. Nothing equals gaining a patient's trust. I still see many patients who have moved out of the city and out of the state. I have patients in New Mexico and in California I see every six months, and I have a patient currently living in Japan who still sends me Christmas cards.



NY ALUMNUS: Mitchell Sabbagh DMD 87

CURRENT CONNECTION: Goldman School of Dental Medicine Alumni Association Board member. Co-chair of the New York Alumni Club.

ADDRESS: 62 West 45th Street (near the theater and diamond districts)

TRANSPORTATION TO WORK: I walk. My favorite route is through Central Park. An alternate route is down Madison Avenue.

FAVORITE SPOTS: Gotham Bar & Grille, Second Avenue Deli, Elaine's.

PHILOSOPHY OF PRACTICE: I take the time to explain everything, even a simple amalgam. I want to change people's perceptions of dentists by building trust. When I look at the schedule each morning, I don't look at the procedures. I look at who is coming in for a visit.

ON BU: I've been trained to aim for the ideal all the time. BU provided me with the technical, didactic, and theoretical knowledge behind a procedure. A skilled practitioner can't gloss over details. The inundation of knowledge we received was overwhelming to us at the time, but it was crucial.

MEMORABLE PATIENT: One of my patients had tetracycline staining. He never smiled, and covered his mouth when he laughed. I applied bleach for about two months then placed porcelain veneers on his upper and lower teeth. Within a year, he had a promotion, got engaged and was married. While we can't perform miracles, we *can* change a patient's outlook.

ON NYC: Exciting, fast-paced, friendly, frantic, and totally entertaining. It is the center for arts and business. My practice sees poets, artists, actors, and midtown bankers. I'm very close to the theater district. Forty percent of my patients are from the media companies, including M-TV, CNN, Time-Warner, HBO. And I don't just see the executives. I've got the backstage crew for the Conan O'Brien show as patients, too.

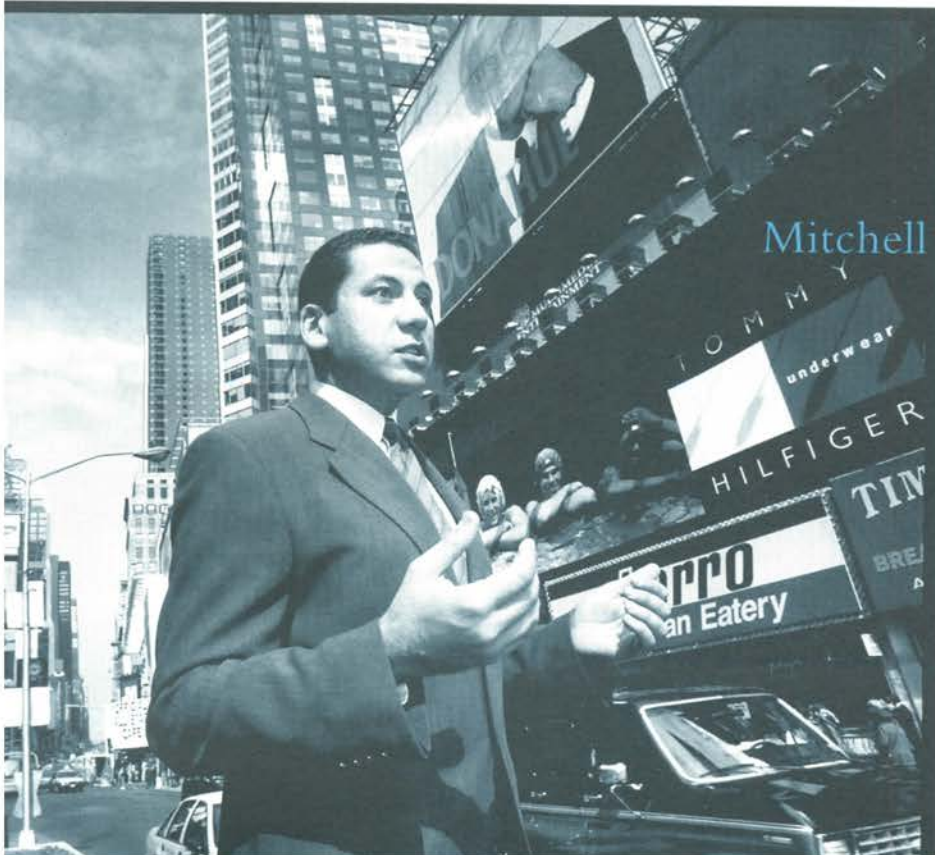
ON RESOURCEFULNESS: Originally, I put an ad in *Backstage*, a New York theater newspaper somewhat like *Variety* magazine in its format. I found some patients through the ad and then the rest of my practice was built by word of mouth.

FAVORITE CONVENIENCE: The intraoral camera. I show my patients what I see as I explain procedures. I'm able to say, "This is my view. What would you do if you were me?"

ON CONTINUING EDUCATION: I'm chairman of the Committee for New Dentists of New York City. Continuing education is essential. There are many continuing education courses for new dentists: starting a practice, business loans, clinical courses. It's a competitive climate. There are no guarantees.

ON SUCCESS: Success is a referral. I know I have earned my patients' trust and respect.

Mitchell Sabbagh DMD 87



conversations

Harold Levin ENDO 62 and *Louis Brown* PROS 91 discuss mentoring, teaching, and how the school has responded to the changes in practicing dentistry. Uncle and nephew, Levin has been practicing for thirty-five years, Brown for twelve. Levin, professor of endodontics, and Brown, assistant professor of restorative sciences, maintain private practices on the North Shore in addition to their teaching responsibilities. They talked in Harold Levin's Lynn office, which is right across the hall from Brown's office.

Louis Brown: How do you think dentistry has changed?

Harold Levin: I think it has changed for the better. First, we have caries control, so that patients are not losing so many of their teeth. We can spend more time on individual teeth, practicing cosmetic or ideal dentistry. In the past, we were addressing many more problems. We can offer so much more than we could forty years ago.

I had a patient say to me recently, "How can you have done the same thing every day for thirty-five years?" I laughed. I said that everything but the biology has changed. We have new techniques, using new materials, instruments, and technology. Our knowledge has increased. An example is the warm gutta percha technique developed by Dr. Schilder. There are also many examples in periodontology and prosthetics. There are more dental professionals graduating to address public health needs. Dentistry is continually changing. How could I be bored? Why did you choose dentistry, Louis?

It seemed a meaningful thing to do. I also had you as a mentor. I've been lucky to have had remarkable teachers during dental school. Jean Emerling was one of my mentors as a predoctoral

student and has become even more of one since I became more involved in teaching. After graduating, I practiced with Dr. Ephraim Shulman [PROS 73] who also taught at the school. Jean and Eph showed me how to conduct my life in dentistry, interacting with students and patients. Dentistry is a big part of my life; I have to know that I'm doing it right and doing the right thing for my patients and students.

Sometimes you help people in ways you could never predict. You contribute to the school, to students, and most importantly, to your patients in your practice.

With students you have the opportunity on any given day to have an impact.

How has the school changed?

I think the biggest change at the school has been the expansion of the predoctoral program. I came to the school in the early 1980s as a predoctoral student and remained involved with the predoctoral program as an instructor. The predoctoral class started out with

about twenty students. My class size was probably in the forties with five or six advanced standing students. And now, as an instructor, I have about 115 predoctoral students.

Of course, I started with a different perspective, when the specialty disciplines in dentistry were very young and there was no school that exclusively offered graduate programs in the dental sciences. In 1962, I received a certificate in endodontics from the Department of Stomatology from the School of Medicine. We started out at a four-story brownstone on East Concord Street with a lecture hall on the first floor, the Dean's Office on the second floor, a microscope laboratory on the third floor, and the pathology lab on the fourth floor. We did our clinical work in the old Talbot building of what was the Massachusetts Memorial Hospital. There were two endodontic graduate students, four or five periodontal graduate students, and a couple of oral surgery residents.

Harold Levin
(left) and
Louis Brown





It was exciting to be there as the dream took shape. The faculty that Dr. Goldman had been able to recruit was unbelievable—clinicians who cared very strongly about patient care and the future of dentistry and excellence. Henry had the clinical skills and the energy to make his mark at a very young age in pathology and periodontology which allowed him to attract talented people. So has the school reinvented itself? Of course. It's a school of the 90s, not the 60s. As an alumnus, I think it still has the original element that made it so great—the spirit of striving to do things as well as they can be done.

When I was a student, how well the faculty interacted with the students was important. I think that influenced a number of my classmates who are still teaching at the school. Many of the faculty we had as students twelve or fourteen years ago are still there. I hope that how we were treated as students is still reflected in how we deal with our students today.

I think alumni should know that the school is very different today. Although it is larger, the school has responded to the needs of the dental profession.

I think I was the last of the classes to come out before some extreme changes took place in dentistry. *Newsweek* ran a cover story in the third year of my predoctoral program about this new disease called AIDS, which they thought might be spread like hepatitis-B. I remember saying to some classmates, "This will affect us." So infection control—gloves, protective eye wear—is now integral. Second, managed care has affected dentistry. The school has been active in addressing the reality of managed care and trying to position itself so that it can still carry out its mission. It's a challenge because while the issues surrounding care have changed, much of what we teach is traditional knowledge that students must learn. Third, the reality of how dentists practice has changed so we try to focus on the skills that dentists need today. I teach a course in pre-

clinical fixed prosthodontics. I try to show students the correct approach and how to differentiate that approach from what I perceive is the wrong way. I want to prompt students to think about their responsibilities to their patients because all aspects of dentistry are interconnected, no matter how technical or small.

The school is emphasizing general dentistry more, but the graduate programs are still very strong. The graduate programs also give strength to the predoctoral programs.

I remember when I was in the postdoctoral program, the faculty would ask us, "Who will be there to teach future generations? Who has the training?" It was their way of pointing out our responsibilities. I think that is what has remained the same about the school—and you see it among the new young faculty as well—the faculty's enthusiasm and desire for teaching students and practicing dentistry. It's not just the clinical skills that are essential; it's also personal skills, ethical conduct as a dentist, instructor, role model.

Teaching has always been a big part of my life. I've had wonderful opportunities to know and learn from and hopefully, influence over 300 of the postdoctoral endodontic students and help them with their education. Alumni are a big part of the school. Some of my closest personal relationships are with my former students and the faculty. The bonds of our alumni have continued to benefit all of us at the school.

Every time one of our graduates treats a patient well and provides exemplary service for himself or the community, he's making the school strong. He's making it more likely that future dentists will choose to attend Boston University.



progress report

Welcome to the School of Dental Medicine

January 1, 1996 the school changed its name to the Henry M. Goldman School of Dental Medicine to more accurately reflect the scope of the curricula, patient care programs, and research initiatives. The more comprehensive name better represents the institution thirty-three years after its founding, more accurately portrays its mission, and sets the stage for the school's future.

New opportunity

This Spring the Goldman School of Dental Medicine was granted approval by the Office of the Provost and the Board of Trustees of Boston University to develop its first PhD program. The PhD Program in Molecular and Cellular Oral Biology will be administered by the Division of Medical Sciences at the School of Medicine after approval by its Academic Policy Committee. The School of Dental Medicine welcomes this opportunity to join the School of Medicine, School of Public Health, School of Engineering, and Graduate School of Arts and Sciences as the units within Boston University able to grant the degree.

Physical changes

The desire to provide a more professional atmosphere for patients, students, faculty, and staff prompted significant renovations this year. The predoctoral care center's reception area on the fifth floor has been transformed and expanded. Other improvements include fifty new dental chairs, a new paging system on the first and second floors, and two additional e-mail stations on the fifth and sixth floors. Equally important is the continual enhancement of the curriculum. Planning for the construction of a preclinical simulation laboratory on the sixth floor has begun. The school will be one of approximately ten dental schools in the country to incorporate this state-of-the-art technology, which will be established in what currently are the middle and back laboratories and the plaster room on the sixth floor.

Learning how to learn together

A Learning Organization initiative took root at the School in early January as a cross-section of administration, alumni, faculty, staff, and students participated in Futures Conferences to brainstorm ways to transform the organization to meet the demands of the next decade. Subsequent meetings involved additional members of the school. Action teams have been formed to focus on four main areas: communication, faculty and staff development, information technology, and customer service.



Do you recognize the patient reception area on the school's fifth floor?

We honor our own



Dr. Anthony Gianelly, professor and chairman of the Department of Orthodontics, received the inaugural Spencer N. Frankl Award for Teaching Excellence. This award recognizes Gianelly's lifetime achievement in dental medicine, from his pioneering research to his dedication to students. Gianelly has been chairman of the Department of Orthodontics since 1967 and holds concurrent appointments as professor of orthodontics at the School of Dental Medicine and research professor of biochemistry at Boston University's School of Medicine. As the 1996 commencement speaker, Gianelly addressed the 120 graduates of the predoctoral program and 81 graduates of the post-doctoral and graduate programs, observing that "This is the end of your doctoral training and the beginning of your new careers. You will have a positive impact on the *quality of life of your patients*. Their lives will be better because you exist. We're proud of your accomplishments which enabled you to join our group of practitioners and educators." It is this dedication that has served both students and the profession.

Reaching for the APEX of education

A two-day Extramural Conference, held in April on Cape Cod, was the first to expand on the traditional Externship Program meeting by including a large number of intramural faculty as well as APEX faculty. Eighty people gathered to share experiences, techniques, frustrations, and successes. Faculty from fifty APEX offices and twenty externship offices attended, and founding members of the program were honored for their dedication.

Corporate appeal

The school established a dedicated, state-of-the-art Clinical Research Center to conduct long-term clinical studies and trials, allowing the dental school to take on a more comprehensive range of clinical research in areas such as dental materials, radiology, implantology, and periodontology. Staff at the center will provide guidance on grant writing, study design, research protocols, documentation, any necessary data management, and data analysis.

In the service of others

The inaugural Anthony Westwater Jong Public Health Seminar brought together public health professionals to face the challenges of oral health care in the next century. Distinguished speakers included Dr. Steven Corbin, chief dental officer of the U.S. Public Health Service; Dean Spencer Frankl; Dr. Marsha Butler, director of global oral health improvement, at Colgate-Palmolive; and Phyllis Bagwell-Cater, senior vice president of programs and services, and Dr. Dawn West, dental director, both of Dimock Community Health Center.

Intense study

The Fifth International Symposium on Implantology, held in Boston, offered a six-day lecture and hands-on program leading to certification in the placement and restoration of four of the most popular implant systems. For the first time, participants watched an actual surgery performed by Richard Lazzara PERIO 76, president of 3i Implant Innovations, Inc.

Show us your smile

The fourth annual Special Athletes, Special Smiles event took place at the Massachusetts Special Olympics on the MIT campus June 22 and 23. Faculty, staff, and students participated in the national oral health education, screening, and referral initiative, founded by Steven Perlman PEDO 76, clinical director, and development officer Glenn Kaufhold. Screenings were also held in twelve other cities this year.

The Medical Center

University Hospital, Boston City Hospital, and Boston Specialty Rehabilitation Hospital merged into the Boston Medical Center on July 1, 1996. The center, a private nonprofit institution, will continue to carry out the mission of the former Boston City Hospital to provide access to health care for all. Dr. Aram Chobanian, dean of the School of Medicine, became provost of the Medical Center campus. Dr. Richard Egdahl, the university academic vice president for health affairs since 1973, retired July 1.

appreciation

Profile in Philanthropy: Dr. and Mrs. Justin Lee Altshuler

"It goes way back to the bronze plaque," remarked Dr. Altshuler when asked why he and his wife support Boston University School of Dental Medicine. The bronze plaque, of course, is the one in the school's lobby which recognizes the first donors to the school. "It was probably a relatively small gift. We did not give much thought to charity. I had an aunt who was a patient of Dr. Goldman's and she encouraged me to make a donation."

Since the early days of the school and that first gift, the Altshulers have become marvelous patrons of the school. "When we had the opportunity to sell our property on Bay State Road to the University, we made a sizable donation to the school. It made us feel great," said Dr. Altshuler.

"We had the chance to make another donation this spring. It was Dean Frankl who came up with the idea of a student revolving loan fund, and it excited us greatly. It's a wonderful, warm feeling to look in the mirror and say, 'I don't know how I did this, but I sure am glad I had an opportunity to follow through.'"

When asked why they chose Boston University School of Dental Medicine, Dr. Altshuler said, "It's because the school is unique. It was born from Henry Goldman's love of what he was doing and his desire to excel. When Spencer Frankl took over, he did not sit back. He moved the school forward by creating innovative programs."

Noted Mrs. Altshuler, "Everybody talks about giving back, but frankly it's how we feel. We want to give something back to the profession."

To learn more about how to create a student revolving loan fund or other opportunities to support the School of Dental Medicine, please write to the Office of External Affairs, 560 Harrison Avenue, Suite 402, Boston, MA 02118, or call 617/638-4891.



Justin and Bunny Altshuler in their Newton home. In addition to Boston University, the Altshulers are also supporters of Temple Shalom in Newton, Emerson College, Spaulding Rehabilitation Hospital, and the Museum of our National Heritage, a New York institution led by their son-in-law, David Altshuler.

Places matter. Many of us establish long relationships with schools, houses of religious worship, health care facilities. And for some people, returning something tangible to the organization is a very special act.

"It enriches us to give something back to the community," said Dr. Herbert Schilder in talking about a gift that he and his wife, Joan, have given to the School of Dental Medicine to help establish an endodontics research center. "We've spent so much time at Boston University, it was a logical place for us to make a significant gift."

Their donation, in the form of a charitable gift annuity, will be the lead contribution to establish the new endodontics research center, while a second pledge will help fund annual operations. According to Dr. Schilder, "We chose various vehicles for our gifts. The gift annuity returns income to us as long as one of us is alive. If you feel you want to give something, this is a painless way to do it." Added Mrs. Schilder, "With this type of donation there is a pleasure in seeing something good happen with it while you are alive."

To find out about charitable gift annuities and other ways of giving to Boston University, please call or write to the Office of External Affairs, 560 Harrison Avenue, Suite 402, Boston, MA 02118, or call 617/638-4891.

Profile in Philanthropy: Dr. and Mrs. Herbert Schilder



Joan and Herbert Schilder in their home in Newton, Massachusetts. Dr. Schilder joined the Boston University faculty in 1959, and became chairman of the Department of Endodontics in 1963. The school's first endowed professorship, the Herbert Schilder Chair in Endodontics, is named in his honor.

appreciation

During the last fiscal year (July 1, 1995 to June 30, 1996), Boston University Goldman School of Dental Medicine received contributions totaling more than \$880,000, representing the generosity of many alumni, friends, corporations and foundations. It was a banner year.

Through this publication, we offer thanks for the voluntary financial support we were heir to in FY 1996, and we recognize those who provided leadership in achieving the final result.

Gifts and grants play a vital role in preserving excellence as a standard in the classroom, clinical floor, research laboratory and in the community. They help the School of Dental Medicine provide the finest education and services to our students, the profession, and the community.

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Dr. Anthony J. Sciuto
Dr. and Mrs. Joel M. Seidman
Dr. Rodman K. Shale
Dr. Leonard Shapiro
Dr. Sydell Shaw
Dr. Donald B. Sherman
Dr. Stephen I. Shore
Dr. Arthur A. Siciliano
Dr. Joseph B. Silberman
Dr. Remo A. Sinibaldi
Dr. Stevan M. Silberstein
Dr. Stephen M. Silston
Dr. Arnold D. Silverman
Dr. Remo A. Sinibaldi
Dr. Bruce E. Smith
Dr. Gerald A. Sohmer
Dr. Jay A. Solnit
Dr. Murray Spain
Mrs. Carol A. Speranza
Dr. Charles L. Steffel
Dr. James M. Stein
Dr. Marilyn V. Steinert
Dr. Robert L. Tanner
Dr. Allen W. Tarro
Dr. Harvey I. Taub
Dr. Kary Taylor
Dr. Kevin A. Taylor
Dr. Sergio Tejedor-Leon
Dr. Warren R. Tessler
Dr. William J. Testa
Dr. James N. Thacker
Dr. Dewey J. Tiberii
Dr. Paul Tolmie
Dr. Harold Turner
Dr. John M. Underhill
Dr. Matthew T. Walton
Dr. Walter A. Weaver
Dr. Denise E. Weber
Dr. Frank Weisner
Dr. Richard C. Weiss
Dr. Joseph D. White
Dr. and Mrs. Sidney W. Winchell
Dr. Richard B. Wittenberg
Dr. Peter S. Wohlgenuth
Dr. Rudolf G. Wunsch
Dr. Hideo Yamamoto
Dr. Richard K. Yost
Dr. William M. Zanger
Dr. Oreste Zanni
Dr. Matthew L. Zizmor

alumni news

1961



Seymour Hoffman ORALP 61 has begun his third career as a docent at the Birmingham Museum of Art. He initiated a program for visually impaired persons to appreciate painted works of art through "tactiles," three-dimensional representations of art. Other museums around the nation subsequently began to emulate this thoughtful and innovative idea. In addition to his current philanthropic pursuits, Hoffman was professor of pathology and dentistry at the University of Alabama since 1976 and served in the Navy where he was awarded the Legion of Merit for "exceptionally meritorious service in the outstanding performance of duty"

1962

Joel Dunsky ENDO 62 was honored by Harvard University for twenty-five years of service to the School of Dental Medicine. Dunsky has served as director of predoctoral endodontics, as assistant dean for administration, and director of continuing education. He also has served on admissions, promotions and curriculum committees.

1972

David Federick PROS 72 presented research at the 1995 International Association of Dental Research General Session in Singapore.

1974



Barry Chapnick ENDO 74 was elected international editor of the Alpha Omega International Dental Fraternity. Chapnick will serve a three-year term as international editor and assume the position of international president in January 2000. Chapnick is a fellow in the International College of Dentists and the Pierre Fauchard Academy, and has served as president of the Canadian Academy of Endodontics, and the Ontario Society of Endodontists, among other accomplishments. He maintains a private practice in Toronto.

1975

Raymond Renzik PERIO 75 is living and working in Ormond Beach, Florida with his wife, Mary Lou and three children, Eric, Kelly, and Luke.

Marvin Steinberg ORTHO 75 was awarded a fellowship in the American College of Dentists at the organization's 75th anniversary annual meeting in Las Vegas last October. This honor recognizes commitment to excellence in the profession and to the community. Steinberg is a fellow of the Royal College of Dentists of Canada, a diplomate of the American Board

of Orthodontics, and is first vice president of the Quebec Association of Orthodontists. He has served as president of the Federation of Dental Societies of Greater Montreal and of Alpha Omega Mount Royal Dental Society. Steinberg also serves as a guest lecturer at the dental school of McGill University in Montreal.

1976

Dushanka Kleinman DPH 76 has co-authored a National Institutes of Health report entitled *Tobacco Effects in the Mouth: A National Cancer Institute and National Institute of Dental Research Guide for Health Professionals* for the U.S. Department of Health and Human Services. Kleinman serves as deputy director of the National Institute of Dental Research and is a distinguished researcher of the epidemiology of oral mucosal tissue diseases and disorders.

Steven Perlman PEDO 76 was elected president of the Academy of Dentistry for Persons with Disabilities. Perlman represents the Academy on the Federation of Special Care in Dentistry Board. As president, Perlman is involved in shaping public policy and working with various health care groups, such as the American Dental Association. Perlman is clinical director of Boston University's Special Athletes, Special Smiles oral health initiative.

Marcos Vecchini PERIO 76 has served as president of the International Academy of Periodontology from 1992 through 1995. He finished his tenure at the fifth meeting of the International Academy of Periodontology in Monte Carlo, Monaco.

1980

Mina M. Fabiano Holland DA 80 is married, has two children, and is living in Peabody. She is happy to report she has been working for the same orthodontist for fifteen years.

Alice Burger Betz DPH 80 was appointed as special assistant to the dean in the College of Health and Human Services at Youngstown State University. She has served as the director of the university's dental hygiene program for nine years. She has been an associate professor since 1991.

1981

Joseph Calderone DMD 81 has spent the last fourteen years in Florida practicing dentistry, playing golf, and raising his family. He has a daughter, Alexis, age five, and a son, Tyler, age three.

June Owens PEDO 81 started a non-profit organization, *Children's Oral Health Institute of Tennessee* in Nashville. The institute emphasizes prevention, education, and research.



Donald Yu ENDO 81 has been elected chairman of the endodontic program at the University of Alberta, which became the Department of Oral Health Sciences, Faculty of Medicine last April. Yu is a member of the Alberta Society of Endodontists, the Alberta Dental Association, the Canadian Dental Association, and the Royal College of Dentists of Canada. He established the Advanced Continuing Dental Education Institute Foundation for Canadian dental practitioners and is its president. Yu maintains a private practice with his brothers, Charles Yu PERIO 78 and Henry Yu ENDO 83 in Edmonton, Alberta.

1982

Jeffrey Blum PEDO 82 has completed his sixth year as chief of pediatric dentistry at the Medical College of Pennsylvania. He also is a diplomate of the American Board of Pediatric Dentistry.

Joseph Ciriaco Jr. DMD 82 and his wife, Cathy, are happy to report the birth of their third son, Justin, in April, 1995. Justin joins his brothers, Andrew, age six, and Jordan, age four.

Kathryn Sucher NUTRITIONAL SCIENCE 81 currently is an associate dean in the College of Applied Sciences and Arts, and professor of nutrition at San Jose State University.

1983

John Beal DPH 83 has merged his general dentistry practice with Drs. Rogers and Goodwin of Methuen. He also writes medical articles for the Implant Society of Cambridge, and teaches continuing education courses in negligence law for Northeastern University's College of Pharmacy in Boston.

Carlo Castellucci ENDO 83 gave a lecture to the Hong Kong Society of Periodontology on Endodontic Periodontic Interrelationships. Two of the three founders of the Hong Kong Society of Periodontology were Goldman School graduates, Rupert Gildenhuis PERIO 73 and Martine Boisson ORTHO 81. Currently, this is the only society for dental specialties in Hong Kong.

1986

David Sharf DMD 86 became a diplomate of the American Board of Periodontology. Also, Sharf and his wife are happy to report the birth of their second child, Samantha Paige in March 1995.

1988

Keith L. Schwartz DMD 88 opened his own practice in Parkland Florida in March of 1994, where he and his wife, Toni, currently are residing.

Saad Saeed Alkuwari DPH 88 maintains a private practice in Doha, Qatar. Alkuwari represents Qatar in the Oral Health Committee of Gulf States. He also is chairman of the Department of Dentistry for the government of Qatar.

1989

Martyn S. Green PERIO 89 became a diplomate of the American Board of Periodontology in May, 1995 in recognition of his significant achievements in the field.

James Meyers PERIO 89 recently became a diplomate of the American Board of Periodontology. He also recently completed a two-year term as president of the Pittsburgh Academy of Periodontology. Meyers practices in Pittsburgh, Pennsylvania.

Patrice Milot PROS 89 was promoted to associate professor of prosthodontics at the University of Montreal Dental School. Milot currently lives in Ile Bizard, Quebec.

Robert Van Ess PEDO 89 is running a thriving solo general practice, emphasizing pediatrics and orthodontics for the past six years, in Hughesville, Pennsylvania.

Steven H. Young DMD 89 has completed his general practice and prosthodontics residencies. Currently, he is in private practice with his father and brother in Toronto. Young and his wife, Kelli, reside in Toronto.

1991

Hershel Ellenbogen DMD 91 is director of the Ryan White Dental Unit at the Albany Medical Center Hospital at the University of Albany. Ellenbogen resides in Albany.

Steven Faigan PERIO 91 currently maintains a private practice in periodontics in Kelowna and Penticton, Canada. He is a member of the Canadian Academy of Periodontists, the American Academy of Periodontology, and the International Congress of Oral Implantologists.

Denise M. Theriault DMD 89, PERIO 91 has opened a periodontology practice in Portland, Maine.

1992

Larry A. Sylva ENDO 92 and his wife Kathi sailed around the British Virgin Islands with three friends in January; they plan to visit Portugal in November. Sylva has been joined in his office in Pinole, California by Irene Yeh ENDO 94 and Steve Dixon ENDO 95.

Rita Gruszecki-Horn DMD 92 completed her residency at North Shore University Hospital in June 1993. She and her husband, Larry, reside in Kings Point, New York, with their daughter, Marisa, age two, and their son, Mason, who was born in March 1995.

Scott C. Peters DMD 92 is currently practicing pediatric dentistry in Oakland, New Jersey and is living in New York City.

1994

Jeanne Chung DMD 94 is completing her advanced education in general dentistry program at the University of Pittsburgh.



alumni news

Coming to a Region Near You

Interested in continuing education courses? Just moved and want to contact fellow alumni in a new city? The School of Dental Medicine has begun organizing regional alumni clubs with great success. "The regional alumni clubs were formed because our alumni are broadly dispersed. Our graduates in other cities want a connection to Boston University and to their fellow alumni," said Glenn Kaufhold, development officer for the school. "Leadership is local—they decide whether to plan study clubs, networking opportunities, or social events. We're here as a resource to manage the logistics." Here are profiles of three flagship clubs. Future plans include establishing regional alumni clubs in South Florida and New England. Stay tuned for further developments in your area. For more information, contact Mari McKeon in the Office of External Affairs at 617/638-4891.

Greater New York

Inception: September 1994
Chairs: Madeline Apfel DMD 80, Mitchell Sabbagh DMD 87
Location: Williams Club, NYC
Upcoming Events 1996-1997

September 11

Yuri Shamritsky ENDO 94, assistant clinical professor, *Cleaning, Shaping, and 3D Obduction; Microendodontic Techniques*

October 30

Steven Morgano DMD, associate clinical professor, *Restoration of the Endodontically Treated Tooth*

December 4

Alumni reception at the Greater New York Dental Meeting, New York City Marriott Marquis

February 5

Douglas Schildhaus PEDO 93, *Current Practices in Pediatric Dentistry*

March 5

Constance Pinover Winslow ORTHO 78, *Orthodontics for the General Practitioner*

April 2

Thomas Kilgore DMD, professor of oral and maxillofacial surgery, *Surgical Pathology: Differential Diagnosis*

Greater Toronto

Inception: February 1996
Chairs: Adam Persky DMD 90, Silva Battaglin DMD 90
Location: Sheraton Parkway Toronto North, Richmond Hill
Upcoming Events 1996-1997

September 9

Michael Moscovitch PROS 78, assistant clinical professor of prosthodontics, *Perspectives in Current Implant Therapies*

October 10

Dan Nathanson MSD 85, professor and chairman, Department of Biomaterials, *Current Developments in Restorative Materials*

February 3

Adam Persky DMD 90 and Mark Horstman MBA, *Business Plans and Public Relations for Dental Practices*

March 5

John McManama DDS, professor of restorative sciences, *Adhesive Restorative Dentistry: An Update*

Greater Washington D.C.

Inception: November 1996
Upcoming Events 1996-1997

November 4

Thomas Kilgore DMD, *Clinical Management of Odontogenic Infections*

February 13

Alumni reception at the D.C. Dental Society Meeting, Sheraton Washington

Alumni Events

September 9

Board of Visitors meeting, Boston
Alumni Club meeting, Toronto

September 29

Alumni reception, American Dental Association Annual Session, Orlando, Florida

October 9-14

Endodontic Alumni Association meeting, Chatham, Massachusetts

October 10

Alumni reception, American Academy of Periodontology meeting, New Orleans, Louisiana
Alumni Club meeting, Toronto

October 28-November 1

Alumni phonathon, Boston

January 24

Alumni reception at Yankee Dental Congress, Boston

April 11

Continuing education program/alumni reception, San Juan, Puerto Rico

May 7-10

Alumni reception, American Association of Endodontists meeting, Seattle, Washington

May 16

Reunions for the DMD classes of 1977, 1982, 1987, and 1992, Boston

May 17

Spring gala, Boston

May 18

Commencement, Boston

For more information on receptions and alumni clubs, contact the Office of External Affairs, 617/638-4891. Call the Division of Continuing Dental Education (617/638-4738) for seminar information and a complete list of continuing education courses.



When Only the Best Will Do

In May, the Alumni Association honored graduates who have made significant contributions to the school, community, and profession. This was the fifth year that the association presented the Distinguished Alumni Awards.

Dr. Santo Cataudella (ORAL AND MAXILLOFACIAL SURGERY 1960)

Service to the School

Motivated by his love of dentistry and desire to help others, Dr. Cataudella joined the faculty of Boston University in 1988 after twenty-eight years of private practice in Lawrence and Andover, Massachusetts. Cataudella is the course director of the Pre-doctoral Education Program in the Department of Oral and Maxillofacial Surgery. Dr. Donald Booth, professor and chairman of the Department of Oral and Maxillofacial Surgery, presented the award, observing, "What makes Sam so deserving of this award is the contribution he makes every day to our students. Sam takes the time to work with students, guiding them throughout their education. He is an exemplary role model for our students and faculty." Cataudella is a member of many committees in service to students, including: Admissions, Curriculum, Oral Surgery Admissions, and Student Enrichment.

Dr. Eleni Kousvelari (PROSTHODONTICS 1976)

Service to the Profession

Dr. Eleni Kousvelari, an internationally recognized researcher, directs the research programs in salivary glands and AIDS at the National Institute for Dental Research, Division of Extramural Research, National Institutes of Health. Dr. Maria Kukuruzinska, associate professor of periodontology and oral biology, presented Kousvelari with this award observing, "Eleni has had a very distinguished career. Her fields of interest include the regulation of gene expression in exocrine glands and the development of salivary glands. She has been widely published, and is one of the profession's premier investigators." Kousvelari served as an instructor in prosthodontics at the Goldman School for three years. She also was assistant professor in the Department of Oral Diagnosis at the University of Connecticut School of Dental Medicine, and prior to her current position at the NIDR, she was a professor of prosthetic dentistry at Temple University. She is a member of the International Association of Dental Research, and the American Society of Cell Biology.

Dr. Mark M. Roseman (PEDIATRIC DENTISTRY 1970)

Service to the Community

"Mark specializes in the care of persons with special needs, a population that, for a variety of reasons, has long had its dental needs ignored. Franciscan Children's Hospital is a tremendous resource for the children of Boston and the surrounding communities, and Mark is an integral part of that service," said Dr. Christopher Hughes, chairman of the department of pediatric dentistry, who presented the award. Since 1974, Roseman has been on staff at Franciscan Children's Hospital and Rehabilitation Center in Brighton and in 1988 was promoted to chief of dentistry and oral surgery. At Franciscan, Roseman manages the dental services unit which treats pediatric and adolescent patients with multiple disabilities. Roseman has held a faculty appointment at Boston University since 1970.

This spring marked another special event. The School celebrates twenty-five years of dedicated service from Administrative Director Kathi Ferland.

Kathi Ferland

ADMINISTRATIVE DIRECTOR

Service to the School

"In her position as administrative director, Kathi works daily as an educator and mentor to the faculty, student body, staff, and patients," said Dean Spencer Frankl, upon presenting Ferland with her award. He went on to say, "Attention to detail and organization is always evident in her work. Her open approach to communication has been a productive one, as on a daily basis, faculty, students, and staff do not hesitate to seek her counsel and direction." Ferland joined the school in 1971 as a secretary in the departments of orthodontics and pediatric dentistry. She was promoted to administrative assistant, and subsequently to assistant to the dean in 1977. Ferland has served as the school's administrative director since 1987.



Santo Cataudella OMS 60

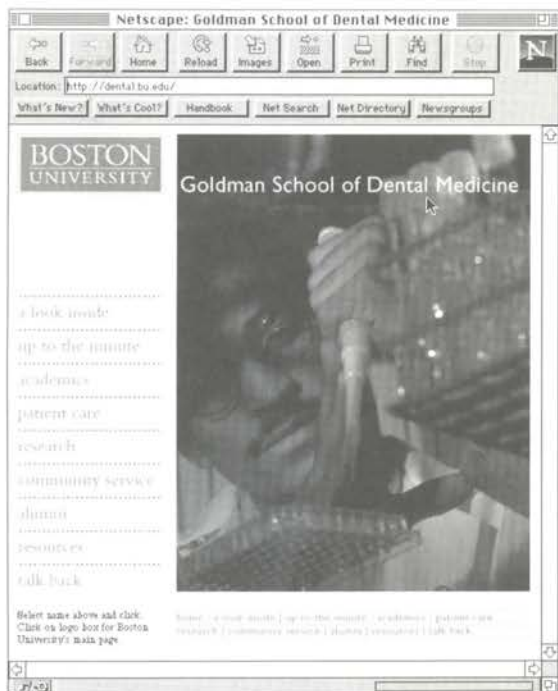


Eleni Kousvelari PROS 76



Mark Roseman PEDO 70

check-up



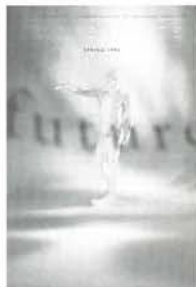
The Next Best Thing to Being There

Now the global village has never been easier to traverse. The School of Dental Medicine is *virtually* a few keystrokes away. Whether you're in Boston or Bangkok, you can visit the School at our World Wide Web site: <http://dental.bu.edu>

The site will include news, calendars, continuing education courses, and links to other sites' in cyberspace.

Peer Recognition

The Spring 1995 issue of *Impressions* was honored with two awards this summer. The publication received the International College of Dentists, USA Section's First Place Golden Pencil Award for its graphic design. The University and College Designers Association has also selected the issue to appear in its 1996 show. Awards will be presented at the association's annual conference this fall.



the last word

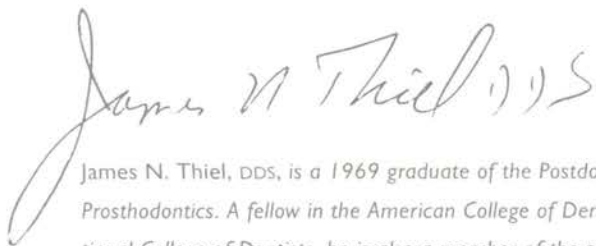
How many of us know what abilities lie within us? To what degree do we push ourselves to use those abilities? Often, we may think it is easier to be led rather than to lead. Leadership takes time and effort and uses strengths we don't realize that we have, or perhaps, do not appreciate.

Marquette Dental School and Boston University Goldman School of Dental Medicine provided me with a superior education, and the confidence to utilize my abilities to the fullest extent. Marquette provided me with the foundation and built the love of the profession. My graduate training at Boston University allowed me to develop as a teacher, lecturer, and leader of the dental profession.

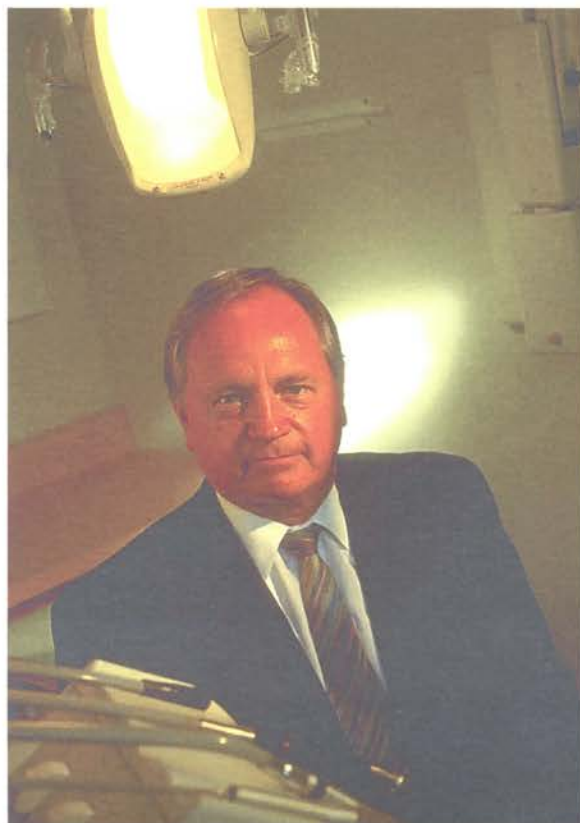
In January I had the honor of chairing the Yankee Dental Congress. It is the fifth largest dental convention in the country and the second largest convention of its kind in Boston. Coordinating the Yankee Dental Congress event involved twenty-seven committees, twenty staff members, the political entities of the six participating states, the American Dental Association, four local schools, numerous alumni associations, honor societies, specialty groups, dignitaries from over thirty other convention groups and dental organizations. Over 450 local, national, and multinational corporations showed their products; 230 speakers and entertainment groups offered educational, technical, and social functions for over 25,000 attendees. Integrating these logistics requires time and dedication, and necessitates trusting and pushing one's leadership abilities. Orchestrating the many components and constituents into a smoothly functioning event that gives all attendees a positive experience they take with them was a challenge I enjoyed immensely.

Marquette taught me the basics. Boston University exposed me to excellent teachers, professionals, and experiences that constantly required me to apply and test my knowledge and skills. Most importantly, Boston University taught me the importance of giving back to the dental profession more than it has given to you.

It is a wonderful experience and accomplishment to be a leader and so many of us have more abilities than we acknowledge. Make your mark in your profession. Be a giver, not a taker.



James N. Thiel, DDS, is a 1969 graduate of the Postdoctoral Program in Prosthodontics. A fellow in the American College of Dentists and the International College of Dentists, he is also a member of the school's Board of Visitors.



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