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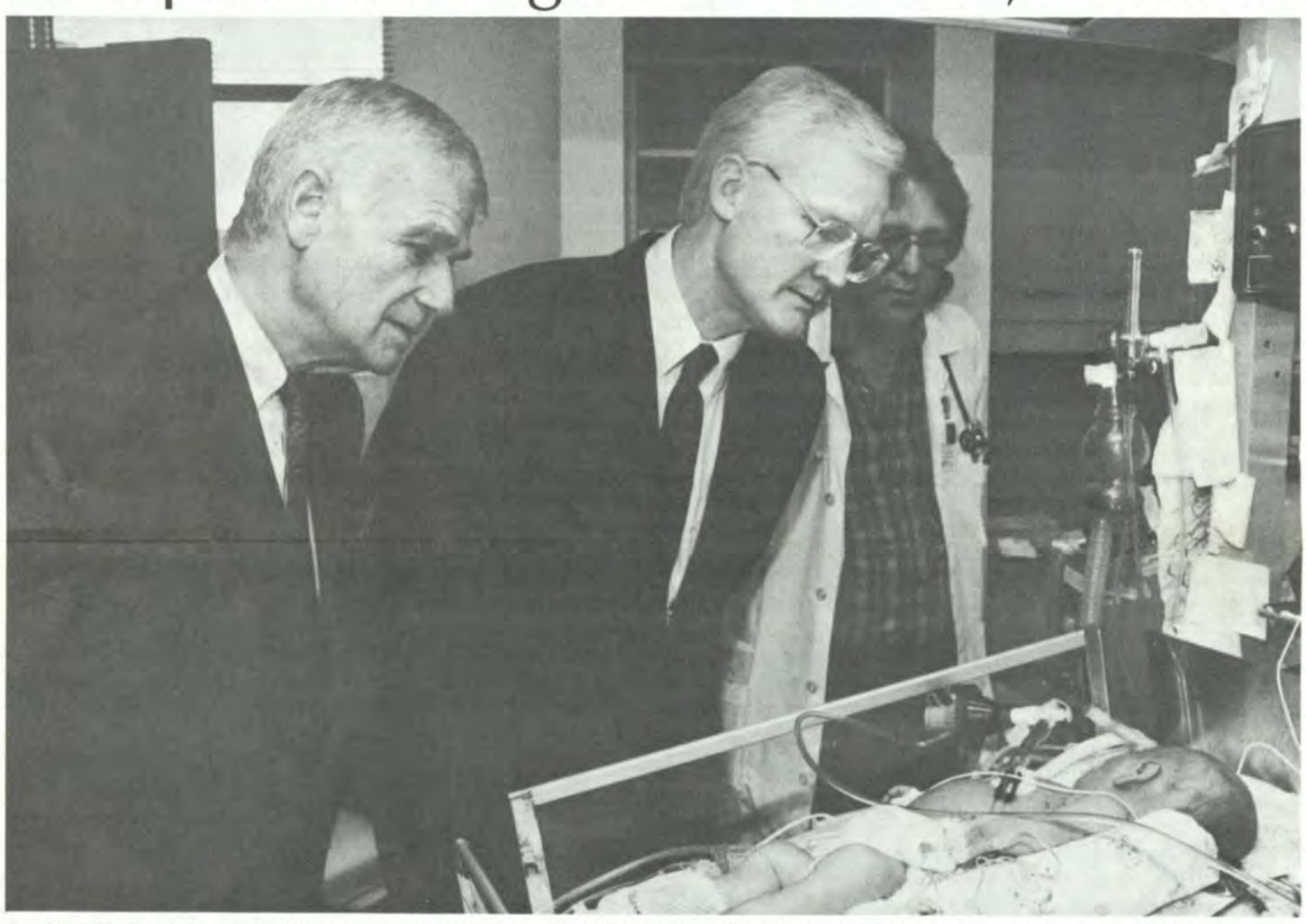
The Oregon Health Sciences University includes the schools of Dentistry, Medicine and Nursing; Vollum Institute for Advanced Biomedical Research; Center for Occupational Disease Research; University Hospital; University Clinics (medical and dental); Doernbecher Children's Hospital; and Child Development and Rehabilitation Center.

The Oregon Health Sciences University NEWS

New president's agenda: inventive, ambitious, cooperative



Sen. Mark Hatfield, left, and new OHSU President Dr. Peter Kohler, visit Doernbecher Children's Hospital during a recent visit to campus. Kohler assumes the presidency on July 10.

A man who listens before he decides, Dr. Peter O. Kohler assumes the presidency of Oregon Health Sciences University on July 10.

He becomes OHSU's third president, succeeding Dr. Leonard Laster. David Witter, University Hospital director, has served as interim president.

Kohler arrives at OHSU with an ambitious and inventive agenda — one aimed at accomplishing everything from revamping the university's administrative structure to extending its medical expertise to the entire state of Oregon and beyond.

"OHSU has a very exciting future," Kohler says. "It has done very well and will only get better during the next several years. It should be a stimulating and exciting place to work."

After a two-year tenure as medical school dean at the University of Texas Health Science Center at San Antonio, Kohler comes to OHSU with a well-defined management style of consensus.

"Rather than having top-down decision-making, I think it's important to get everyone in agreement and working together," Kohler says. "I'm an open person and I believe I work well with people. I always try to be sympathetic to their opinions."

But Kohler brings a strong set of his own opinions to OHSU.

His priorities include:

*A streamlined university administration that delegates authority to vice presidents and includes consensus building with faculty and constituent groups.

*Continuing the upgrading of University Hospital to make it a premier tertiary care facility.

*Developing Doernbecher Children's Hospital into a separate entity, continuing to serve as Oregon's major pediatric hospital.

*Developing Area Health Education Centers (AHECs) as part of an expanded outreach program to less populated regions.

*Making OHSU one of the 20 best medical research facilities in the nation.

*Continuing and expanding research programs at the Vollum Institute for Advanced Biomedical Research, the Center for Occupational Disease Research and potential new university-industry cooperative research centers.

*A major focus on molecular biology, genetic research and gene therapy research.

*Strengthening university instructional programs and possibly using AHECs in these programs.

*Increasing state funding to 30 percent.

*Developing new financial resources from federal and private sources.

*Continuing to improve facilities, including parking.

*Improving minority recruitment.

*Developing geriatric programs.

Kohler also intends to look at the schools of dentistry, medicine and nursing — and find where programs can be

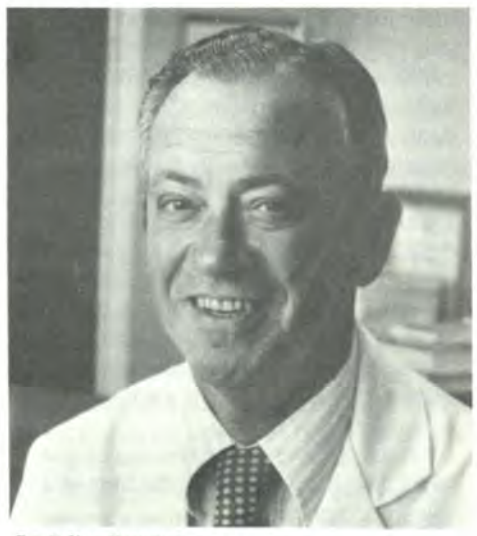
(continued on page 2)

Also in this issue:

OHSU to graduate 354 students on June 10

This year's commencement will be a very special event. Not only are 354 students graduating on June 10 from the schools of Dentistry, Medicine and Nursing; the School of Medicine is graduating its 100th class.

Commencement brings a finale to the school's year-long centennial celebration. Highlights of the year included a symposium on health care issues of the 21st century that brought local and national speakers from business, government and education to OHSU; a centennial celebration banquet that featured keynote speaker Senator Mark O. Hatfield; and burial of a pill-shaped time capsule containing items that represent today's medical accomplishments.



Dr. Julius Krevans

Keynote speaker at the graduation ceremony will be Dr. Julius Krevans, chancellor of the University of California at San Francisco. Krevans, chancellor since 1982 and a distinguished physician and educator, has played an important role nationally in the advancement of biomedical research.

Commencement is Friday, June 10 at 8 p.m. at the Civic Auditorium. The School of Nursing will hold its Honors Convocation Wednesday, June 8 at 7 p.m. at the Civic Auditorium; the School of Medicine will have its Hooding Ceremony on Thursday, June 9 at 6:30 p.m. at the Portland Center for the Performing Arts; and the School of Dentistry will hold its Awards and Hooding Ceremony on Friday, June 10 at 11 a.m. in the OHSU Auditorium.

Buried treasure preserves medical school's 100th year

It took months to prepare and days to bury, but 100 years from now it probably will be excavated in minutes.

Everything from a physician's "beeper" to the Starr-Edwards heart valve are now resting quietly in a vacuum-packed time "capsule" burial vault in front of the Basic Sciences Building.

On April 2, the capsule, shaped and painted like a cold pill, was laid to rest in ceremonies led by Dr. John Kendall, dean of the School of Medicine.

"A hundred springs ago, eight students were graduated from this school and since that time, thousands more have followed — each contributing immeasurable health benefits to us all," Kendall said. "Today represents a chance to honor what this school has meant to everyone and to commemorate the centennial with a time capsule."

School of Medicine Dean John Kendall, foreground, prepares to bury the time capsule during a rain-soaked ceremony on April 2.

This June, the School of Medicine's 100th graduating class will receive its diplomas.

Greg Adams, president of the class, spoke at the time capsule burial, saying medicine's early philosophies as well as its advances should be honored.

"We must applaud the parts of medicine that have not changed in the 100 years since this school started," Adams told the rain-soaked crowd. "Respect those teachers who believe that laying on of hands is as important as the application of medications."

Other speakers at the time capsule burial included David Witter, OHSU interim president; Dr. Kathryn Avison, president of the School of Medicine Alumni Association and George Richardson, member of the Oregon Board of Higher Education.

More than 30 items from the School of Medicine were buried in the specially treated capsule encased in a cement vault.

Lasers probably will replace shovels when a future generation decides to retrieve the capsule, but one thing that most likely won't have changed a century from now — the rainy spring day it's opened.

Capsule contents

Starr-Edwards heart valve, Fogarty catheter, class picture 1988, School of Medicine catalogue, centennial booklet, annual research report, diagnostic set, 1987 public health statistics, EEG graph, scalpel, FACTS, AMWA letter, anatomy course description, centennial logo, videotape of physicians' recollections, doctor's beeper, student music video, campus pictures, current Campusgram, diploma, stethoscope, AIDS brochure, rubber gloves, EKG graph, patient fees, School of Medicine T-shirt, student abstracts, Dotter catheter, OHSU news clippings, . . . and last, but not least, a parking ticket.

The School of Medicine would like to thank Physical Plant employees for generously donating their time in preparing the capsule and ground for burial.

Kohler to seek closer ties with community hospitals

expanded and new ones created.

"The idea of making sure there is progress toward excellence and further development in all three schools is essential," Kohler says.

The Center for Occupational Disease Research can be a focal point of another of Kohler's priorities — preventive medicine.

"One of the great challenges for the future is preventive medicine," Kohler says. "I expect to emphasize this in our various schools by working with the deans as well as those in research and the new CODR."

The son of a college professor, Kohler was born in Brooklyn, N.Y., but was raised in Blacksburg, Va. He stayed in Virginia, went to college at the University of Virginia at Charlottesville and played varsity football as a linebacker and center.

"It was a character-building experience," Kohler says with a grimace and a smile.

Growing up watching his physician grandfather help neighbors rebound from any number of maladies, Kohler left home for college inspired.

"Like other people, I had altruistic motives before entering medicine," Kohler remembers. "I wanted to help people."

He went on to receive his medical degree from Duke Medical School in Durham, N.C.

Kohler's specialty is endocrinology, specifically the pituitary gland. He edited a book in 1973 entitled "Diagnosis and Treatment of Pituitary Tumors" and recently co-edited the book "Clinical Endocrinology."

Kohler also served as chief of the Endocrinology Division and professor of medicine at Baylor College of Medicine in Houston and head of the Endocrinology Service at the National Institute of Child Health and Human Development in Bethesda, Md.

A past president of the Southern Society for Clinical Investigation Council and the American Federation for Clinical Research (Southern Section), Kohler has been the medical school dean at the University of Texas Health Science Center at San Antonio since 1986.

Prior to that, he served as interim dean and chairman of the Department of Medicine and chief of the University Hospital at the University of Arkansas Medical Sciences at Little Rock.

The silver-haired Kohler met and married his wife Judy in a whirlwind romance 28 years ago.

"It just proves those romances can work," Kohler says with the hint of a Virginian accent.

Three years after their marriage began, Brooke, the first of the Kohlers' four children, was born. She is now married and, on April 23, made the Kohlers new grandparents.

From the president's window: Interim President David Witter shows Kohler some of the reconstruction sites at University Hospital (south).

They also have three other children — Stephen, 24; Todd, 21 and Adam, 19.

When he's not spending his 60 to 70 hours a week in the office, expect to find Kohler fishing, hunting, reading or "playing a poor game of tennis or racquetball."

OHSU's new president and his wife like to garden, although when Judy Kohler leaves town "she holds her breath" when it comes to the health of the Kohlers' 100 potted plants.

"I don't have a green thumb," admits the 49-year-old Kohler.

He does, however, seem to have the magic touch when it comes to work.

"Peter Kohler has risen rapidly as a leader in American medical education who will serve the citizens and health sciences in Oregon ably and forcefully," said Dr. John Benson Jr., president of the American Board of Internal Medicine.

Besides elevating OHSU into the nation's "top 20" health sciences centers, Kohler sees no reason why the university can't work closer with local hospitals to benefit the region's entire health care system.

"I try to do everything with dignity and integrity," Kohler says.

— John Hammarley

Oregon Health Sciences University, Office of University Communications

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Career Day draws record crowd to fight nursing shortage

They wined and dined their targets with everything from free candy to red roses.

They stood elbow to elbow in record numbers — coming from six states and as far away as Montana.

The "suitors" were hospital recruiters. And the target of their interest was OHSU's graduating nursing students.

Nationwide, nurses are in demand and the Pacific Northwest is no exception. Many of the hospitals represented at the School of Nursing's fourth annual Career Day are located in the area.

"They want to make sure our nursing graduates don't leave the area," said Sara Porter-Tibbetts, assistant dean for Student Affairs in the School of Nursing.

The record recruiting turnout on February 26 was a marked difference from just five years ago. Then, nursing graduates had a hard time finding a job.

When the nursing school's Career Day began in 1984, seven hospitals were represented. This year that number jumped to 30.

One of the main beneficiaries of the nursing school is University Hospital and Doernbecher Children's Hospital, where many of the students receive clinical experience and frequently end up working after graduation.

The U.S. Department of Health and Human Services predicts in less than two years the nation will face a 40 percent shortage in the number of bachelor's degree-prepared nurses.

And by the year 2000, the U.S. will have only half the nurses it needs.

Fortunately, university hospitals are not suffering from the nursing shortage, thanks to the foresight of Dr. Carol Lindeman, dean of the School of Nursing.

This June, 100 fourth-year nursing students will graduate from OHSU's School of Nursing.

Nursing school students visited with recruiters from six states at the Feb. 26 Career Day.

Peterson ends half century of distinguished OHSU service

Dr. Clare Peterson, professor of surgery at the OHSU, will retire in June after spending nearly a half-century on Marquam Hill. In his years as a medical student, surgery resident, distinguished faculty member and surgeon, he has been the recipient of numerous awards and honors, including the Governor's Award, and has contributed significantly to the education and development of OHSU's young physicians and surgeons.

When Peterson received his first faculty appointment at OHSU in 1944, he was one of only 14 full-time faculty members. Today there are more than a thousand. He has seen the university grow from a small campus to a "magnificent tour de force."

> "It's not the bricks, the budgets or the buildings that have made my life fulfilling."

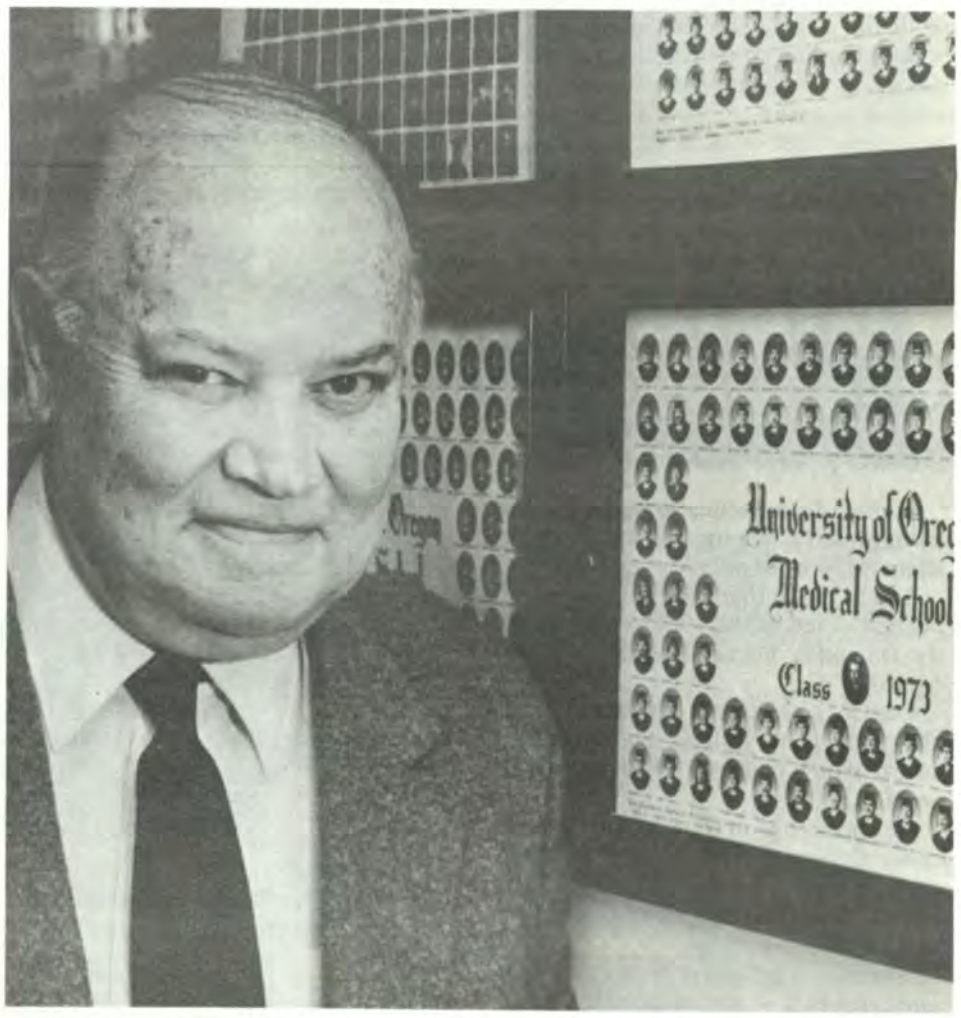
Yet, looking back over his academic and professional career as surgeon-teacher, it's not the changing architectural landscape that he remembers most.

"It's not the bricks, the budgets, or the buildings that have made my life fulfilling," he said, "it's the people: the university and its values, and the way these are expressed in all the dimensions of patient care, teaching and research."

Peterson was born in 1917 in a small eastern Montana frontier town only three years older than he. From the beginning, he observes, the influence of great teachers and role models affected his own development and life-long interests, as well as his ultimate career choice. While he was in secondary education and high school, a music teacher who had studied at the Julliard stimulated his lifelong love for the piano. A legendary charismatic professor of Elizabethan literature at the University of Oregon, Edward Christian Allen Lesch, led him to focus his energies upon Elizabethan literature, a natural outgrowth of a love for great books. He completed his university studies in 1939, was granted a Bachelor of Arts degree in English, with honors and thesis, and was elected Phi Beta Kappa.

But the undoubted influences that turned him toward medicine were the examples of his family physician in Montana, his future father-in-law, a pioneer physician of eastern Oregon, and an older brother who was the first of the family to enter medicine.

Entering medical school at the University of Oregon Medical School (OHSU) in 1939, Peterson was elected to Alpha Omega Alpha in 1942 and graduated with the Doctor of Medicine degree in 1943. He returned to Oregon after a California internship to his first faculty appointment as instructor in physiology at OHSU, in 1944. After 18 months of teaching in physiology, he began a three-year residency in general surgery, and identifies himself with pride as, "the last of the Joyce men" (Thomas M. Joyce, Kenneth A.J. Mackenzie Professor of Surgery and Chairman, Department of Surgery, UOMS, former first assist of Will Mayo of Rochester, was legendary in his own time as a world class surgical virtuoso).



Dr. Clare Peterson pauses by the SM class photo that includes his son, Ernie.

At the completion of his surgical residency, Peterson was appointed instructor in surgery and assistant professor of physiology (1948), associate professor of surgery (1953) and professor of surgery in 1958.

At various times, he has been director of the Tumor Clinics, head of pediatric surgery, chief of surgery (University Hospital) and head of the Division of General Surgery.

His numerous publications span the spectrum of general surgery, most notably in the areas of surgical metabolism, endocrine surgery, surgical sepsis, pediatric surgery and breast cancer. He is pleased to have written *Perspective in Surgery,* a highly regarded book based on years of undergraduate and resident teaching. Peterson's work in the treatment of breast cancer, surgical sepsis, the treatment of massive burns, and the first successful separation of extensively joined thorax-abdominal (chest and abdomen) Siamese twins, has been internationally recognized.

Peterson has seen amazing changes in the field of medicine during his long career. He believes strongly that the basic element of truly caring for the patient must remain the fundamental and timeless cornerstone of both medicine and the university.

"The changes, the growth and the greatness of medicine and this university I shall always remember," he said, "and I believe greatly in their future."

— Jan Smith

Dentistry fellowship grant to increase clinical training, community care

When the first funds from the $630,000 three-year Pew National Dental Education grant arrived in March, the School of Dentistry appointed Dr. Arthur Retzlaff, former chairman of pediatric dentistry, director of the grant's Extramural Fellowship Program.

The school is one of only two to be fully funded in a three-year competition among all but one of the nation's 57 dental schools. The Extramural Fellowship Program "has everyone in the whole country watching," said Dean Hank Van Hassel.

The program addresses several problems identified by recent observers of American dentistry:

- While the demand among dental school seniors for postgraduate training has been on the rise, hospital budget cuts have forced reductions in the number of such spots
- Dental graduates who go directly into private practice often suffer from a lack of business expertise
- Dental care for indigent populations is in short supply

The new program develops responses to each of these problems. In the fall, incoming SD seniors who can master the normal workload and are willing to commit themselves to the program will receive supplemental clinical training. Following graduation each will work for a dentist, chosen by an Extramural Fellowship Program committee.

Fellows will split their time — 80 percent in the practice, paid on the basis of salary plus incentives. During the remaining 20 percent of working hours — the equivalent of one day per week — fellows will provide *pro bono* care for indigent patients. Fellows will also be required to attend night classes in business.

Retzlaff explained that community dentists will become involved in preceptors for several reasons: they want to give something back to the profession; their practice volume is too great but not necessarily sufficient to support another associate; they want to try out a potential associate and are attracted by the one year limited commitment; they want to ease themselves into retirement; or they anticipate learning from fellows as well as teaching them.

Both student applicants and preceptors will be screened by committees, to be appointed in the coming months. Applicants can obtain more information about the program by calling Retzlaff at 279-8766.

Team confirms cryotherapy as ROP blindness treatment

They once were blind; now they see. In the April issue of *Archives of Ophthalmology* a national study group coordinated by OHSU Pediatric Ophthalmologist Earl Palmer published results showing that cryotherapy can reduce by half the negative effects of retinopathy of prematurity (ROP).

ROP occurs when for reasons that are still unknown, a premature infant's retinal blood vessels grow and branch excessively. The result can be bleeding, scarring and retinal detachment.

Until now ROP has blinded an estimated 650 premature infants in the U.S. annually, and impaired the vision of a further 2,600.

Cryotherapy is relatively straight forward: With a probe containing refrigerant, the surgeon repeatedly touches the anesthetized infant's eye, creating a pattern of scar tissue inside the eye that retards the blood vessels' excessive growth.

Perhaps the best question to ask about this study is why, when Japanese physicians have treated ROP with cryotherapy since 1972, did the *New York Times,* the *Washington Post, The Oregonian* all report Palmer's preliminary results extensively? What makes them news?

The answer is not hard to find. Palmer's group not only confirmed cryotherapy's effectiveness as a treatment for ROP, it was also able to determine when best to intervene with it. American physicians had worried that their Japanese colleagues were being too aggressive, were treating cases that would have improved naturally, Palmer explained.

Palmer is delighted with the results of what OHSU Research Services spokesperson Katy Lust confirmed is the first multi-center study to be run from the Hill. "It was a very big project for me to get involved in with my relative lack of big project experience," Palmer said.

"When we began, others predicted that it would be hard to keep everyone motivated, but the spirit of optimistic cooperation here in Portland — Good Samaritan, Emanuel and Kaiser Permanente were all involved — was re-duplicated in every center across the country."

The study defied negative predictions in other ways, too. "The number of patients enrolled was above what was expected," Palmer said, "which is unheard of in a clinical trial. And we have a success rate in follow up of 96 percent on 291 babies — above what was predicted by people outside the study." This, Palmer added, happened in spite of the fact that patients often travel long distances to the centers (Portland is the only one in Oregon) for follow up.

Furthermore, Palmer explained, the $9.6 million cost of the study has already been more than offset by the estimated savings in the cost of looking after children in the study who now will not go blind. "Estimates put the impact of childhood blindness — health care costs, educational costs, lost earnings of the individual and parents — at about $1 million," Palmer said. "Even if you figure a quarter of that, with 50 infants now able to see, this study has already broken even."

The proper measure of Palmer's current ardor — which in the most reserved circles might seem perhaps a tad immodest — is the bleakness of the American situation only a couple of years back.

In January of 1986 a *Science* article headlined, "Blindness of Prematurity Unexplained" concluded, "Solutions to the problem of preventing and treating retinopathy of prematurity most likely will not be immediately forthcoming . . . ."

Listing the risks — hermorrhage, optic atrophy, and the inadvertent freezing of the optic nerve — the article concluded that cryotherapy was "an idea born of desperation."

Palmer agrees. "That's what it was. We might have been wrong." There were many reasons, he said, not to use cryotherapy: "Premature infants are in a fragile medical condition. The disease has a great tendency to get better on its own, more than 80 percent of cases do. A number of the first patients to be treated with cryotherapy went blind. Cryotherapy can also result in reduced peripheral vision."

The history of ROP research proves only that a mythical instrument Palmer calls a "retrospectascope" would be a fine thing. In the 1950s a U.S. clinical trial showed that changing the levels of oxygen given to premature infants led to decreased incidence of ROP. It was thought for a while that ROP was beaten, but the ailment prospered.

In the 1970s Japanese doctors adopted cryotherapy as their standard of care. American physicians, particularly in Hawaii, were asked by patients with relatives in Japan why the therapy was not in use.

"It was never clear how the Japanese selected patients for treatment," Palmer argued. U.S. doctors, he added, partly due to reservations about the way Japanese clinical research is done, but partly also because U.S. data were enigmatic, concluded that the effectiveness of the therapy had not been scientifically demonstrated.

There were more problems. With more and more premature infants surviving in the U.S. it seemed reasonable to expect a rise in the incidence of ROP, but collection of incidence data was, according to sources quoted in the *Science* article, hampered by fears of malpractice suits. A Boston attorney reported that half of all ROP lawsuits were then being won by the plaintiff.

Such is the background to the study's current triumph. Palmer said that he is "pleasantly surprised" by the study's success, but he is anxious to explain the context and share the credit. "What we're talking about here," Palmer explained, "is *accelerated* acceptance of a treatment that possibly would have gained acceptance eventually.

Dr. Earl Palmer examines Stephanie Summerbays, who participated in the ROP study. Also pictured is Stephanie's mother, Kathy Thornton.

"Some of the side effects we anticipated didn't appear. There were, for example, no deaths as result of the stress of the operation."

Pointing to a personnel file one inch thick, Palmer explained that his team was composed of a principal investigator and a coordinator at each center, plus a number of physicians and other personnel.

As well as chairing the study, Palmer acted as principal investigator in Portland, assisted by Cynthia Phillips. Also in Portland, Dr. Joe Robertson acted as primary cryotherapist and Dr. John Reynolds was the neonatologist. Six other local physicians were actively involved: Drs. Arthur Aaby, Shawn Goodman, Irwin Handelman, Michael Klein, Andrea Tongue and Robert Watzke. Susan La France was the clinical coordinator.

Vital to the system of categorization, OHSU's Pat Whitehill is one of four national testers who visits the centers to measure vision.

Enrollment in the study has been halted — earlier than scheduled — to allow patients who were only treated in one eye (as specified in the study's protocol), to have the other eye treated.

Follow up is under way. "The money is guaranteed until June of '89," Palmer said. "We are preparing a proposal for a three-year follow up. We would like it to be much longer.

"This is a high budget project with a high profile in the scientific community," he concluded. "It is a very significant thing for the institution to be involved in. Personally I recognize that this may be the pinnacle of my career. It's certainly going to be a hard act to follow."

— David Ritchie

Ullman, Tolle, receive awards for studies

Buddy Ullman

Buddy Ullman wants to be part of the effort aimed at wiping out diseases that affect millions of people every year.

And to reach that goal, Ullman has been selected as the 1988 recipient of the Donald B. Slocum Medical Research Award.

Ullman, an associate professor of biochemistry, is the fifth recipient of the award, which provides a $10,000 stipend.

He specializes in third-world diseases, concentrating his studies on leishmaniasis, a parasitic disease. Other similar diseases include malaria, African sleeping sickness and giardiasis.

"Billions of people contract these parasitic diseases — and millions die from them," Ullman says.

The parasites he studies are "smart" adversaries. When they destroy their victim, they do it slowly.

"A parasite is something that holds on for a long time," Ullman says. "Its evolutionary advantage is that it chronically debilitates its host rather than acutely killing it."

Ullman is one of only a handful of people nationally studying parasitic diseases. Less than 50 laboratories in America are focusing on these worldwide diseases.

The OHSU biochemist predicts a vaccine or cure for certain parasitic diseases could be developed "within the next 30-40 years."

The Slocum award was established in 1983 by William Bowerman and Nike Inc. honoring Dr. Donald Slocum, a 1935 OHSU graduate.

Buddy Ullman

Dr. Susan Tolle

Susan Tolle

"We care and we try, but we often stumble."

That's how Dr. Susan Tolle describes the painful scene when a physician has to tell someone a loved one has died.

While life-saving and life-sustaining medical advances seem to be announced every week, Tolle believes answers to accompanying ethical questions are not keeping pace.

"Medical technology is moving faster than our ethical technology," says the 36-year-old internist and associate professor of medicine at OHSU. "Interns and young physicians have good intentions, but need more guidance in dealing with difficult issues, such as patient death."

Tolle soon will be prepared to give that guidance.

She has been awarded the National Leadership Award in Clinical Medical Ethics from the University of Chicago Hospital. The award carries a four-year stipend from the Chicago facility's Center for Clinical Medical Ethics.

Beginning in July, Tolle will study in Chicago for a year before returning to OHSU to establish an interdisciplinary ethics program involving not only the School of Medicine, but the nursing and dental schools and the community as well.

New focus: 'Capturing the value of the public asset'

Dennis West leans back in his office chair, clasps his hands behind his head, spreads his elbows and invites the interviewer's first question. The gesture seems to say, "I've got all the time in the world." He hasn't. West has undertaken economic development activities at Oregon Health Sciences University. Until fairly recently these were performed on an ad hoc basis by various members of the administration . . . or not at all.

Age 47, West is a trim, business-like fellow with a beard and aquiline features. He has a master's in Chinese history and a Ph.D. in government. He was tenured at Portland State University but quit academia for a job with Lloyd Anderson, who was then Portland City Commissioner. His most recent post before coming to OHSU was deputy executive director of the Port of Portland.

West is perhaps the ideal mix for someone charged with marrying business interests with those of the university. In February of this year he was appointed assistant to the president for economic development at OHSU.

It's a big task, and a hard one to define. West says he aims to help "capture the value of the public asset." What on earth does he mean?

In 1985, after interviewing representatives of 691 high technology firms, the U.S. Congress Joint Economic Committee issued a report on factors that influence where high tech companies choose to locate. It concluded, "the potential contribution of universities has generally been ignored or underestimated by localities. The survey shows that *if properly utilized* [*Oregon Business'* emphasis] higher education . . . may play the major role in helping a community or region attract high tech firms."

The history of relations between industry and academia has had its ups and downs. Clothing fashions are a good index: the old school tie has languished and come back into fashion; T-shirts — "I survived Catatonic State" — have come and gone. Recently the two parties, academia and industry, once again began going steady.

Between 1960 and 1980 total corporate support for higher education rose from $150 million to more than $900 million. The pace quickened. In 1985, a *New York Times* article on industry's role in academia opened, "The announcements are coming out almost weekly now: Du Pont gives $6 million to the Harvard Medical School for genetic research; Hoechst, the West German chemical giant, gives $50 million to the Massachusetts General Hospital for medical research . . . ."

OHSU has not been left out. Last year Ciba-Geigy, one of the world's largest pharmaceutical companies, awarded a long-term grant of $2.5 million to promote exchange of information and research between that company's scientists and those at OHSU. And an OHSU researcher's pioneering investigation of whether calcium can lower high blood pressure attracted a $4 million grant from the National Dairy Promotion and Research Board.

Such involvement has provoked comment on all sides. The *New York Times* piece, for example, examined allegations that corporations' goals were coming into conflict with the wider goals of science. But it seems significant that the final say in that article was given to Stanford president Donald Kennedy, "I believe that basic research in universities needs more, not less, relationship to industry. But I believe the conditions for that relationship need to be carefully structured, if a highly evolved and highly efficient mechanism for doing basic scientific work is not to be unwittingly damaged."

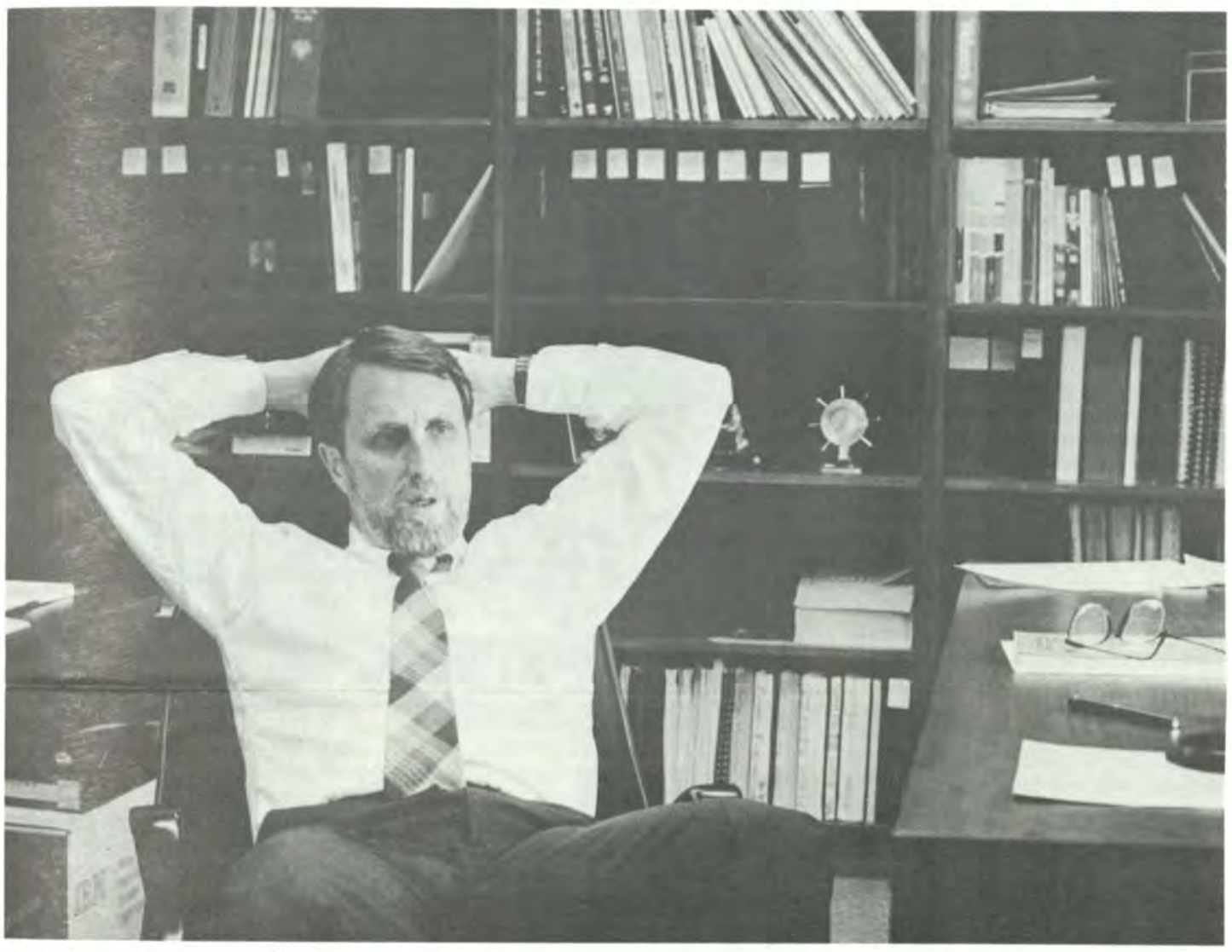
Which leads us back to the Congressional report's key words, "if properly utilized" and the question, what exactly is Dennis West doing and planning?

West is naturally cautious about discussing deals currently being negotiated. In hypothetical terms, however, his role is clear. If a corporation, Biowidget International for example, were to become enthusiastic about OHSU research, or if OHSU's Dr. I.N. Genious were to decide that his or her work had commercial potential . . . in either case, the number to call would be 279-5964 — West's office.

Likewise if Biowidget International *should* be interested in OHSU research, but doesn't in fact know about it, West's task is to figure out how the company can be approached.

And if Dr. Genious has always wanted to pursue product ideas but for one reason or another hasn't yet done so, West will do what he can to help matters along.

West explained that he doesn't expect to manage every project proposal that passes through his office. Rather, he will respond as necessary; if people need to be put in touch with people, he will see that it happens, if venture capital is sought he will make suggestions about where to find it, if the university is to be a partner in the project he will explore ways for that to happen.



Dennis West, new assistant to the president for economic development.

"It's not my job to own all this stuff," he said. "It's my job to make it easier. The institution needs to be a good business partner. We have to explore what else it can do."

Asked why OHSU is doing this now, when, in the words of OHSU's Interim President David Witter the institution's growth over the past two years has been "unprecedented," West responded, "Any business, even in its best year ever is going to ask, 'What else should we try to achieve? Where do we look for marginal profit?' We should do the same thing. Only here we have a more abstract concept of benefits than just profit and loss potential. But we should still be interested in marginal benefit."

Another way to think of this, West added, is to ask how, without coming into conflict with the established goals of the institution — education/research/patient care — Oregonians can increase the benefits from their investment. *This* is what he means by "capturing the public value of the asset." How can OHSU increase its contribution to Oregon's economy and still remain true to its task?

When asked why he had hired West, Witter responded unsurprisingly, "He was the best qualified applicant." Asked why he had hired West *now,* Witter became more expansive. "It's one thing to have a major impact on the local economy. It's another to become part of the economic development of the community."

High on Oregon's agenda, he explained, is economic diversification. "Silicon Forest has seen tremendous expansion. We must begin to wonder how big it can get. Oregon State and [U of] Oregon are doing the research needed to support Oregon's natural resource industries — forest products, general agriculture, fisheries. Here and at the Primate Center we are doing our part with biomedical research."

The question West will address, Witter said, is "How do you coalesce [the university's] economic development activities into some overall program?" At the moment, he added, "We end up 'adhocing' it. There is no economic development plan for the university."

Witter concluded, "We didn't rewrite our mission statement to add economic development. But there's no reason economic development shouldn't be an important *by-product."*

West agrees that an economic development plan needs to be done, but adds his own caveats. "A plan is essential," he explained, "but it is not a panacea. Events, individuals, ideas, lots of things can change it. In preparing the plan I'm trying to look behind received wisdom, behind what [supposedly] everyone knows about how the job should be done.

"My job is to see and define each problem and involve people to tackle it in an orderly fashion. I might have to do anything from a phone call, to a five-year project involvement."

West says he wants to avoid being trapped by "a prescriptive notion" of what he should be doing. What he expects to happen, (and is in fact already happening), is that people will call him for advice and help. "To the extent that there's a need or opportunity," he explained, "my job is one, to take action, and/or two, to find patterns that maybe lead to a sensible plan."

> "Patience and persistence are essential to what's being attempted. The results will not be immediate."

He warned that people should expect no miracles from his office. "Patience and persistence are essential to what's being attempted," he argued. "The results will not be immediate."

Citing a study that was prepared for OHSU by the University of Utah Office of Technology Transfer, West elaborated. New technology fails in economic terms many more times than it succeeds. At the University of Utah, for example, some 1,200 discovery disclosures (a technical term for the first stage of the patent process) were filed between 1980 and 1985. Of those only 165 were eventually patented.

From the 165 patents there were only 64 licensing agreements and only 14 of these generated royalty revenues.

"Good fortune," West concluded, "can be of help, but hard work and incisive thinking are more likely to produce results."

"West's priorities," Witter explained, "are upcoming biotechnology conferences and figuring out how to get vendors to interface with the new Biomedical Information and Communication Center. He also has a grant application due in July."

In his office, hands behind his head, West begins to answer the first question. The phone rings. It's long distance. "Did you get the fax . . .?"

The sequence repeats.

Perhaps the best (if paradoxical) measure of West's success so far is that he has not had time even to hook up his computer's printer.

— *David Ritchie*

Strong Foundation critical to OHSU's financial health

As public support of academic institutions has declined over the years, private contributions are playing an increasingly critical role in the lives of these institutions. The OHSU is no exception.

Although it is a state university, Oregon's General Fund provides only one-fourth the OHSU's operating costs. The rest must come from tuition, grants, patient fees and other private sources.

Annual funds for the Schools of Dentistry, Medicine and Nursing, for instance, increased dramatically since the OHSU Foundation was formed in 1981. This page of the "OHSU News" begins a regular series about these and other developments.

Annual giving: reaping the rewards

Academic futures are built on strong foundations.

Dramatic increases in annual gifts during the past two years are strengthening the future of the Schools of Dentistry, Medicine and Nursing.

"We've begun to reap the rewards of the hard work, volunteer involvement and program organization started in the fall of 1985," according to Steven Harrison, director of the OHSU Office of University Development. Most of the credit, he says, belongs to alumni, faculty, students and volunteers.

Private contributions have always helped the OHSU's three schools maintain and expand curriculum and resources, fund scholarships and sponsor workshops and conferences. New staff in the Office of Development arrived in 1986 to initiate and expand programs, such as the highly successful phonathons for nursing and dentistry alumni. Mark Young is the School of Medicine's centennial annual giving director; Kathleen Hartshorne coordinated annual giving programs for nursing and dentistry.

Contributions — and levels of participation — among alumni of the schools of dentistry, medicine and nursing have increased dramatically since organized programs began in 1985. Matching OHSU Foundation grants of $25,000 for each school are spurring even greater participation.

More about the campaigns:

School of Dentistry: The School of Dentistry with its first phonathon, raised $80,000 last year, which helped secure a three-year $150,000 matching grant from Oregon Dental Service. "With 27 alumni and faculty working the phonathon, we had tremendous success," says dentistry's Dr. John Holt, past-president of the Alumni Association. He noted that more than $80,000 was raised for the Annual Fund, with equal pledges for the next two years.

"Adding to the success is the school's excellent image across the country." Holt is also proud to note that 90 percent of the school's full-time faculty pledged contributions for 1988.

School of Medicine: The School of Medicine launched the Centennial Campaign to celebrate its first 100 years. "A special Centennial Fund was created as an endowment for the next 100 years," says Dr. Dolores Leon, class of 1975 and campaign director. "To encourage contributions, a family member of Dr. Kenneth A.J. Mackenzie established a $100,000 Challenge Gift. I hope this and other special centennial funds will preserve the kind of opportunities I found as a student here."

The school's level of alumni participation dramatically increased in its 100th year. So far, $1.1 million has been raised through dues and contributions, with $67,000 earmarked for the Centennial Fund. And, 100 percent of the school's department chairs and administrators contributed this year along with a substantial increase in faculty support. Special brochures and newsletters were produced to highlight the school's past, present and future.

School of Nursing: A new phonathon doubled the School of Nursing's annual "Excellence Fund" and increased alumni participation by 30 percent. "The phonathon marked the beginning of a new era of alumni support," says nursing's Marsha Heims, Alumni Association president. "We've been struggling to stay in the black, but now that we have more resources, we can fund new research projects, more conferences and continue to attract internationally known speakers to Portland." Heims credits the more than 50 nursing students who worked the phonathon; the coordination provided by Annual Giving Director Kathleen Hartshorne; and "the unfailing efforts of Bea Jones, who has relentlessly located countless lost alumni for their support — from Oregon to New York." Jones has added about 575 alumni to the list.

Prior to the first phonathon in 1987, Nursing's annual "Excellence Fund" generated about $3,000 per year. As of April 1988, the total was more than $20,000, well on its way to meeting the fiscal year's goal to receive the OHSU Foundation's matching $25,000 grant.

So far, all three alumni associations are ahead of their 1988 goals, thanks to the tremendous level of volunteer support from alumni, faculty, students and friends of the university.

Medical school phonathon: Fourth-year student Dave Mattox contacts alumni while Mark Young, annual giving director, charts the progress.

Memorial funds: loving tributes for a worthy cause

Long past his death, Dr. Lester T. Jones will be honored for the lifetime bond he had with the OHSU.

Frank S. Doernbecher's name has been synonymous with treating Oregon's critically ill children for more than 60 years.

And since 1980, David and Janis Junkin have been giving to the Child Development and Rehabilitation Center in memory of their son Brian.

All three have something in common: Memorial Funds — large and small — were created as tributes to their lives. Gifts in their names are earmarked for a cause that would make them proud, or to the university at large. For instance, the fund honoring Jones, a pioneer in tear duct research, will help support the OHSU's new Regional Eye Center.

Gifts may also be given to honor those still living — for instance to recognize an inspiring teacher or a compassionate nurse. Some donors have given to the Foundation to celebrate birthdays, religious holidays, anniversaries and other occasions.

Memorial and honorary gifts can be easily set up through the OHSU Foundation. This office then notifies the family that a gift has been received in honor of their loved one.

In setting up a memorial fund, the Foundation office suggests the following language be used in obituaries: "In lieu of flowers, the family suggests contributions to the _____ Memorial Fund in care of the Oregon Health Sciences University."

Foundation role

The OHSU Foundation is a non-profit organization governed by a 34-member Board of Trustees that serves as an advocate for the university at local, state and regional levels.

The Foundation receives, invests and manages private contributions given in support of the university, its divisions and programs. The Foundation maximizes the return on all investments of contributions. Through its professional staff, it assists faculty, alumni and other friends of the OHSU as they make annual gifts, gifts of real property, life insurance, bequests, stocks, bonds and tangible personal property.

New Pooled Income Fund shares interest with donors, supports OHSU

The OHSU Foundation Board of Trustees has established a new pooled income fund with many advantages to donors. The Fund pools gifts received from many, manages them for all and distributes the interest income proportionately to all living beneficiaries.

When a participant (or surviving spouse) dies, the value of his or her share reverts to the OHSU.

YOU GAIN

- Lifetime income
- An immediate income tax deduction
- Skilled investment management of a diversified portfolio
- Satisfaction in generously supporting the university.
- Recognition as a leader in building for the university's future.

WHO MAY RECEIVE THE INCOME?

- You
- Your designee
- Two beneficiaries, with payments to end when either dies or to continue for the life of the survivor.

EXAMPLE

Mrs. Abernethy, age 70, gave $5,000 to the OHSU through a gift to the Pooled Income Fund. Assuming a current yield of 8.5 percent, she receives $425 in income the first year. She receives an immediate $2,123 income tax deduction regardless of the type of assets transferred. (The deduction varies with age and yield. If appreciated securities are used, capital gains taxes are avoided.) In subsequent years, the income she receives reflects any increase or decrease in the fund's income.

NOTE: The $2,123 income tax deduction is meaningful. If Mrs. Abernethy is in the 38 percent income tax bracket, she saves $806. Her net investment then is $5,000 minus $806, or $4,194. The $424 income each year on $4,194 provides an effective return of 10.1 percent on her investment.

The investment objective of the Pooled Income Fund is to earn relatively high income consistent with safety of principal. The OHSU Foundation's professional advisors take special care in selecting all their investments with sound, long-term security in mind.

WHO SHOULD INVEST?

Beneficiaries of the Pooled Income Fund must be at least 50 years of age. Minimum initial investment in the pool is $5,000. Subsequent units can be purchased in increments of $1,000. Income is paid quarterly.

Contact the OHSU Foundation, 279-8223, or return the coupon at left to learn more about this fund.

Send coupon to OHSU Foundation, 3181 SW Sam Jackson Park Road, Portland, 97201
Please send me more information about the Pooled Income Fund. All inquiries will be held strictly confidential.

Name: _____

Address: _____ City: _____

State: _____ Zip: _____ Telephone: _____

Her loyalty to Doernbecher didn't end with retirement

When Betty Weible started her nursing career at Doernbecher Children's Hospital, both she and the hospital were 21 years old.

Doernbecher hired her in 1947 for $108 a month and one meal per shift. In return they got her nursing skills, her generous heart and her lifelong loyalty. She retired recently after 41 years, the last 10 spent as the nursing payroll coordinator.

"Doernbecher has given me many opportunities," she says. "I've been a student, staff nurse, head nurse and supervisor. And, I've taught and I've worked in administration."

Weible's career spanned most of Doernbecher's history. She began as a night shift charge nurse responsible for 22 preschoolers. Each night she made three major rounds, a student her only helper.

The night shift snack was fruit, peanut butter and toast. The aroma used to rouse the children. "Pretty soon we'd have little hungry stragglers heading for the kitchen. Parents weren't too pleased when their children came home with a 2 a.m. toast habit," she says.

Weible fondly remembers working with Dr. Joseph Bilderback, the first chief of staff. "He called all nurses 'missy' and always went on rounds with us first because we knew the patients' conditions. He must have sounded so wise when he went later with the physicians," she laughs.

Then as now, the name Doernbecher brought a warm response from generous Oregonians. "People felt it was *their* hospital, and they wanted to help."

In the mid-1950s Weible recalls loading her car with bolts of fabric and driving to Creswell, a small town near Eugene. She would return to Portland "loaded down" with handmade bibs, gowns, slippers and toy bags. In Creswell, the new bolts of fabric were parceled out and the next round of snipping and stitching would begin.

In Roseburg, women packed home-canned food into barrels for Doernbecher. The gift was a mixed blessing. "Shirley Thompson, director of nurses, hated to see them come," she says. "We had to save all the empty jars and send them back for refilling."

Betty Weible, left, enjoys conversation with guests at her retirement party.

She also remembers the first rocking chairs, today a symbol of Doernbecher's loving concern for the patient who is first of all a child. "Generous donations helped us buy the rockers. I've spent my share of time in those — even as a teacher, I managed to get some rocking time in," she confesses.

Betty Weible was head nurse when Doernbecher's "premie" nursery opened in 1951. "We thought we were really something when we got an isolette," she says. When the hospital outgrew its building in 1956, she helped it move to its current location atop University Hospital (south).

She began teaching pediatrics at the School of Nursing in 1954 and in 1958 began supervising nurses. Looking back, Weible declares that "being in the thick of everything — research, education and children — has been especially rewarding."

Her warmest and most poignant memories surround the children. She shudders to think of the burned patients in extreme pain. Their gauze-and-petroleum dressings needed to be soaked off every few days. "When children die, you never get used to it. You never forget them. So you just have to dwell on the accomplishments Doernbecher has made. And there have been many."

She was delighted when Doernbecher allowed unlimited visiting hours for parents. In the early years, they could visit for 45 minutes on Sundays and Wednesdays. Parents wore gowns with arms sewn shut, and they saw their children through glass windows. "Everyone would be crying. After parents left, the kids would cry all night long," she says. The dismal practice began when infection was a hospital's principal terror.

As time — and antibiotics — changed the scene, Weible saw polio, rheumatic fever and whooping cough become rarities. Today there are treatments for conditions that once brought swift death.

She's convinced that technical advances haven't changed the character of the good nurse. "Today, nurses practically need a degree in engineering and electronics to use the sophisticated equipment. But good nurses are still the ones who love people."

Weible isn't worried about life after OHSU. She told the guests at her retirement party, "after 41 years I'll have to taper off, but I never want to sever my ties."

She was back at her desk the next day and plans to work part-time for the next year.

— Glennis McNeal

Dedication to MS center earns Perry nurse of year honor

Perry: "Nursing offers opportunities with no limitations other than the ones we make for ourselves."

"She displays warmth and a unique concern — helping people battle a very complicated and mysterious disease," says Carolyn Martin, who manages the OHSU Medicine Clinics.

This caring attitude inspired Martin (along with Corrine Gilbertson, nursing supervisor of the Medicine Clinics) to nominate Bernice Perry for University Hospital 1988 Nurse of the Year.

Perry is nurse coordinator of the multiple sclerosis clinic. It's a challenge she loves. This and strong commitment to patient care are behind her efforts of creating and expanding the multiple sclerosis program.

She was honored at the Oregon Nurses Association fourth annual National Nurses' Day Honors Banquet on May 6 and at OHSU Nursing Challenges, a two-day conference on May 24 and 25.

"Bernie" as everyone calls her, was instrumental in expanding the one-day-a-month M.S. clinic to a two-and-a-half days a week comprehensive center. Multiple sclerosis (MS) is a disease of the brain and spinal cord that can affect walking, hand dexterity, sight thinking abilities and sensation. MS strikes suddenly, and caregivers find themselves dealing with a wide range of issues, from emotional trauma and family acceptance to medication and hospitalization. The program includes a nurse-administered symptom management clinic and immunosuppressive treatment clinic.

Perry developed nursing protocols and procedures for the treatment programs and methods to monitor laboratory accuracy. She also collaborated in developing educational programs for newly diagnosed MS patients and their families, a nursing clinic for symptom management and educational materials for patients. Her current project is a manual of local and state resources for these patients.

Perry's colleagues are also impressed by her incredible diligence and the compassion she shows patients. Says Martin, "Her interaction with them, whether they are newly diagnosed, relapsing or wheelchair bound, is always aimed at helping them maintain dignity and a sense of self worth."

"Patients love her," says Dr. Dennis Bourdette, director of the OHSU Multiple Sclerosis and Neuroimmunology Clinics. "She has a knack for building confidence in the patients and staff."

Perry talks enthusiastically about the clinic's development and her role in nursing. "Nursing offers opportunities with no limitations other than the ones we make for ourselves. Nurses are the strong link to patients." She adds, "Although health care is a team effort, the nurse proportionately spends more time with a patient and therefore has the opportunity to make the greatest impact. That's exciting!" She considers her accomplishments in the line of duty.

Perry's 30-year nursing career has encompassed public health, critical care, obstetrics, oncology and nursing management. She is a member of the Oregon Nurses Association and active on the OHSU Outpatient Nurse Practice Committee and Patient Education Committee. She is actively involved with the National Consortium of Comprehensive Multiple Sclerosis Centers and the national and state chapters of the Multiple Sclerosis Society. She has also attained the highest level of achievement in the Nurse Career Advancement Program.

OHSU helps Destiny conquer mysterious muscle disease

Perhaps it is her fate to go through life with profound muscle weakness. But 14-month-old Destiny Baxter is fighting a rare disorder with a tenacity that amazes her parents and intrigues OHSU specialists.

When she was three weeks old, Destiny was brought to Emanuel Hospital by her mother. Too weak to eat, Destiny needed feeding through a special tube placed in her stomach, which remained there until she was five months old.

She was also too weak to cry and couldn't move on her own. It became apparent that she suffered from a severe muscle disease. Starting with a simple muscle biopsy, physicians began to unravel a rare metabolic disorder that created the profound muscular weakness and accumulation of lactic acid in her blood.

These babies often need respirators to help them breathe. The condition can be fatal.

Drs. Neil Buist and Berkley Powell, directors of the OHSU's Metabolic Clinic,were consulted immediately. Destiny is also fortunate because her disorder is the specialty of Dr. Nancy Kennaway in the OHSU's Pediatric Metabolic Lab. Kennaway and Buist, in fact, are internationally known for their research in muscle disease and other metabolic problems.

The OHSU team discovered a rare problem in Destiny's muscle cells: links were missing in the "electron transport chain", which is part of the body's energy generation system. Expecting her condition to deteriorate rapidly, they tried an experimental treatment that has helped at least one other patient with a similar muscle disease.

During and following the treatment, Destiny's condition has steadily improved. This type of recovery has been reported in two or three similar cases, the team noted, and seems likely to be due to a delayed maturation of an abnormal enzyme system, or to some combination of the genetic defect and the special medications.

Today, Destiny is thriving. She can sit independently, reach for toys and lift her neck while prone. Last month she cried out for the first time and has a vocabulary of about 10 words.

Whether her improvement has been a miracle of modern science or just simply a miracle, there is little doubt that Destiny will someday be able to reach for the stars . . . both literally and figuratively.

— Jan Smith

Destiny Baxter clowns around on physical therapy equipment at OHSU's Child Development and Rehabilitation Center.

Symposium draws national biological rhythm experts

If you've ever had trouble sleeping, experienced jet lag, or felt depressed during the winter months; if you've ever worked alternating day and night shifts; you will appreciate the extensive research being done on human biological rhythm by medical scientists around the world.

A capacity crowd of medical professionals and interested people from the community recently heard specialists present their research and treatment approaches on circadian rhythm disorders. The April 8th symposium was sponsored by the OHSU Department of Psychiatry and the Division of Continuing Medical Education.

Featured speaker was Dr. William C. Dement, professor of psychiatry and behavioral sciences, and director of the Sleep Disorders Center, Stanford University School of Medicine. Dement, a pioneer in sleep research, presented an overview of sleep disorders medicine. Dement is also known as the co-discoverer of REM sleep (rapid eye movement) and its connection to dreaming.

Dr. Robert Sack, professor of psychiatry and clinical director of the Sleep and Mood Disorders Laboratory at OHSU, presented "The Use of Drugs to Alter Circadian Rhythm". His research with blind people, whose internal clocks run on 25-hour cycles, will help those who suffer from jet lag and shift work syndrome.

Dr. Al Lewy, professor of psychiatry and director of the Sleep and Mood Disorders Laboratory at OHSU presented "Winter Depression: Circadian Rhythm Abnormalities and their Treatment with Bright Light Exposure." Lewy's work in winter depression and bright light therapy is internationally recognized. Also speaking from OHSU was Dr. Clifford Singer, assistant professor of psychiatry, who lectured on "Circadian Rhythm Problems in the Elderly." Other speakers came from around the nation, including St. Luke's Medical Center in Chicago, and Columbia University in New York.

The "Dr. Joseph B. Bilderback Lecture Hall" in University Hospital (south) was dedicated on April 4 with a special ceremony that unveiled his portrait. Bilderback, long-time medical director at Doernbecher Children's Hospital, also taught at the medical school for 57 years. He was known as the father of pediatrics in the Northwest and continued his professorship until his death in 1969 at the age of 99. Honored guest at the ceremony was his wife, Gwendolen, receiving roses (above) from Dr. Robert Neerhout, OHSU's chairman of the Department of Pediatrics.

Doernbecher Telethon June 4, 5

The annual Children's Miracle Network Telethon, a major fund-raiser for Doernbecher Children's Hospital, will be broadcast live from Disneyland on June 4 and 5.

Proceeds from the Portland area — served by KGW-TV — will help expand and improve Doernbecher Children's Hospital. Plans for a new hospital are also on the drawing board as part of Doernbecher's first Strategic Plan.

The Oregon telethon segments will feature Doernbecher patients and staff. This year, KOBI-TV in Medford will join the telethon, with proceeds helping Doernbecher and pediatrics at Rogue Valley Medical Center.

In Oregon the telethon's production costs (at least $94,000) will be funded by United Grocers, which is also sponsoring several local pre-telethon events at Portland-area Thriftway, AG and Sentry Food Warehouse stores.

The "Miracle Aisles" program, for instance, continues through June 14. When shoppers purchase any of 56 specially marked products, a donation will be made to the children's hospital campaign. Participating grocers include Albertson's, Food 4 Less, Fred Meyer, IGA Stores, Kienows, Safeway, Shop 'n Kart and United Grocers.

Doernbecher, Oregon's oldest and largest children's hospital, admitted 5,340 children in 1987 and treated another 23,630 through clinic visits.

Eye center closer

Dreams for a new regional eye center on the OHSU campus are becoming a reality thanks to generous donations from individuals, corporations and foundations. The eye center, combining private, state and Veterans Administration eye programs in one building, will be a multistate resource for the treatment and research of eye disease.

To date, total contributions with interest are $19.9 million, allowing construction bids to be let for the six-story building. About $900,000 more is needed before ground breaking.

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