



# The Scribe

A publication of the Medical Society of Metropolitan Portland

PHYSICIAN PROFILE

## A natural leader



OHSU's new medical school dean praised for communication style, inspiring others.

- Page 5

OFF HOURS

## Carving out time



Emergency medicine resident Brittany Arnold, MD, keeps her focus on the mountains.

- Page 10

INSIDE	MSMP News & Events.....3	Off Hours.....10
	Physician Profile.....5	Classifieds Marketplace.....11
	Women's health research making strides...7	

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October 2017

## MEDICAL STUDENT PERSPECTIVES

# Students benefit from OHSU's diversity initiatives

By Cliff Collins  
For The Scribe

Oregon Health & Science University began calling **Allyson Knapper's** name when she was in the sixth grade.

A native of Portland, Knapper participated with some other middle school students in OHSU's Your Opportunities in Science summer program, which brought students to the Hill to work with faculty members and medical residents, focusing on science and



ALLYSON KNAPPER

mathematics.

Students toured the hospital's emergency department, dental school and nursing school, and even practiced suturing a banana under a doctor's guidance.

The program was part of **OHSU's Center for Diversity & Inclusion**, which acts as a supplemental supporter of the university's efforts to build and sustain a community of diversity and inclusion, said **Leslie Garcia, MPA**, assistant chief diversity officer at the OHSU center.

"We kept in touch with her throughout the years," Garcia said of Knapper. OHSU wanted to remind her that if she decided to pursue a career in the health sciences, "she always would have an opportunity" if she chose that path, Garcia said.

Knapper latched on to the science part right away. She loved playing with bugs in her backyard, and looking at things under a microscope. And her parents encouraged her curiosity. Her interest "continued and blossomed" in an honors class at St. Mary's Academy in Portland. Knapper entered Rice University with the intention of majoring in engineering.

But "right away, I realized it wasn't for me," says Knapper, now a second-year medical student at OHSU. "I was more of a people person and wanted to make an impact that way." In college, she had the opportunity to become involved in OHSU's Equity Research Program, in which she shadowed OHSU emergency physician **Mohamud Daya, MD**, a member of the **Medical Society of Metropolitan Portland**. "I appreciated how open he was," Knapper said. That experience "was what really confirmed medicine for me."

"I'm so grateful to the diversity office," she said. The medical school continued to stay in touch with her. "That's one of the reasons I chose OHSU, because they were the school who reached out to me the most. They showed me that they cared about people of color. That was attractive to me."

Knapper's class of 2020 includes 19 students identified as underrepresented racial or ethnic groups in medicine, or 12 percent of the class, OHSU's most diverse

ever. The School of Medicine also includes in its definition of diversity individuals from rural areas and those who have experienced "significant disadvantage or adversity."

"We're here to empower our departments for diversity," said Garcia. "Our goal as an institution is being inclusive, respectful and welcoming, regardless of what your background may be."

"Another reason I chose OHSU is, they gave me a full-ride (scholarship), even health insurance," Knapper said. "It's almost unheard of at the medical school level to get a full ride." She also graduated from Rice debt-free, thanks to several scholarships she obtained.

Knapper's mother, Vicki Guinn, has worked in health care public relations and marketing for three decades, and Knapper credits her for connecting Knapper with people who could help her. "It was my decision to become a doctor and pursue a medical degree. But after I decided to, it definitely helped to have a mother" who works in health care. "She knows a lot of people."

Knapper devotes as much of her precious time as possible to giving back, because "so many people went to bat for me." She serves on the OHSU Student Council as a volunteer admissions liaison, coordinating student campus tours and communicating with potential students. She also volunteers for OHSU On Track, a science outreach program to middle and high school students from underrepresented backgrounds.

Knapper hasn't decided exactly what her practice will look like after obtaining her medical degree, but "I do know I want to do something in women's health," she said. "Whether this is being a general practitioner or a surgeon, I'm not 100 percent sure."

She, of course, doesn't know where her internship and residency will take place, but she "definitely" eventually plans to return to practice in Portland. "My family and friends and the people who support

## WOMEN'S HEALTH & WELLNESS

# Recent findings support hormone replacement therapy for some

By Melody Finnemore  
For The Scribe

When a study being conducted by the Women's Health Initiative about the benefits of hormone replacement therapy (HRT) abruptly stopped in 2002, headlines reported that the cause of the study's termination was an increased risk of breast cancer, heart attacks and strokes among menopausal women who had used HRT.

In the wake of recent findings that there is, in fact, little to no increased risk, medical journals across North America are debating whether the original study results were merely misinterpreted or were maligned as part of a publicity strategy. What is not up for debate, however, is that scores of physicians stopped prescribing HRT.

**Audrey Curtis, MD**, specializes in urogynecology and gynecology with Legacy Health and applauds the recent WHI study results, which were published in the Sept. 12 edition of *JAMA*. She says she hopes the findings will put a rest to "persistent misinterpretation" of previous study results and misinformation that led to many women forgoing hormones that could have benefitted them.

"There's been a lot of re-evaluation of that data and looking at what it meant. We're really looking at it from a different place," she says. "I don't think that information has successfully been translated very well because hormones don't usually make the front page compared to, 'Oh, it causes these awful things.'"

The initial study was launched in 1991 and consisted of a set of clinical trials and an observational study, which together involved 161,808 generally healthy postmenopausal women. The clinical trials were designed to test the effects of



AUDREY CURTIS, MD

See **OHSU DIVERSITY**, page 8

See **HRT**, page 6

## NOTE TO OUR READERS

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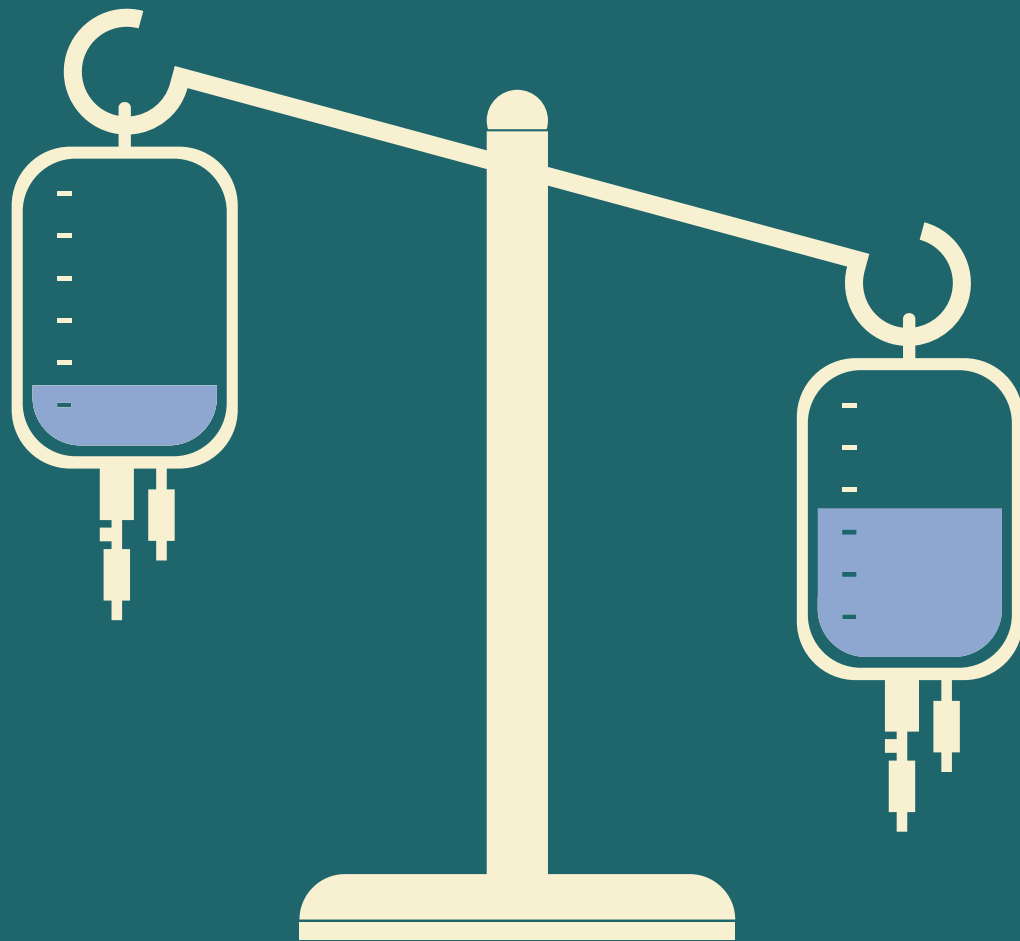
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We will also address strategies to reduce risks and the challenges to use telemedicine safely. **Attendees earn 1 CME credit. Complimentary dinner provided.**

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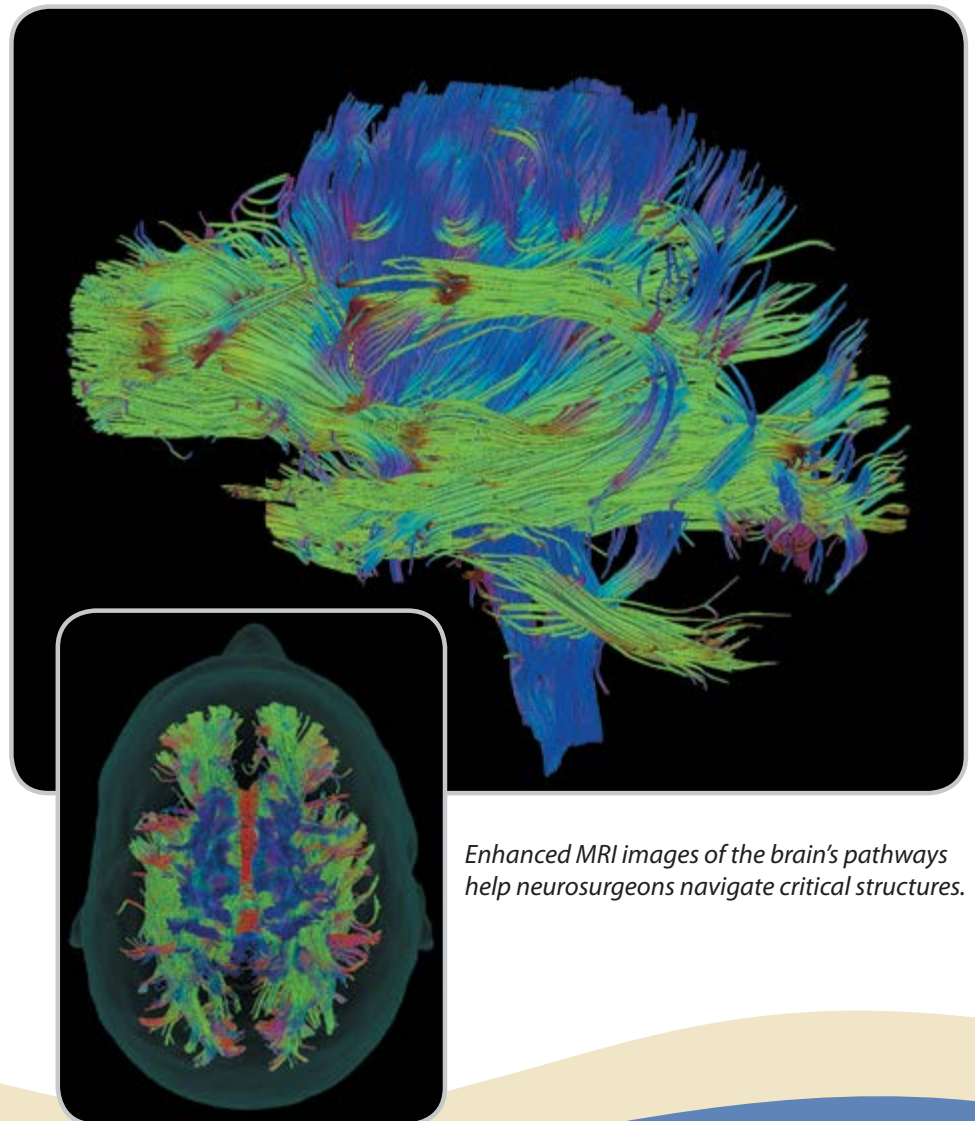
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*Enhanced MRI images of the brain's pathways help neurosurgeons navigate critical structures.*

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# Leadership a 'natural outgrowth' for Anderson

*New medical school dean praised as consummate communicator, inspiration to others*

By John Rumler  
For The Scribe

As Oregon Health & Science University emerges from a period of uncertainty and transition, the new dean of the medical school, **Sharon Anderson, MD**, provides a sense of stability, strength and leadership, colleagues say.

With dean Mark Richardson's, MD, MBA, unexpected death a year ago, a new chief clinical officer, John Hunter, MD, FACS, and the addition of Mitch Wasden, EdD, executive vice president and chief executive officer of OHSU Healthcare, Anderson's quarter of a century at OHSU and her extensive leadership record looms larger than ever.

"I am an organized person with an appreciation for order and effectiveness, a belief in teamwork and an aptitude for administration. Moving into leadership roles was a natural outgrowth for me," she says.

**"I am an organized person with an appreciation for order and effectiveness, a belief in teamwork and an aptitude for administration.**

**Moving into leadership roles was a natural outgrowth for me."**

— Sharon Anderson, MD



"This is an incredibly important time for OHSU," says OHSU President Joe Robertson, MD, MBA. "As we look toward the future we are faced with the opportunity to revolutionize how health care is delivered, breakthroughs discovered and medical education delivered. But we simultaneously face unprecedented challenges to both our mission and values. I'm confident that Dr. Anderson is the right person to help us navigate these waters on our ongoing journey to improving the health and well-being of Oregonians for generations to come."

The second woman to lead Oregon's nationally ranked medical school, Anderson oversees nearly 2,500 faculty representing 19 clinical departments, seven science departments, and multiple research centers and institutes. Her appointment started July 5.

"We have challenges ahead of us in all academic spheres, but I have great confidence in our leadership, faculty and staff," Anderson says. "I look forward to working with all as we move into our next chapter, growing and strengthening our missions with the ultimate goal of improving health."

Anderson grew up in Bethesda, Md. Her father worked for the CIA, allowing the family to spend time in Germany, Japan and Greece. After graduating from high school, Anderson moved with her family to Athens, giving her the opportunity to attend the American University of Beirut and later the University of Maryland campus in Munich.

She returned to the United States and graduated from the University of Maryland with a degree in government and politics. Anderson then decided to experience a much different side of life and spent a few years working minimum-wage jobs. It was during this period that she was briefly hospitalized following a traumatic injury, an experience that altered her life's path.

"It struck me that the physicians, residents and medical students were all working very hard, but were eager to learn and having fun doing their job," Anderson says.

Though no one in her family had ever become a doctor, she decided to do just that and received her MD from Louisiana State University Medical Center. After an internal medicine residency training at OHSU, she completed clinical nephrology training at the Beth Israel Deaconess Medical Center and research training at the Brigham and Women's Hospital, which is affiliated with Harvard Medical School.

She came to OHSU in 1991 as a staff physician in the Division of Nephrology & Hypertension and also worked in the Nephrology Section at the Portland Veterans Affairs Medical Center. Anderson spent much of her early career as a physician-scientist, writing grants, running a basic science lab and researching kidney disease. However, she found an unusually deep fulfillment in teaching and caring for patients, and developed a special focus on caring for veterans.

"I quickly discovered and appreciated that there are many different things you can do in medicine," she says.

### **'I want to hear all sides of the story'**

Anderson's first leadership role was at the Portland VA, where she was chief of the nephrology section. At OHSU, in 1998, she became head of the Division of Nephrology & Hypertension, and from 2003 to 2007 she served as vice chair for clinical affairs in the Department of Medicine, concurrently serving as an OHSU associate dean from 2004 to 2007.

Anderson spent the next six years as chief of the Division of Hospital and Specialty Medicine at the Portland VA, and vice chair for VA Affairs in the Department of Medicine, before becoming interim chair and then chair of the Department of Medicine at OHSU. She received a number of faculty teaching awards and the prestigious Dean's Award for exceptional service in 2001 and again in 2014.

Anderson has held numerous

leadership positions with medical associations including the American Board of Internal Medicine, the American Diabetes Association, the National Kidney Foundation, the American Federation for Research, the American College of Physicians and others. She was also the first woman president of the American Society of Nephrology and she has chaired two NIH studies.

In many of Anderson's leadership roles, she was the first woman, or among the

first, to hold the position. "Traits that have served me well, some of which might be considered feminine, include that I am empathetic and a good listener," she says. "I want to hear all sides of the story and broker solutions in which everyone works together to achieve the best outcome for the group."

Anderson avoids looking at decisions like a competition with winners and losers,

See **PHYSICIAN PROFILE**, page 8

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# Scribe Focus

Women's Health & Wellness

Each month, *The Scribe* focuses on a health topic, providing a deeper look into issues and advances that impact the area's medical community and patients. Next month, look for our Giving Back focus.

HRT, from page 1

postmenopausal hormone therapy, diet modification, and calcium and vitamin D supplements on heart disease, fractures, and breast and colorectal cancer.

The hormone trial had two studies: the estrogen-plus-progestin study of women with a uterus and the estrogen-alone study of women without a uterus. (Women with a uterus were given progestin in combination with estrogen, a practice known to prevent endometrial cancer.) In both

hormone therapy studies, women were randomly assigned to either the hormone medication being studied or to a placebo. The women in these studies then participated in a follow-up phase, which was intended to last until 2010, according to the Women's Health Initiative.

Professor Robert Langer, one of the principal investigators in the Women's Health Initiative, said in an April article in *Climacteric*, the journal of the International Menopause Society, that the "facts" most

physicians and women take into account when deciding whether to use hormone replacement therapy are frequently wrong. Initial results of the earlier study, which he said were misrepresented by a small group of people, made inflammatory claims that were not supported by the data.

In addition, the study did not include enough recently menopausal women to evaluate whether starting HRT near menopause had the same benefits as starting

it a decade after completing menopause. Initial results grouped the older women and younger women together, which led to a generalization that HRT carried risks for all groups of menopausal women.

**Online extra! Don't miss the extension to this article:**

Could hormone replacement therapy also be an effective treatment for menopausal women who are experiencing depression? Audrey Curtis, MD, weighs in on the issue.

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"The aftermath has been that women with significant menopausal symptoms such as hot flashes, night sweats, sleep disturbance, joint pain, anxiety and lowered mood (approximately one in three women), have been mostly untreated for 15 years," a news release summarizing Langer's article states. "Not only have women been denied symptom relief, but they have also been denied the other benefits of HRT – including arguably protection against bone loss and reduced risk of fracture."

The second half of the HRT trials found that the risk of breast cancer and heart attacks actually decreased for women who used estrogen alone and were 60 years old or younger when they started HRT. However, Langer noted, those results were lost amid the firestorm generated by the misinformation that had already been made public.

Curtis said most of the women she treats who ask for HRT are 50 to 60 years old and fall well within the age group of Women's Health Initiative clinical trial participants who benefited from it.

"I think we've gotten way too caught up in these risks that are small with this medication. Women are truly more at risk driving a car and we don't tell them not to drive because it could save their life," she said. "I just feel that this message is really important to get out to providers. They need to think differently about women who are 50 to 60 because they are the age group that truly deserves to have estrogen."

In the years following the HRT controversy, menopausal women were often recommended to engage in behavior changes, such as layering their clothing to avoid hot flashes, because many providers felt uncomfortable prescribing HRT. Curtis said this has been not only unfair to women, but could potentially endanger their lives.

The study involving women taking

See HRT, page 7

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# Women's health research making big strides at OHSU

*Clinical trials focus on contraception, menopause, women's cancers and more*

By Jon Bell  
For The Scribe

Here's a health care debate not that many people may be familiar with: Should a woman who's in childbirth push immediately as she becomes fully dilated or should she wait longer?

"People feel really strongly about it," said **Aaron Caughey, MD, PhD**, professor and chair at the Department of Obstetrics and



**AARON CAUGHEY, MD, PhD**

Gynecology and associate dean for women's health and research policy at OHSU. People feel so strongly about it, in fact, that an expansive clinical trial on the topic – the largest of its kind – has been under way for more than three years. It's involved some 3,600 women at four different locations around the country, including at the **Women's Health Research Unit** at OHSU's **Center for Women's Health**.

"The results could lead to a new protocol," said Caughey, who also serves as

associate dean for women's health research and policy at the OHSU School of Medicine.

The clinical trial is just one of about 20 different trials in the realm of women's health currently under way in the Women's Health Research Unit. Trials cover everything from contraception and birth control to menopause, pregnancy, women's cancers and more. The women-specific research is much needed as, historically, they have been underrepresented in clinical trials, according to OHSU.

"Women are an under-evaluated population," said **Marci Messerle-Forbes**, a nurse practitioner and senior research associate at OHSU, in a newsletter from the Center for Women's Health this past summer. "We can give them expanded and better options, for contraception and gynecological disease, by putting more resources into this research."

According to Caughey, a wide range of scientists and researchers are running an array of studies on women's health issues at OHSU. Some of those are taking place at the Oregon National Primate Research Center, which is home to about 5,000 non-human primates such as rhesus macaques, baboons and squirrel monkeys. Studies at the center are looking at the development of embryos and early fetuses in both an obesity model and a starvation model.

"In the developing world, (the starvation model) is the important one," Caughey said.

Other women's health research includes studies looking at how the placenta moves fats to the fetus, safe approaches to permanent contraception, reducing pain post-cancer and cervical cancer in the Native American population.

## Health care policy increasingly important

Beyond the medical studies, the research under the Center for Women's Health also looks at the policy side of health care. Caughey himself is involved in studying changes in health care in Oregon and in the country, how it is being funded, and how that impacts maternity and prenatal care. Another similar study is looking at how changes in Medicaid funding could impact the availability of contraception.

"Contraception is one of the best things to pay for," Caughey said, "and yet, here we are in 2017 debating whether or not we should be covering it."

The policy side of women's health research has become increasingly important, Caughey said, especially considering what is going on with health care on the national stage.

"There's a lot of change," he said. "Unfortunately, there is going to be even more change than we thought. It's all a little unclear."

While all of the research that is being done in women's health at OHSU is important work, there have been a few projects that have risen to a more prominent level and broken some impressive ground. One area focused on giving vitamin C to expectant mothers who could not quit smoking. The research found that the vitamin provided some protection and benefits to the babies; it also prompted some additional large-scale research.

Another breakthrough study involved **Shoukhrat Mitalipov, PhD**, and **Paula Amato, MD**, who looked into how mutations in DNA, inherited from a mother's egg, can cause serious disease. That initial work led to a new method for preventing certain inherited diseases by essentially editing a gene to correct a mutation in a human embryo and prevent it from being passed on. This past August, the effort garnered international recognition in an article in the journal *Nature*.

That particular study got an early boost from the **OHSU Circle of Giving**, a group of women donors who every year contribute donations of between \$2,500 and \$5,000 to help kick start research projects connected to women's health. To date, the Circle of Giving has invested about \$2 million in 18 projects since its inception in 2006. The group usually awards a

**"Women are an under-evaluated population. We can give them expanded and better options, for contraception and gynecological disease, by putting more resources into this research."**

– *Marci Messerle-Forbes, a nurse practitioner and senior research associate at OHSU*

grant of \$125,000 each year, though some years have seen multiple awards.

"The Circle of Giving provides seed funds to do pilot projects, which these days really matters," said **Michelle Berlin, MD, MPH**, vice chair of the department of obstetrics and gynecology at OHSU and



**MICHELLE BERLIN, MD, MPH**

co-director of the Center for Women's Health. "It's a phenomenal model that we would love to have expand not just here, but to other parts of the state or country."

Berlin, who helps oversee the Circle of Giving, said the women's

health research being done at OHSU is incredibly important and, at the same time, unique in the U.S.

"OHSU is the only one that goes from a primate research center to outcomes research," she said. "There are some places that do some of the pieces, but I think we are the only one that does it all."

Caughey, too, said as an institution, OHSU punches well above its weight class in women's health research compared to the amount of funding it gets from the National Institutes of Health. He said OHSU is usually ranked in the "teens and twenties" based on federal funding. But in other areas, OHSU vies for the top spot. One example: For the past seven years, OHSU has had the most research abstracts presented at the Society for Maternal-Fetal Medicine's annual Pregnancy Meeting.

"In terms of impactful research and how much we are getting published, how visible we are, I think we are at the top," he said. ■

## HRT, from page 6

estrogen alone showed a lower risk of breast cancer compared to women who weren't taking it. Similarly, participants taking estrogen showed a lower risk of strokes and heart disease than those who took the placebo.

"I think a lot of women who truly understand those numbers would think, 'I'm miserable and I want to try that,'" Curtis said.

While the Women's Health Initiative study did teach physicians that they shouldn't automatically give women HRT without considering their age and symptoms, misinterpretation of the study's results played on "anxiety kickers" for women who maybe knew someone who had breast cancer and were understandably afraid of that prospect of the risk of a stroke or heart attack, she added.

"It leaves a lot of women seeing their primary care doctor who are not giving them these hormones, and that leaves it to only the gynecologists giving them when it's purely in the purview

**"I think we've gotten way too caught up in these risks that are small with this medication. Women are truly more at risk driving a car and we don't tell them not to drive because it could save their life."**

– *Audrey Curtis, MD*

of primary care doctors to provide this," Curtis said. "I think the message that is still missing among providers, and particularly among primary care providers, is that women in their 50s and 60s deserve to have estrogen therapy." ■

me are here. It's a way to give back to the community. I'm so grateful to have the parents I have. I know not every parent will sit down to help write essays. I'm so grateful to them."

### Finding a profession

The Center for Diversity & Inclusion sponsors, or coordinates with other OHSU departments, 40 different programs for students, according to Garcia. These include educational pipelines, which target high school and college students, as well as programs and opportunities for



TAJWAR TAHER

students once they matriculate at OHSU. One program, the Scholars for a Healthy Oregon Initiative, encourages students to practice in rural areas after they graduate.

First-year medical student **Tajwar Taher** is enrolled in that program. Taher's family

moved from Philadelphia to Pendleton when he was 5 years old.

"We were the only Bangladeshi and

Muslim people in town and, at first, it was a huge culture shock," he said. "But within a year, we were wearing rodeo gear, and everyone was very open and friendly to us." Living in a small town, he became aware of how people get to know their neighbors and develop relationships over time, which appealed to him.

The family moved to Portland when Taher was in the seventh grade. Even though his father, Mohammed A. Taher, MD, is an internist, the younger Taher didn't give much thought to becoming a physician himself. Halfway through college, Taher was taking pre-med courses, but "didn't feel real passionate" about it until he had a positive encounter with a certain physician.

Taher described himself as "obese and pre-diabetic" at the time, and he had seen several pediatricians who did little more than just tell him he was too fat. But one doctor was different: She spent time talking with him.

"We had a long conversation, and she treated me like a human being," he said. "That really resonated with me. That interaction with that physician really changed the way I perceived myself, and completely turned my life around." After that, Taher

"Dr. Anderson is a talented person and physician who is able to inspire the best in others because she expects the best of herself. We all want to rise to the occasion when we are in her presence or working with her."

Atif Zaman, MD, MPH, professor of medicine and vice chair of clinical programs, has known Anderson for about five years and says Anderson approaches issues and controversies with great clarity, allowing her to solve thorny problems in a fair manner. He describes her as a "true triple threat" in medicine as she excels as a researcher, educator and clinician.

"An effective dean needs to understand and effectively manage the triple missions of an academic health center," Zaman says, "and since Dr. Anderson excels in all three areas, she'll be a great dean."

Even in her new position as medical school dean, Anderson continues to provide inpatient counseling at OHSU and at the VA, but her personal "labor of love," she says, is her ongoing commitment to a kidney disease clinic in Roseburg, where she provides specialty consultations as a nephrologist, in an area where very little VA specialty care is available.

For going on 20 years, Anderson has made the approximately three-hour drive to Roseburg, where she spends at least two days a month educating and providing clinical care. "Keeping in touch with my patients, my superb clinical staff and my clinician roots is an important way for me to stay grounded in my chosen field."

Anderson's semi-retired husband often makes the trip with her. While she's seeing patients, he's hiking the many scenic trails along the Umpqua River. In the evening, the couple celebrates their day by going out for a nice meal together.

"Each of us needs to find a way to mitigate the work-related stress in our lives," Anderson says. "I've found the things that fuel me and I take the time to do them. I recommend it to anyone." ■

realized he himself could serve as a force for change in other people's lives. What impressed him was that the doctor had not given him any medicine or procedure, but "just her words cured me."

Taher also had a transformative experience after college graduation, working with City Year Seattle, a program for at-risk high school youth. From that he became conscious of, and interested in, social justice and racial equality, he says.

After successfully overcoming his struggle with obesity, Taher set on a course to pursue a medical degree at OHSU. "I wanted to help people, the underserved. That's why I decided to apply for Scholars for a Healthy Oregon." After obtaining his medical degree, he is committed to returning to Pendleton to work with Native Americans. The program covers full tuition, with the

requirement that he serve five years in a rural community following graduation.

Taher thinks that "most likely" he will pursue family medicine, but he noted that rural areas also are in great need of many types of subspecialists, and he is keeping an open mind about the kind of practice he will enter.

He speaks highly of the medical school. "They're doing a great job. Diversity is supported at OHSU." The first week of school, OHSU hosted a luncheon for new students, introducing them to "multiple resources," he said. "I'm finding community here."

Medical school is hard work, he discovered. "I didn't really understand that until I got here," he said. "I'm just so thrilled to be here, to study my life passion. I'm honestly just enjoying life." ■

### PHYSICIAN PROFILE, from page 5

and she doesn't focus on what will make her look good – perhaps sometimes to her detriment, she says.

"I'm self-reliant and I have high expectations for myself," she says. "I assume that if something needs to get done, a leader should be willing to step up to make it happen – though I have also learned the essential art of delegation."

The role of dean, Anderson says, is to focus on the academic missions, research and education, while also serving as a key partner in leading the clinical mission. She is passionate about increasing the ranks of physician-scientists – those with MDs and additional degrees, such as a PhD or MPH, who are uniquely equipped to advance medical knowledge.

Another priority is fostering successful and fulfilling careers for OHSU faculty. "I understand the critical importance of wellness for our busy, often stressed workforce," Anderson says. "We've developed a highly successful Resident and Faculty Wellness Program which has received national recognition."

Anderson also hopes to empower women and minorities, and to have more of each enter leadership roles.

"I'm very encouraged, not only by my appointment but by the many women's leadership groups on campus, including the Women's Leadership Development Program," she says. "And also by the fact that 54 percent of our incoming medical school students are women."

### Inspiring the best in others

Associate professor of medicine and program director of the Internal Medicine Residency Program, Sima Desai, MD, FACP, has known Anderson since 1995 when Desai was a resident. Desai says Anderson has all the skill-sets for leadership, is a consummate communicator with a humorous, very clear but no-nonsense way of discussing issues, and a deep understanding and respect for people and for OHSU.

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# Carving out time for the OUTDOORS

*Emergency medicine resident Brittany Arnold, MD, keeps her focus on the mountains*

**By Jon Bell**  
For The Scribe

**Brittany Arnold, MD**, was working close to 70 hours a week last winter, but based on the mountains she snowboarded all season long, you never would have known.

Arnold, a Northwest native in her third year of an emergency medicine residency at Oregon Health & Science University, learned how to ski when she was 4 years old. At 10, she switched to snowboarding, and by high school she was competing in the Nissan Tri-Series at Snoqualmie Pass about 50 miles east of Seattle. It has long been one of her passions.

Last year, Arnold, who's now 32, bought a Mountain Collective Pass, which gives skiers and snowboarders two days of skiing and riding at 16 different ski resorts across the U.S., Canada, Australia and New Zealand. Arnold hit it hard, traveling and snowboarding throughout the season in British Columbia, Colorado, Idaho, Utah, Wyoming and, naturally, Oregon.

"Doing shift work, you can switch with other residents, so I would often work long swing shifts to have time off," she said. "You'd think I wasn't working 70 hours a week, but I was. I pretty much spent the whole winter traveling or at work. I may have burned myself out a little bit."

So, Arnold's upcoming winter season may be a little more local than last year, but the avid outdoors lover isn't likely to slow down much. In addition to snowboarding – she's now focused more on getting into the backcountry than just resort riding – Arnold is also a longtime camper and backpacker. She grew up in Kent, Wash., and her father took her car camping when she was young. Arnold took her first backpacking trip with some friends when she was 18, and she's never lost her passion for getting into the wild.

One of her favorite local backpacking trips is in the Goat Rocks, a stunning wilderness area between Mount Adams and Mount Rainier. Late this past summer, Arnold and her friend also charged around Mount Hood on the 41-mile Timberline Trail. While most hikers do the trek in three nights and four days, the duo took just two nights, ticking off 10 miles the first day and powering through about 15 miles each of the next two days.

"It was pretty tiring," Arnold said, "but we had beautiful weather, we were in a great mood and just had a lot of fun."

There was a time when Arnold was also an ardent rock climber – "I went through a big climbing phase," she said –



and a steady beer brewer, but those days are behind her, at least for the moment. That stems in part from her dedication to her career and education in emergency medicine, an interest that Arnold picked up at an early age. Her parents were both in the aerospace industry – her father was a test pilot and her mother worked for Boeing – and Arnold said her mother remembers her being fascinated by a human anatomy book when she was just three or four years old.

"I guess I just kind of gravitated toward it," Arnold said. She also gravitated toward Portland after touring the UP campus. There, she earned a bachelor's degree in human biology, setting herself on a path toward medicine. After graduating, Arnold spent three years before medical school volunteering locally and traveling to Peru three times on medical missions with the non-profit Health Bridges International. She also earned a graduate certificate from Portland State University in biomedical ethics, did part-time research in general surgery and volunteered for the Portland nonprofit Outside In, which helps homeless youth and others in need.

Arnold went to medical school at OHSU and thought she'd become a general surgeon, but she was drawn instead toward emergency medicine. That led her to luckily land one of only 11 spots for residents in the emergency medicine program at OHSU. She likes the problem-solving aspect of the field and making fast decisions to stabilize patients. Arnold also said she loves learning something new every day, the jack-of-all-trades

**TOP LEFT:** Brittany Arnold, MD, has skied and snowboarded since she was young. A former competitive snowboarder, the sport last year took her to locations across the West. Arnold is shown here on Mount St. Helens.

**ABOVE:** Arnold treks around Mount Hood on the Timberline Trail. This past summer, she and a friend negotiated the 41-mile trail in just two nights.

*Photos courtesy of Brittany Arnold*

nature of emergency medicine and the human interactions with patients and coworkers.

"I am very social and hate sitting still, so I really like that in emergency medicine you get to talk to and interact with the patients and your team members all day long," she said. "You're on your feet all the time. There's never a boring day."

When she graduates in June – after what hopefully turns out to be a solid snowboarding season – Arnold hopes to find a job in Portland. It's a tough market here, but she said residents rotate through the local hospitals and are able to make good career connections along the way. She could see herself ultimately not only practicing emergency medicine, but teaching it as well.

As for future outdoor adventures, Arnold, who's also a map collector and accomplished photographer, said she'd like to spend more time exploring Washington's North Cascades. And while she might be up for the Washington section of the Pacific Crest Trail, taking on the 2,650 miles of the entire trail from Mexico to Canada might be a tad much just now.

"I don't think I want to do the whole PCT," she said. "That's just too much time away from real life." ■



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