

Clinical Trials

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David M. Nowak, Executive Editor dnowak@slmms.org

James Braibish, Managing Editor Braibish Communications editor@slmms.org

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Area ranks high nationally in number of research studies

By Jim Braibish, St. Louis Metropolitan Medicine









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The High Cost of the Unvaccinated

Jennifer L. Page, MD, President, St. Louis Metropolitan Medical Society 2021



Jennifer L. Page, MD

The data is clear. COVID-19 vaccination decreases an individual's risk of hospitalization and death. Physicians and health care professionals have risked their own health and wellbeing to treat COVID-19 patients. In fact, the first COVID-19 death in St. Louis County in March 2020 was a health care worker—nurse Judy Wilson-Griffin from SSM Health St. Mary's Hospital. Nationally, more than 3,600 health care workers have died from COVID-19 as of April 2021. And there is the mental health toll that has been borne by physicians, nurses and others on the front lines.

The rollout of the COVID-19 vaccine in December and January was a shot of hope for frontline doctors and nurses. The Pfizer vaccine received full FDA approval on August 23. Despite readily available vaccines, we now have the challenge of getting vaccines accepted. A substantial portion of people in the U.S. have been exposed to misinformation about the safety and effectiveness of COVID-19 vaccines. Among the many myths circulating is that breakthrough infections somehow mean that vaccines do not work.

With about 40% of Missouri residents fully vaccinated today, the delta variant may be, as experts predicted, searching to find "host locations" to spread. Missouri, at the time of this writing, has the fourth highest number of COVID-19 cases in the country despite being

only the 18th most populous state. Missouri also has the second highest per capita rate of COVID-19 cases.²

Infections among vaccinated individuals are also increasing, with about one in five cases occurring in those who are fully vaccinated. However, local health officials note that vaccines continue to protect most individuals from the most severe complications of COVID-19, like hospitalization and death. They also protect our population by reducing disease spread and the emergence of new variants.³

An August report from Mercy found that out of 4,095 COVID-19 hospitalizations between May 1 and August 15, 92% of patients were unvaccinated (Chart 1).⁴

The data is clear. COVID-19 vaccination decreases an individual's risk of hospitalization and death. These preventable COVID-19 hospitalizations are devastating for patients, their families and health care providers. The hospitalizations are also impacting taxpayer-funded public insurance programs as well as the workers and businesses that pay health insurance premiums. The Centers for Medicare and Medicaid Services (CMS) reports that the cost of a Medicare fee-forservice COVID-19 hospitalization averages \$24,033.5

Chart 1: Mercy hospitalizations vaccinated vs. unvaccinated

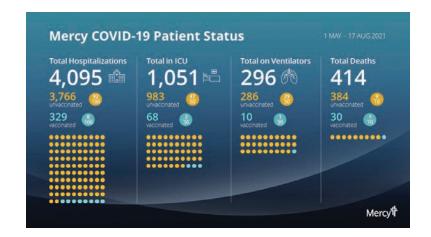


Chart 2: Preventable COVID-related hospitalization costs for unvaccinated people in the U.S., June and July 2021

	JUNE 2021	JULY 2021	TOTAL
Estimated number of preventable COVID-19 hospitalizations	37,000	76,000	113,000
Estimated preventable cost for unvaccinated COVID-related adult hospitalizations	\$0.7 Billion	\$1.5 Billion	\$2.3 Billion

Source: KFF analysis of CDC, CMS and HHS Protect data

Analysis of CDC data (Chart 2) indicates there were 37,000 preventable unvaccinated COVID-19 hospitalizations in June and another 76,000 preventable unvaccinated COVID-19 hospitalizations in July. These largely avoidable hospitalizations have already cost the U.S. health system billions of dollars since the beginning of June.⁵ COVID-19 costs continue to climb.

Emotional Toll

But even greater than the financial cost are the emotional toll and burden on the health care workforce. According to Medscape's annual physician survey, the top physician burnout specialties in 2019 were urology, neurology, nephrology, endocrinology and family medicine. For 2020, the lineup was much different: the highest burnout rates were in critical care, rheumatology and infectious disease. Women also had a much higher rate disparity than years past, which is not too surprising considering the numerous pressures stemming from increased home responsibilities for homeschooling and child care. Physicians noted additional stress with lack of PPE, long hours, difficult working conditions, and grief from loss of patients that added another layer of stressors.⁶

Due to low vaccination rates, the CDC in July recommended that all Americans, regardless of vaccination status, wear masks in indoor public places within areas experiencing outbreaks. Following this guidance, the St. Louis County Department of Public Health recommends:

- 1. Wear a face covering in indoor public places when other people are present, even if you are vaccinated. Only remove masks when eating and drinking and when you know that others around you are fully vaccinated.
- 2. Assume that one in three people in any crowd or gathering may be unvaccinated. Also, be aware that all children younger than 12 will be unvaccinated and vulnerable to COVID-19 exposure in crowds. It is recommended that children and unvaccinated residents do not engage in large crowds and gatherings.
- 3. Protect children younger than 12 that are too young for the vaccine as they engage in school, camps and other areas of their normal life.7

Hesitancy and Resistance Remain

The vaccine landscape has changed since anticipation for vaccine rollout began in January. However, according to a new report from the Kaiser Family Foundation's COVID-19 Vaccine Monitor project, opinions about the COVID-19 vaccine mostly have not. When those who remain unvaccinated six months later were asked about their main reason for not getting a COVID-19 vaccine, the most commonly offered reasons are concerns about side effects (21%), followed by concerns that the vaccine was too new, too unknown, or not tested enough (16%). For those who were vaccine hesitant and changed their minds, the most persuasive factor for vaccination was talking to and being persuaded by a family member. The second most common reason was recommendation by their own doctor or health care provider.8

Vaccination has been shown to be the best way to protect individuals from severe illness and death and to protect the community from sustained transmission and outbreaks. SLMMS has supported vaccination efforts and mitigation strategies and will continue to do so until our community is vaccinated. Physicians remain a valuable resource for guidance and information for COVID-19 vaccination. The cost of the unvaccinated is heavy to bear. We must ease the burden. -

Jennifer L. Page, MD, is medical director of the Acute Rehab Program at Mercy Hospital South.

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A Pandemic of Misinformation

By David M. Nowak, Medical Society Executive Vice President



David M. Nowak

After encouraging signs and a loosening of restrictions back in the spring, the delta variant and recent upturn in cases are once again jamming our emergency rooms and intensive care units.

Medical Society member recently shared with me an internet meme that was making the rounds of social media and landing in everyone's newsfeed. The humorous post, from the "University of Facebook School of Medicine" joked that "you too can be a doctor!" on social media platforms without any formal education or training. It continued, "don't let your lack of medical training or experience stop you from posting bad medical advice ... our online courses are not limited by classroom size and best of all no enrollment fees or intelligence required ... so enroll now and start your career as an unqualified Facebook doctor today!"

I must admit I chuckled. But then I began thinking about how unfortunate it was that we're not only fighting a COVID-19 pandemic, but that so many of these "Facebook doctors" are out there dispensing advice that we're also battling a pandemic of misinformation. The continued spread of false facts, conspiracy theories and untrue data points has resulted in many people choosing not to be vaccinated or not follow simple safety precautions such as wearing a mask. And after encouraging signs and a loosening of restrictions back in the spring, the delta variant and recent upturn in cases are once again jamming our emergency rooms and intensive care units. In many ways, it feels like last winter (pre-vaccine availability) all over again.

Back in April, I wrote in this column about vaccination being the key to bringing us together again. At that time, just past the one-year mark of the pandemic, we were beginning to see light at the end of the tunnel. But researchers also saw another major hurdle—vaccine hesitancy or public refusal to get the COVID-19 shot. It was predicted then that vaccine availability would eventually surpass public demand, and that if vaccination rates plateaued, we would

continue to see new variants, continued outbreaks and significant challenges.¹ Unfortunately, that is exactly what has occurred.

Some people are simply not trusting of the science. They feel the vaccine was rushed and has not yet been proven to be effective. Even after the Pfizer vaccine recently received full FDA approval, some still refuse to budge. Many are believers of the misinformation they've heard about or read online.

For many of us, this is difficult to comprehend. In the midst of a deadly pandemic, why would people elect not to receive a vaccine that may be life-saving for them as well as for those around them? It's easy to dismiss them as foolish, uneducated or selfish in that they seem to hold little or no regard for the good of the community. But it's much more complicated than that.

Vaccine hesitancy is complex. Even though we're told to "follow the science," science is often quite difficult to understand. Few people understand the incredible complexities of virology, immunology or epidemiology. Many educated people have only a passing grasp of science at best.²

Some of those choosing not to get vaccinated hold deeply rooted religious beliefs. Others, especially rural or lower income individuals, are distrustful of the government in general. For them, trusting the science is not even a valid argument.

There is no doubt that vaccine hesitancy has been "amplified by social media, which constantly churns out half-truths and untruths, readily shared with the click of a button. The classic example is that the vaccine implants some sort of chip in the body that allows humans to be tracked. While problematic, no one should be surprised by the effect of social media on this debate, or on the way it has become increasingly toxic.

In fact, social media is used by movements and advocates of every stripe, and not always in an honest way."2

The unfortunate consequences are that we continue to see cases and deaths increase mostly among the unvaccinated. At the same time, our frontline health care workers remain both frustrated and exhausted. And, fears are rising among people with chronic health problems or those with an emergency illness who believe that there won't be room for them in our hospitals when a crisis occurs.3

Vaccine hesitancy has been "amplified by social media, which constantly churns out half-truths and untruths, readily shared with the click of a button.

Medical professionals and public health officials are fighting another battle during this war. It's unfortunate and dangerous the degree to which the COVID-19 pandemic has been politicized. Elected officials should not be maneuvering to limit the authority of experts who have been entrusted to protect the community's health and well-being.

Those of us who are baby boomers vividly recall lining up in school gymnasiums to receive our smallpox and polio vaccines during the 1950s and 1960s. What if our parents had rejected that science, or politicians had intervened in those mass vaccination efforts? We should be thankful those were simpler times and social media was not around then, because, tragically many of us would not be either.

Multiple studies in recent months have shown that one's personal physician remains the most trusted source for COVID-19 vaccine information. Physicians have the opportunity and the authority to help overcome misconceptions about the vaccine by continuing to present factual information in a non-judgmental way.

To win the war against the COVID-19 pandemic will require us to win the battle against misinformation. -

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County Public Health Director Cites Vaccination Successes in Underserved Communities

St. Louis County Public Health Director Faisal Kahn, MBBS, MPH, highlighted successes in increasing COVID-19 vaccination coverage in low-income, under-resourced areas, in his presentation to the Sept. 1 SLMMS General Society Meeting. About 25 SLMMS members attended.

Over the nine weeks from June 25 to Aug. 27, vaccination rates increased by 8% to 11% in seven ZIP codes in the northeastern portion of the county: 63133 (Wellston), 63134 (Berkeley), 63135 (Ferguson), 63136-63137 (Jennings-Moline Acres-Riverview), 63138 (Spanish Lake) and 63140 (Kinloch). These ZIP codes previously had the lowest vaccination rates in the county.

"The increases are a reflection of the efforts of the Public Health Department in working with neighborhood partners to place clinics where they are needed most," Dr. Kahn said. "There have been 149 vaccination events at 90 locations over the past 60 days. We have been focusing efforts at the grassroots level working with community organizations, barbershops, beauty salons, churches, rec centers, etc."

This is a departure from the large vaccination events that were the mainstay earlier when vaccinations first became available. "Now we measure progress in tens instead of thousands," Dr. Khan said.

Residents keeping vaccination appointments can be a challenge in these under-resourced communities. "Transportation can be a barrier, as well as taking time off work. We make repeat phone calls and send text messages to try to reschedule missed appointments."

"We have been focusing efforts at the grassroots level working with community organizations, barbershops, beauty salons, churches, rec centers, etc."

The St. Louis County jail is rated as a success story in preventing COVID-19 outbreaks, he said. "This a testament to the corrections staff in everything they've done in vaccinating inmates and staff, as well as friends and visitors."

He also recognized fire and EMS districts for their partnership in delivering nearly 1,400 vaccinations to homebound individuals and their caregivers. "This is an amazing success story of which we all can be proud."

"We've seen people go from complete vaccine resistance to full acceptance on the advice of their physician."



Dr. Faisal Khan giving his presentation to SLMMS.

Dr. Khan said he hopes that primary care physicians soon will be able to deliver vaccinations. "While public health is viewed as the government, we've seen people go from complete vaccine resistance to full acceptance on the advice of their physician. They'll say to us in public health, 'While I didn't believe you, I believe my doctor.""

Licensure rules may have to be adjusted to enable physicians to administer vaccines, he noted. "We very much want physicians to be able to deliver vaccinations, even if it means relaxing licensing rules."

As of Aug. 27, nearly 49% of St. Louis County residents were fully vaccinated. "We have a long way to go," Dr. Khan concluded.

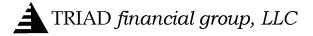


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Meet Your 2022 SLMMS Officer and Councilor Nominees

Election takes place online November 1-25

t the SLMMS General Society Meeting on September 1, the Nominating Committee presented the slate of officer and councilor candidates for election to lead the organization in 2022. The nominations were approved by the membership and brought forward for the annual election that will take place online at www.slmms.org from Nov. 1 to 25.



Erin S. Gardner, MD, will succeed automatically to the position of 2022 SLMMS president from his current status as president-elect. Dr. Gardner is board certified with a practice specializing in dermatology and Mohs surgery with Dermatology Specialists of St. Louis at

Missouri Baptist Medical Center.

He earned his undergraduate degree at the University of Missouri, and medical degree from Vanderbilt University. He completed his advanced training at Washington University School of Medicine (Barnes-Jewish Hospital) and Duke University School of Medicine, and an American College of Mohs Surgery fellowship at Methodist Hospital in Houston.

In addition to currently serving at president-elect, Dr. Gardner was SLMMS vice president in 2020, and a councilor in 2019. He has chaired the SLMMS Finance and Endowment Committee, and serves on the Publications Committee. He is a past president of the Missouri Dermatological Society; served on the Public Policy Committee of the American College of Mohs Surgery; and was EHR Task Force chair and an Advisory Board Executive Committee member for the American Academy of Dermatology.

Born in Springfield, Mo., Dr. Gardner and his wife Emily are the parents of one son and three daughters. He joined SLMMS in 2007.

Election Candidates

Up for election will be candidates for SLMMS presidentelect, vice president and secretary-treasurer along with four councilors. The new councilors will be elected to three-year terms (2022-2024); an additional seven councilors will continue their unexpired terms.

Brief profiles of our candidates are included in their biographies that follow. To help gain insight on their thoughts of practicing medicine during this challenging time, we have asked them to respond to the question, "As we continue to grapple with the COVID-19 pandemic and its impact on the practice of medicine, how can SLMMS best support physicians in the St. Louis region?"

M. Laurin Council, MD | President-Elect



Practice: Dermatology and dermatological surgery. Associate professor of medicine, Washington University School of Medicine. Diplomate, American Board of Dermatology; Fellow, American College of Mohs Surgery.

Dr. M. Laurin Council

Education: B.S., Louisiana State University; M.D., Washington University School of Medicine. Internship and residency, Barnes-Jewish Hospital.

Birthplace: Lake Charles, La.

SLMMS/MSMA/AMA Service: SLMMS councilor, 2020-2021; MSMA First Vice President 2020-2021; Alternate delegate to the AMA for the American Society for Dermatologic Surgery (ASDSA), 2019-present; ASDSA young physician representative to the AMA 2018-2019; Joined SLMMS 2019.

Other Professional Organizations: President, St. Louis
Dermatological Society; board of directors, American
Society for Dermatologic Surgery; board of directors, Women's
Dermatologic Society; board of directors, American College of
Mohs Surgery; member, American Academy of Dermatology;
board of trustees, Dermatology Foundation; member,
Association of Professors of Dermatology

Community/Volunteer Activities: Co-chair, Sun Protective Outreach Teaching by Students; Phi Kappa Phi National Honor Society; Washington University Medical Center Alumni Association Executive Council, treasurer.

Personal: Husband, Matthew Council, MD, ophthalmologist; children, five daughters, one son. Hobbies and interests: LSU football, cake decorating, clarinet, Cajun cooking.

As we continue to grapple with the COVID-19 pandemic and its impact on the practice of medicine, how can SLMMS best support physicians in the St. Louis region? Now, more than ever, is a crucial time for members of SLMMS to band together to navigate the ever-changing landscape of the COVID-19 pandemic. Whether by improving vaccination rates, assuring availability of proper personal protective equipment, or providing guidance on safe operational procedures in our hospitals, surgery centers, outpatient clinics and other health care facilities, members of SLMMS will work to protect our patients and our profession. The practice of medicine is ever changing, and we as an organization must continue to lead through these challenging times.

Kirsten F. Dunn, MD | Vice President



Practice: Internist, Mercy Virtual vEngagement. Certified, American Board of Internal Medicine; Fellow, American College of Physicians; Epic Physician Builder.

Dr Kirsten F Dunn

Education: B.A., Harvard College; M.D., Saint Louis University. Internship and residency,

Stanford University Hospital and Clinics.

Birthplace: Jefferson City, Mo.

SLMMS/MSMA/AMA Service: SLMMS councilor, 2019-2021; MSMA Young Physician Section vice chair, 2018-2019; MSMA Delegate, Young Physician Section; MSMA Reference Committee, 2018. Joined SLMMS 2017.

Other Professional Organizations: Missouri Chapter of American College of Physicians, Governor's Council; Missouri physician representative for Health-E(quity) Network for Change.

Honors and Awards: Alpha Omega Alpha; American Medical Women's Association Glasgow-Rubin Achievement Citation; Alpha Sigma Nu Jesuit Honor Society; Merck Book Award; Washington University School of Medicine Department of Medicine House Staff Teaching Award.

Personal: Husband, Tim Dunn, MD, cardiologist; children, one son and one daughter. Hobbies and interests: baking, comedy.

As we continue to grapple with the COVID-19 pandemic and its impact on the practice of medicine, how can SLMMS best support physicians in the St. Louis region? The pandemic has been long and difficult for physicians, with the ongoing call to serve but at times without the safety, support or respect needed to care for patients without sacrificing ourselves, physically and emotionally. SLMMS provided information and advocacy along the way, and kept members informed of statewide MSMA efforts to reduce Missouri's vulnerability to COVID's impact. The virtual format of SLMMS meetings now allows participation by more members so that through organized medicine, even more physicians can gain a support network and become involved in shaping the future of the profession.

Robert A. Brennan, Jr., MD | Secretary-Treasurer



Practice: Obstetrics and gynecology -OB hospitalist. Certified, American Board of Obstetrics and Gynecology. Quarantine monitor for the St. Louis County Department of Public Health.

Dr. Robert A. Brennan, Jr.

Education: B.A., Saint Louis University; M.D., Saint Louis University School of Medicine. Internship and residency, ob-gyn, Mercy Hospital St. Louis.

Birthplace: St. Louis.

SLMMS/MSMA/AMA Service: SLMMS secretary-treasurer, 2018-2021; councilor 2015-2017; secretary-treasurer, 2014; secretary, 2008-2010; councilor, 2004-2007 and 2011-2013; Physicians' Wellness Conference chair, 2007-2009. Chairperson, SLMMS Continuing Medical Education Committee; Member, SLMMS Executive, Grievance, and Finance and Endowment Committees; MSMA first vice president, 2012-13; 3rd District councilor, 2013-present. Joined SLMMS 1979.

Other Professional Organizations: American Medical Association; St. Louis Obstetrical and Gynecological Society, secretary 1991-1992; American College of Obstetricians and Gynecologists; Society of Ob-Gyn Hospitalists.

Personal: Wife, Joan Brennan; family, four sons and three grandchildren; Hobbies: walking, archery, reading.

As we continue to grapple with the COVID-19 pandemic and its impact on the practice of medicine, how can SLMMS best support physicians in the St. Louis region? SLMMS can support physicians in the St. Louis region in several ways – first, it can keep physicians abreast of legal conditions and laws that may affect medical practice; second, it can help physicians with contracts with health organizations; third, SLMMS can provide physician networks that initiate medical referrals and social interaction; finally, it can educate physicians about medical conditions and the current social environment that affects medical practice. With regard to the COVID-19 pandemic, SLMMS can support physicians in many different ways, including education and providing resources; encouraging community vaccination, mask usage, social distancing and hand washing; utilizing benefits and partnerships that provide resources for legal aid, wealth management and trust protection; monitoring issues for practices utilizing telemedicine; offering legislative updates; maintaining community relationships with the St. Louis Metropolitan Pandemic Task Force and the city and county health departments; and supporting health care workers with mental health services by strongly promoting the Missouri Physicians Health Program.

Nominees Announced ... - continued

Louis A. Aliperti, MD | Councilor



Dr. Louis A. Aliperti

Practice: Urology; Physician in practice with Urology of St. Louis; Certified, American Board of Urology; Hospitals: Missouri Baptist Medical Center, HSHS St. Elizabeth's Hospital, HSHS St. Joseph's Hospital – Breese, St. Luke's Hospital, Anderson Hospital.

Education: B.A., Colgate University; M.D., Tulane University. Internship and residency, Emory University School of Medicine – General Surgery (2015) Urology (2019).

Birthplace: St. Louis.

SLMMS/MSMA/AMA Service: Joined SLMMS 2019.

Other Professional Organizations: American Urological Association; American College of Surgeons.

Personal: Wife, Mimi Aliperti; children, one son and two daughters. Hobbies and interests: traveling, spending time with family, cooking.

As we continue to grapple with the COVID-19 pandemic and its impact on the practice of medicine, how can SLMMS best support physicians in the St. Louis region? SLMMS can support the medical community of St. Louis by continuing to help physicians understand and navigate the ever-changing hurdles to effective patient care. By giving physicians a voice in health care policy and legislation through engagement with local, state and national leadership, SLMMS can help to ensure that we are able to provide our patients with the care they deserve.

Faisal Khan, MBBS, MPH | Councilor



Dr. Faisal Khan

Practice: Epidemiology, infectious disease. Director, St. Louis County Department of Public Health

Education: M.B.B.S., The Army Medical College, Pakistan; Fellowship in Public Health and Masters in Public Health in Australia.

Birthplace: Lahore, Pakistan

SLMMS/MSMA/AMA Service: Joined SLMMS 2015.

Other Professional Organizations: Worked in Pakistan, Australia, Vietnam, South Africa, Botswana and the U.S. on a variety of communicable disease control issues including TB/HIV co-infection, hepatitis B & C, polio, and with the World Health Organization (WHO) Expanded Program on Immunization; served as director of health services research and quality improvement for a multi-state peer review organization; Adjunct faculty, Saint Louis University School of Public Health and the Washington University Institute for Public Health; National Association of City & County Health Officials (NACCHO); American Public Health Association; Infectious Disease Society of America.

Personal: Wife, Amana Nasir, MD, pediatric gastroenterologist; children, one son and one daughter. Hobbies and interests: reading, travel, history.

As we continue to grapple with the COVID-19 pandemic and its impact on the practice of medicine, how can SLMMS best support physicians in the St. Louis region? SLMMS should continue to partner with local public health agencies to inform and educate SLMMS membership about the various efforts underway across the St. Louis region to address COVID-19 as well as other public health crises that have worsened under the umbrella of the pandemic: substance abuse, mental health, obesity, diabetes, cardiovascular disease, gun violence, etc.

Continued on page 12





nurses cardiologists
practice managers family physicians
infectious disease specialists
internists anesthesiologists
podiatrists nurse practitioners
long term care specialists
neurosurgeons pulmonologists
epidemiologists oncologists
pediatricians general surgeons
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Healthcare Professional Liability Insurance

Kathleen M. Nemer, MD | Councilor



Practice: Dermatology and Mohs micrographic surgery, Laser & Dermatologic Surgery Center. Certified, American Board of Dermatology. Hospital: St. Luke's Hospital

Dr. Kathleen M. Nemer

Education: B.S., Ohio State University; M.D., Vanderbilt University School of Medicine.

Internship in internal medicine at Vanderbilt University Medical Center; Residency in Dermatology at Barnes-Jewish Hospital/Washington University School of Medicine. Fellowship in micrographic surgery and dermatologic oncology at Washington University School of Medicine.

Birthplace: Columbus, Ohio.

SLMMS/MSMA/AMA Service: MSMA delegate 2021; SLMMS Political Advocacy Committee; Joined SLMMS 2019

Other Professional Organizations: American Academy of Dermatology; American College of Mohs Surgery; American Society for Dermatologic Surgery; Women's Dermatologic Society; American Medical Association.

Personal: Hobbies and interests: long-distance running, cooking/baking, gardening, travel.

As we continue to grapple with the COVID-19 pandemic and its impact on the practice of medicine, how can SLMMS best support physicians in the St. Louis region? SLMMS can best support physicians during the COVID-19 pandemic through active education and continued advocacy for our patients. SLMMS serves as a liaison between the legislative process and patient care. It is important for SLMMS to connect physicians with policymakers so that they understand the needs and concerns of patients. Legislative educative sessions and forums are helpful ways to connect. It is also important for SLMMS to unite physicians with each other through events and idea sharing, so that we may best serve our patients during this difficult time.

Evan S. Schwarz, MD | Councilor



Practice: Emergency medicine, medical toxicology, addiction medicine. Associate professor of emergency medicine, Washington University School of Medicine, Barnes-Jewish Hospital. Certified, American Board of Emergency Medicine, Board of Medical

Dr. Evan S. Schwarz

Toxicology. Hospitals: Barnes-Jewish Hospital, St. Louis Children's Hospital, Missouri Baptist Medical Center.

Education: B.A., University of Texas at Austin; M.D., University of Texas Medical Branch at Galveston. Internship and residency in Emergency Medicine, Washington University School of Medicine/Barnes-Jewish Hospital. Fellowship in Medical Toxicology, University of Texas Southwestern Medical Center, Dallas.

Birthplace: Loma Linda, Calif.

SLMMS/MSMA/AMA Service: Joined SLMMS 2017. Panelist, SLMMS Opioid Symposium, 2018. MSMA member.

Other Professional Organizations: Immediate past president, Missouri College of Emergency Physicians; board of governors, American College of Emergency Physicians; board of directors, American College of Medical Toxicology; American Academy of Clinical Toxicology; American Society of Addiction Medicine; Society of Academic Emergency Medicine.

Community/Volunteer Activities: St. Louis Prescription Drug Monitoring Program Technical Advisory Committee.

Personal: Hobbies and interests: running, biking, watching sports and movies, travel.

As we continue to grapple with the COVID-19 pandemic and its impact on the practice of medicine, how can SLMMS best support physicians in the St. Louis region? The pandemic has taken a toll not only on our patients but also our professional and personal lives. Just as we thought we were making some progress, we are hit again as hospitals are filling up and simple public health measures are constantly questioned. SLMMS can continue to support physicians, both their practices and their emotional well-being. The organization can also continue to act as a resource for accurate information for both our patients and us. Finally, SLMMS can work with local politicians and public health officials to support policies that keep our community safe.

Continuing on the Council (Terms began in 2020 or 2021)

- Sara Hawatmeh, MD
- Otha Myles, MD
- David M. Niebruegge, MD
- Mark S. Pelikan, DO
- Farheen N.K. Raja, MD

- Damien L. Ricklis, MD
- Richard H. Wieder, MD



Clinical Trials: Testing New Drugs, Devices and Treatments in St. Louis

Area ranks high nationally in number of research studies

By Jim Braibish, St. Louis Metropolitan Medicine

ith two major academic medical centers and a host of large hospitals, St. Louis is a center for medical research ... and with this, the site of many clinical trials studying new drugs, devices and treatments.

The website clinicaltrials.gov shows 3,010 currently active trials within a 50-mile radius of St. Louis as of Sept 15. The figure includes not just trials for new items, but also other studies following up on drugs and devices currently approved. This is more trials than other metropolitan areas such as Minneapolis, Cleveland, Indianapolis and Kansas City, but fewer than larger metros such as Chicago, New York and Los Angeles. Nevertheless, this positions St. Louis well on the national map.



"This is the way we advance our understanding of how to treat diseases and improve the overall health of the community. It is the underpinning of how we move medicine forward."

— Yi Zhang

Washington University

The major factor behind St. Louis' national presence in clinical trials is the wide-ranging research work at Washington University School of Medicine. About half of the St. Louis trials listed at clinicaltrials.gov are based at the School of Medicine and the affiliated BJC HealthCare hospitals.

Of the trials at Washington University, about half are studies of new drugs, devices and treatments, with the other half being work on existing approved items, according to Yi Zhang, JD, assistant dean for clinical research and director of clinical research, Division of Oncology at Washington University School of Medicine.

The largest area of activity is in cancer research. At the nationally recognized Siteman Cancer Center, a NCI

Comprehensive Cancer Center, there are about 500-600 currently active clinical trials enrolling some 1,300 patients each year, Zhang said. "This puts us in the top 10 nationally in the number of patients and trials in the area of cancer," she added.

The number of cancer trials at the university has grown 50% in the last 10 years.

Various other departments within the School of Medicine also are very active in trials. For example, the Department of Neurology lists more than 110 active trials on its website, studying such conditions as Alzheimer's, multiple sclerosis and Parkinson's disease.

Some studies may be sponsored by a drug or device manufacturer, while others may be funded by the National Institutes of Health or a private foundation. Each study is led by a faculty member who has an interest in the condition.

Zhang oversees the Office of Clinical Studies, which supports these activities throughout the School of Medicine in the areas of regulatory, operations and budget. The office also includes Volunteer for Health, which maintains a registry of community participants and patients who are interested in serving with studies. All participation is voluntary.

Mercy

To help make cutting-edge treatments available to its patients, Mercy participates in a large number of clinical trials. Mercy's research entity, Mercy Research, typically manages about 200 active clinical trials in Mercy East Communities, which covers the St. Louis region, and about 450 system-wide, according to Bethany Sleckman, MD, division chief for hematology/oncology at Mercy Hospital St. Louis and principal investigator for Mercy Research Oncology St. Louis. A total of 933 patients are currently enrolled in industry and National Cancer Institute-sponsored trials in the St. Louis region.

"We think that research is an important part of patient care. It's important for our physicians and patients to have access to the latest drugs and devices," Dr. Sleckman said. "Patients should not have to go to an academic medical center to have access to current research."



"The only way to determine if a drug or treatment is safe and effective is to do trials. People are eager to participate in trials—to potentially not only help themselves, but also patients similar



About half of Mercy's clinical trials are in cancer research. Other large areas of activity are cardiology, infectious disease/critical care, and endocrinology.

Mercy Research is overseen by a system vice president and an executive director. They provide regulatory, business and operational support, and offer trial sponsors the opportunity to conduct the same study at multiple sites throughout the Mercy system. Within the St. Louis region, there are six research offices staffed by 26 clinical personnel and numerous business and regulatory personnel.



"Cancer is not taking a break for COVID-19. We are still diagnosing cancer and offering trials."

- Dr. Bethany Sleckman

Saint Louis University

Like Washington University and Mercy, Saint Louis University maintains a clinical trials office that supports the conduct of trials at the university. The clinicaltrials.gov website shows about 200 active trials at Saint Louis University and SSM Health Cardinal Glennon Children's Hospital.

Recruiting Patients

Researchers face greater challenges today in recruiting patients. One cause is the studies themselves.

"As the types of studies become more complex, it becomes harder to find patients who meet the exact criteria for enrolling," Zhang said. "The drugs today are so targeted. They may be directed to a particular group of patients of a single type of cancer. And, they may be used only within a narrow time window in the progress of treatment." For that reason, some

trials may not recruit any patients while others may enroll up to 100-plus.

Dr. Sleckman agreed that this can make it more difficult to recruit participants. "However, researchers are trying to overcome this by structuring the studies with an umbrella trial and then subsets."

COVID-19 has impacted recruitment, particularly last year, as patients were more cautious about participating. Studies also may face limitations on available hospital staff as the number of COVID-19 patients rises. Yet researchers remained determined to carry out their mission.

"Cancer is not taking a break for COVID-19," Dr. Sleckman said. "We are still diagnosing cancer and offering trials."

Zhang noted that researchers are placing high importance on diversity in recruiting patients. "We want to make sure we are representing the population in terms of race, ethnicity, age and gender."

Importance to Medicine

About clinical studies, Zhang said, "This is the way we advance our understanding of how to treat diseases and improve the overall health of the community. It is the underpinning of how we move medicine forward."

Dr. Sleckman added, "The only way to determine if a drug or treatment is safe and effective is to do trials. People are eager to participate in trials—to potentially not only help themselves, but also patients similar to them in the future."

"Cancer is a life-changing event," she continued. "It's a way that people feel they can make a difference. Patients on trials get excellent care, with an extra set of eyes watching over them."

Zhang concluded, "Thanks to our research participants for their selfless volunteerism and their service to humanity." -

Find quality educational opportunities for the young people in your family

As physicians, you value the importance of education. *St. Louis Metropolitan Medicine* is pleased to share this information about some of the leading private schools in our area. Be sure to check out the open house dates and websites for each school.

"Education is the most powerful weapon which you can use to change the world."

- Nelson Mandela

"Education's purpose is to replace an empty mind with an open one."

– Malcolm Forbes

"An investment in knowledge pays the best interest."

– Benjamin Franklin

Whitfield School



Whitfield cultivates ethical, confident, successful students in a community of innovation, collaboration and trust. Whitfield's rigorous college preparatory program for grades 6-12 is rooted in a formal character education curriculum called the Habits of Mind & Heart. Classrooms are dynamic, engaging, technology-forward spaces. The student-centered academic program encourages critical thinking and reflection, leadership development, and personal strength assessment. Whitfield's college counseling program inspires students to reach for their top choice schools in a low-stress way. The Class of 2021 was awarded scholarships totaling more than \$3.92 million for their first year of college.







175 S. Mason Road St. Louis, MO 63141

314-434-5141 www.whitfieldschool.org OPEN HOUSE -

Sunday, October 17, 2021, 1:00 - 4:00 p.m.

New City School



For over 50 years, New City School students have received an education that is challenging and joyful in equal measure. Students age 3 through 6th grade participate in a hands-on, experiential curriculum guided by the theory of Multiple Intelligences (MI). By connecting the concept of MI to knowledge of brain development, teachers at New City School provide students with challenging curricular opportunities that encourage learning and growth, allowing students to develop their individual strengths and grow into confident, joyful learners who are successful academically, are knowledgeable about themselves and others, value and appreciate diversity, and are prepared to lead in the classroom and beyond. New City is committed to strengthening and sustaining the socioeconomic diversity of the school community and offers a Variable Tuition program to support families at different income levels.



5209 Waterman Boulevard St. Louis, MO 63108

314-361-6411 www.newcityschool.org

OPEN HOUSE -

November 6, 2021 and January 13, 2022

Forsyth School



Forsyth School provides an unforgettable experience for children age 2 through grade 6. Located in the Wydown-Forsyth Historic District, Forsyth's one-of-a-kind campus is comprised of six historic homes; nearby walkable resources include Forest Park and Washington University. The challenging and engaging curriculum promotes age-appropriate independence and prepares students to thrive in secondary school and beyond.

Forsyth School fosters a spirit of curiosity and joy, empowering children to pursue challenges with confidence. At Forsyth, our talented and caring faculty encourage students to explore and question, enabling them to learn deeply. Each child's unique identity is known, celebrated, and nurtured by our supportive community. The results are profound: children take risks, pursue challenges, and find joy in learning. The "Forsyth experience" is enriched by the school's unique campus, location and commitment to the natural environment.



6235 Wydown Boulevard St. Louis, MO 63105

314-726-4542 ForsythSchool.org

EARLY CHILDHOOD OPEN HOUSE -

Saturday, January 8, 2022, 9:30 - 11:30 a.m.

Chaminade College Preparatory School



Chaminade College Preparatory School is a Day and Boarding school for young men, grades 6-12, in the Marianist tradition. The school's motto is ESTO VIR, "Be A Man." The Esto Vir journey is a path that includes spiritual, educational and social development. Everything at Chaminade is created from the perspective of how young men learn, build relationships, and see the world. Chaminade's mission is to build a student's inherent skills, gifts and talents while realizing their potential as men. Chaminade offers Academic Scholarships, need-based grants and endowed scholarships to assist in making a Chaminade education affordable for as many families as possible. Learn more at www.chaminade-stl.org.



425 South Lindbergh Boulevard St. Louis, MO 63131-2729

314-692-6650 www.chaminade-stl.org

OPEN HOUSE -

Sunday, November 7, 2021, 11:00 a.m. – 4:00 p.m.

Health Director Appointed



Dr. Matifadza Hlatshwayo Davis

Matifadza Hlatshwayo Davis, MD, MPH, has been appointed director of the Department of Health for the City of St. Louis. She is an infectious disease physician at the John Cochran Veterans Administration Medical Center, where she is the lead HIV clinician, graduate medical education coordinator and outpatient parenteral

antibiotic therapy supervisor. Dr. Hlatshwayo Davis has been an instructor and associate director of the fellowship program in the Division of Infectious Diseases at Washington University School of Medicine, and in faculty leadership with the Office of Inclusion and Diversity.

Dr. Hlatshwayo Davis received her medical degree from Cleveland Clinic and a master's in public health from Case Western Reserve University. She completed her internal medicine residency at University Hospitals Case Medical Center, followed by fellowships at Washington University.

She has been a member of the St. Louis Board of Health since 2020. Current acting director Dr. Fredrick Echols will continue with the department as health commissioner.

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16. Paid electronic copies: 0.17. This information is printed in the October/November 2021 issue. 18. I certify that all information furnished on this form is true and complete. David M. Nowak, Editor.

COVID-19 Public Health Orders Likely Saved Thousands of Lives, Analysis Finds

Emergency public health orders issued in the city of St. Louis and St. Louis County in March 2020 at the start of the COVID-19 pandemic likely saved thousands of lives in the region, according to new research led by Washington University School of Medicine.

Those public health orders, including restrictions on public gatherings, were intended to reduce interactions between people and slow the transmission of the novel respiratory virus. The analysis indicates that a delay of even two weeks in issuing local public health orders could have increased the number of deaths almost sevenfold in the city and county.

The researchers analyzed an epidemiological model to examine what was likely to have happened if the epidemic trajectory in St. Louis early in March had continued without the enactment of behavior-focused public health policies for another one, two and four weeks. The research was published Sept. 1 in JAMA Network Open.

The first known case of COVID-19 in St. Louis County was reported March 7, 2020. By March 13, the city and county had banned large gatherings. Four days later, they closed bars and restaurants, and the next day, March 18, they ordered all public schools to close their doors. On March 23, the city and county issued shelter-in-place orders. With these public health measures, area hospitals experienced a total of 2,246 COVID-19 hospitalizations and 482 deaths attributed to COVID-19 by June 15, 2020.

Had the orders been delayed two weeks, the researchers' modeling indicates that the city and county likely would have seen 3,292 deaths by June 15—a nearly sevenfold increase over what was actually recorded in the first three months of the pandemic. In the two-week delay scenario, the model predicts an increase in cumulative total hospitalizations by June 15 from the actual number of 2,246 to an estimated 19,600—a nearly ninefold increase.

The researchers also estimated how these delays might have played out if the general public had voluntarily changed its behavior. In the absence of public health orders, even if the public had changed its behavior enough to cut viral transmission by half—an optimistic scenario—a two-week delay still would have resulted in an estimated 8,090 hospitalizations and about 1.400 deaths.

To make the projections, researchers created an open-source computer program called Local Epidemic Modeling for Management & Action. Washington University researchers were joined by colleagues from the University of California-Berkeley, the University of California-San Francisco, Saint Louis University, BJC HealthCare and Mercy. Lead author for the study is Elvin H. Geng, MD, professor of medicine. -



For further information, gillian.waltman@gmail.com.

Richard Gimpelson, MD, Retires from Magazine Column

fter contributing a regular column to St. Louis Metropolitan Medicine for over 22 years, Richard J. Gimpelson, MD, is retiring his "Parting Shots" column. Dr. Gimpelson had retired from his minimally invasive gynecological surgery practice at the end of 2017.



With the column, he sought to raise topical issues related to medicine in an entertaining, provocative way, targeting insurance companies, hospitals, trial attorneys, the federal government and others. He began writing a column for

Dr. Richard J. Gimpelson St. Louis Metropolitan Medicine as Medical Society president in 1999; he continued writing after his term concluded.

The column originally was titled "SCAM-Q - How Insurance Companies, Hospitals, Government, etc. Slice Costs and Maintain Quality." A memorable 2006 column skewered the managed care company Centene under the title "A Centene Saved is a Centene Earned," a parody of Ben Franklin's famous "A penny saved is a penny earned." Many columns ended with poems, such as this 2006 verse: "Managed care in four lines: Double your pleasure, double your fun, combine two procedures, and get paid for one."

After the Affordable Care Act was passed in 2010, "Obamacare" became the object of many of Dr. Gimpelson's critiques. A 2016 column "I've Got Your Pay" had former President Barack Obama and Hillary Clinton singing ACA-related lyrics to the tune of the 1960s Sonny and Cher song "I've Got You Babe." In recent years, he has taken on topics ranging from the opioid crisis, to COVID-19 public health orders, to the proposed Equality Act. Some columns could skirt the fine line between being irreverent and offending some readers. Others, such as 2020 summary of the FDA approval process, were entirely serious.

Jennifer L. Page, MD, SLMMS 2021 president, thanked Dr. Gimpelson. "We appreciate Dr. Gimpelson contributing his writing to our magazine for so many years. He has brought his own unique style which has entertained and brought a fresh perspective. Writing over 150 columns on regular deadlines has been an immense commitment for which we are most grateful. We value his commitment to SLMMS and organized medicine."

Dr. Gimpelson said, "I feel rewarded for the Medical Society allowing me to participate in our fantastic journal. I consider this quite an achievement for someone with an undergraduate degree in electrical engineering and post-graduate MD, whose only language courses were freshman English composition and modern drama."

About his goals with the column, he added, "In my writings, I have always sought to provide education, information, challenge, humor or a combination of all of these."

A native of St. Louis, Dr. Gimpelson earned his undergraduate degree in engineering from Washington University and his medical degree from the University of Missouri-Columbia. He completed his internship and residency in ob-gyn at Mercy Hospital St. Louis.

He entered private practice in 1977 in gynecology and laparoscopic gynecological surgery. He later developed expertise in hysteroscopic surgery. Using his engineering training, he developed surgical instruments and obtained five U.S. patents. He has been an investigator or principal investigator in over 40 FDA trials of drugs and surgical

Besides serving as SLMMS president and as a member of the SLMMS Council, Dr. Gimpelson has been a member of the SLMMS Publications Committee for many years. -

"We appreciate Dr. Gimpelson contributing his writing to our magazine for so many years. He has brought his own unique style which has entertained and brought a fresh perspective."



Thank you for your investment in advocacy, education, networking and community service for medicine.

Rebecca L. Aft, MD

14435 Ladue Rd. 63017-2525 MD. Washington Univ., 1992 Born 1956, Missouri License 1997 - Active Certified: Surgery

Robert J. Hayashi, MD

1669 Beaucaire Dr. 63122-1451 MD, Washington Univ., 1986 Born 1959, Missouri License 1994 - Active Certified: Pediatric Hematology-Oncology

James H. Hinrichs, MD

12909 Walnutway Terrace 63146-6045 MD, Saint Louis Univ., 1975 Born 1949, Missouri License 1979 - Active Certified: Internal Medicine

Micah C. Hobbs, DO

675 Old Ballas Rd., Ste. 100 63141-7083 DO, Kansas City Col. of Osteopathic Medicine, 2005 Born 1978, Missouri License 2011 - Active Certified: Orthopedic Surgery

Glen E. Johnson, MD

675 Old Ballas Rd., Ste. 100 63141-7083 MD, West Virginia Univ., 1985 Born 1952, Missouri License 1988 - Active Certified: Orthopedic Surgery

George Mansour, MD

621 S. New Ballas Rd., Ste. 112A 63141-8252 MD, Tishreen University, 2010 Born 1986, Missouri License 2015 - Active Certified: Internal Medicine

Phineas P. Oren, MD

621 S. New Ballas Rd. 63141-8232 MD, Univ. of Pennsylvania, 1994 Born 1968, Missouri License 2008 - Active Certified: Pediatric Critical Care Medicine

WELCOME STUDENT MEMBERS

Saint Louis University School of Medicine

Zuhair Bargawi Patrick Connor Ankita Joshi Nathan D. Logan Loren C. Po Joseph M. Reznikov Megan Tersteeg Jennifer S. Villa

OBITUARIES

Jeffrey S. Pevnick, MD



Jeffrey S. Pevnick, MD, a psychiatrist, died August 15, 2021, at the age of 72.

Born in St. Louis, Dr. Pevnick received his undergraduate and medical degrees from the University of Missouri. He continued his training

at Upstate Medical Center (State University of New York Health Center) in Syracuse, N.Y., followed by a National Institutes of Health Fellowship in addiction research in Lexington, Ky. He returned to St. Louis to complete a residency in clinical pathology at Barnes Hospital and a psychiatric residency at the Missouri Institute of Psychiatry. Dr. Pevnick's subspecialty was in psychiatric pharmacology, and he published many papers and journal articles on that topic. He was a member of the American Psychiatric Association and a clinical assistant professor at Saint Louis University School of Medicine. He joined the St. Louis Metropolitan Medical Society in 1991.

SLMMS extends its condolences to his wife Barbara Pevnick; his sons Joshua Pevnick, Seth Pevnick, Ryan Pevnick and Justin Pevnick; and his five grandchildren.

G. Garry Robben, MD



George Garry Robben, MD, an internist, died September 7, 2021, at the age of 85.

Born in St. Louis, Dr. Robben earned both his undergraduate and medical degrees from Saint Louis University. He completed his internship

and internal medicine residency at Saint Louis University Hospital. He was a commissioned officer in the U.S. Navy, serving as a lieutenant commander and an internal medicine physician at the U.S. Naval Hospital in Jacksonville, Fla., for two years. Following his military service, he returned to St. Louis and maintained his medical practice for more than 35 years. Dr. Robben joined the St. Louis Metropolitan Medical Society in 1968.

SLMMS extends its condolences to his wife Leona Robben: his children Michael Robben, Margaret Smith, Stephen Robben, Peter Robben and Matthew Robben; his 13 grandchildren; and his six great grandchildren. -

