University of Missouri curators consider issuing bonds

by Brent Martin on September 24, 2010

in Briefs

University of Missouri curators are weighing their options as capital improvement needs pile up on the four-campus system.

The Board of Curators says it might consider using $300 million in bonds to take care of many long-delayed projects, especially in light of limited state budget help. A cash-strapped state budget has contributed little to capital improvement needs at any of its public college campuses. One aspect holding curators back is securing a funding source.
UM considers more building projects
New medical clinic is on list.

By JANEESE SILVEY
Friday, September 24, 2010

SPRINGFIELD — The University of Missouri System is considering taking on more debt to fund building projects on its four campuses to take advantage of historically low interest rates and the system's excellent bond rating.

Nikki Krawitz, vice president of finance, outlined some possible projects to the system's Board of Curators yesterday but said she's still working with campuses to finalize priorities.

Curators already have approved nearly $110 million in building projects, although the system still needs the board to actually issue that debt. Most of those projects are buildings that generate revenues, such as residential halls and health care clinics.

A list of $190 million worth of additional building projects includes a new Green Meadows Outpatient Care Center in Columbia. That clinic houses family medicine, pediatrics, psychiatric and radiology outpatient services, said MU Health Care spokeswoman Mary Jenkins. The building, which opened in 1985, is too small to adequately meet the clinic's needs, she said.

"MU Health Care is seeking approval to build a larger facility with a more efficient layout that would allow us to accommodate growing patient volumes and expand pharmacy and radiology services," Jenkins said in an e-mail.

Also on that list of future bond projects are academic buildings on the other three UM campuses — buildings that don't technically generate new revenue and could require the system to pay back the debt with general revenues.

Curators were skeptical of approving bonds to pay for capital improvements that don't generate new revenue streams.

"I'm not ready to support the list of extras," Curator Warren Erdman of Kansas City said. At the same time, he noted, some campuses are having to turn away students because they don't have capacity for them.

Missouri University of Science and Technology in Rolla is at capacity, for instance, forcing administrators there to turn away qualified students. If additional academic buildings allowed the campus to increase enrollment, that would produce new tuition revenues that could be used to pay back bonds, Krawitz said.

Technically, the state has a responsibility to fund academic buildings at its public universities, but efforts to do so have failed as the state deals with staggering revenue shortfalls. This coming fiscal year, state leaders anticipate having to plug as much as a $500 million budget hole.
Over the two previous tough budget years, the university has negotiated a deal with Gov. Jay Nixon to keep tuition frozen in exchange for minimal cuts in state funding. That's not going to be the case this coming school year, UM System President Gary Forsee said this morning.

"Without question, we will need to be coming to the board with a proposal to increase tuition, and the board should expect that to require asking for a waiver" from the Missouri Department of Higher Education to increase tuition by a rate higher than inflation, Forsee said.

A recent law requires public colleges to get approval from the Coordinating Board for Higher Education to increase tuition rates by more than the consumer price index, which has been about 1 percent to 2 percent in the past couple of years.

Also for the first time, undergraduate tuition at UM's four campuses might not be equal. Curators two years ago approved allowing different tuition rates at the four universities but have not yet implemented those differences because of the tuition freezes.

Reach Janese Silvey at 573-815-1705 or e-mail jsilvey@columbiatribune.com.
UMSL science complex renovation gets new hope

BY TIM BARKER • tbarker@post-dispatch.com > 314-340-8350 | Posted: Friday, September 24, 2010 12:00 am

SPRINGFIELD, MO. • There is new hope for the long-awaited renovation of the tired Benton-Stadler science complex at the University of Missouri-St. Louis.

On Thursday, the University of Missouri Board of Curators signaled it will consider issuing up to $300 million in bonds to pay for a shopping list of improvements across its four campuses. Among the projects under consideration is the $30 million refurbishment of UMSL's 40-year-old home to a variety of classrooms and science labs long tabbed for improvement.

The system is looking to take advantage of low interest rates to address a range of needs that have little hope of state support, given Missouri's ongoing budget crisis. Curators, who already have approved nearly $110 million in projects, are being asked to consider an expanded bond issue.

"The cost of capital is so low, it would be, perhaps, a mistake to miss the opportunity to finance them," said Nikki Krawitz, the system's vice president of finance.

Curators are not expected to make a decision until November during a special session. They have asked system officials for more information on each project — including a justification for the work and where the money for bond payments would come from. Several curators expressed concern about taking on new debt at a time when state contributions to higher education are expected to decline even more.

"I, for one, have reservations about anything that doesn't have a dedicated revenue stream," said Curator Doug Russell.

Therein lies the biggest obstacle for academic buildings like Benton Stadler. It's much easier to finance buildings that have a source of revenue — a new residence hall, for example, gets money from student rent, while a medical facility takes in money from patients.

Typically, classrooms and labs are paid for by state contributions. But no one expects the state to fund any capital improvements next year.
If the UM system does decide to pay for the Benton-Stadler and other academic buildings, "we're going to step up and fill the shoes of what would historically be a state responsibility," said Gary Forsee, system president.

Among the options on the table for Benton-Stadler's bond payments is a new student fee, though UMSL Chancellor Thomas George said it would happen only with the approval of students.

If that's the chosen route, George expressed optimism about student reaction.

"If it makes sense and it's for a good purpose, our students are very receptive," George said.

The science complex is, in some ways, symbolic of the troubles facing schools trying to make capital improvements. Three times in the last 15 years the project has been started, only to be derailed by financial crisis.

The most recent effort to rehab the complex ran aground when federal stimulus money was taken for other state needs.

Before that, the project was delayed when the cash-strapped Missouri Higher Education Loan Authority stopped contributing to a state fund earmarked for campus improvements. It is unclear when or if the authority will resume those payments.

Curators already have approved nearly $110 million in projects, primarily at the Columbia campus: $21.7 million for the Orthopedic Institute & Patient Care Tower, $30 million for the relocation of the Ellis Fischel Cancer Center, and $51.1 million for various energy management projects.

Among the other projects under consideration in an expanded bond issue:

• $10 million to $20 million for renovation of the Mark Twain residence hall at the University of Missouri-Columbia.

• $40.7 million for construction and renovation of a chemical engineering, chemistry, biological sciences and engineering building at the Missouri University of Science and Technology in Rolla. It would provide a new teaching and research facility for the chemical engineering department.

• $30 million for energy-related projects at Rolla, including a new and more efficient heating system.

• $18 million for renovation and additions at the General Services Building at UMSL. It would include 17,000 square feet of new space for the College of Fine Arts and Communications.

• $45 million for new classrooms and renovation of the Miller Nichols Library at the University of Missouri-Kansas City.
Details vague on proposed benefit switch
New UM hires may be affected.

By JANISE SILVEY
Friday, September 24, 2010

SPRINGFIELD — The University of Missouri Board of Curators faced the same problem faculty and staff have had when trying to learn more about a switch from the current retirement plan to a proposed new savings plan: There are no details of a proposed new savings plan to review.

For a year, system administrators have been eyeing the possibility of implementing a defined contributions plan for new hires and phasing out the defined benefits plan current employees and retirees get. Curators are expected to vote on a change in December, but they don't know yet what administrators will recommend.

Administrators say they don't know yet either but are in the process of hashing out a plan they will vet with faculty and staff in the coming weeks. Curators are expected to discuss details at a special Nov. 1 teleconference meeting.

Right now, employees are guaranteed retirement benefits that total 2.2 percent of their salary for every year of employment once they’re eligible to retire. That’s been a successful program, Vice President of Human Resources Betsy Rodriguez said, but the conditions that made it successful are starting to change.

For instance, turnover isn’t as high as it once was. That makes a difference because employees aren’t “vested” into the retirement system until they’ve been with the university for five years, meaning they don’t get the university’s contributions to their retirement if they leave before then. High turnover has helped financially support the benefits plan — but turnover has decreased in a down economy, Rodriguez said.

Instability in the state’s support of university operations also has strained the system’s budget.

Even if curators were to stick with the current defined benefits plan, employees could see a change over the long run, UM President Gary Forsee said. Right now, employees contribute an average of 1.3 percent into their retirement plan and the university picks up as much as 7 percent, but costs are expected to increase in the future. That would either require UM to contribute more or would require the system to eventually increase employee contributions.

Curators had plenty of questions, but there were few answers, with administrators promising to outline details in November. Curator Warren Erdman, who chairs the human resources committee, said the purpose of the discussion now is simply to get the questions on the table for administrators.

Some questioned how UM would fund defined benefits for current employees if new employees were paying into a different system. Rodriguez said as more employees are hired with a defined contributions plan, the amount of defined benefits payouts would reduce. So even if costs rise for the defined benefits plan, the payout would be based on a smaller percentage of the overall payroll.
Faculty and staff were supposed to be able to listen in to the discussion via an audio stream, but technical snags prevented that. An archived recording of the meeting is online at www.umsystem.edu.

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Forsee primes UM curators for tuition hikes

Friday, September 24, 2010 | 5:04 p.m. CDT
BY Josh Barone, Walker Moskop

SPRINGFIELD — A tuition increase for the University of Missouri System moved from rumor to inevitability as the president addressed the school’s governing board Friday.

“Without question we will have to come to the board to increase tuition,” UM System President Gary Forsee told the Board of Curators, adding the caveat that “we’re going to have to wait to see what the governor’s recommendation (for cuts to higher education) is going to be.”

Forsee said he expects higher education to receive a 10 percent reduction in funding from Jefferson City. That means the in-state tuition freeze agreement between Gov. Jay Nixon and the university likely will not continue into a third consecutive year.

“We’re planning as if we know that that number is in that 10 percent range,” Forsee said. “If it’s less than that, then we will have planned accordingly, and if it’s more than that, we will continue to have work to do.”

According to Missouri law, the UM System may not increase tuition beyond the state’s rate of inflation. Raising tuition beyond that rate would require a waiver application from the board that would be subject to approval by the Department of Higher Education.

The board will discuss the matter again in December and will set tuition for 2011-12 early next year.

Meanwhile, the system will look into the needs of each campus when determining tuition rates, Forsee said. He said campus and system leaders are currently working to develop cost-saving measures.

At the meeting, Curator David Wasinger asked Laura Confer, the student representative to the board, to seek out student opinions and concerns related to potential tuition increases. Forsee also called on campus leaders to take student interests into account.

“Missouri has continued to err on the side of students,” Forsee said. “I expect each chancellor, and therefore their student financial aid organizations and budget planning organizations, to be sure to hear their perspective.”
New projects and cost-cutting measures

Also during the meeting, the system asked for the board’s approval to borrow $190 million for several proposed projects, which total $250 million in value.

The board had already approved the borrowing of $110 million for four other projects.

Forsee said the system’s recent acceptance into the federal New Markets Tax Credit Program could provide up to a 30 percent discount for the funding of some of the projects, particularly nonacademic buildings.

Several curators expressed apprehension about proposals for buildings that don’t generate revenue, which Curator Doug Russell said account for $138 million of the projects.

Forsee said: “While we sized a potential $300 million bond issue, we haven’t figured out how can we find a (new) revenue stream as opposed to taking from existing revenue streams. If we can’t figure out how to do that, then we likely won’t be able to bring some of those projects forward.”

Despite budget crunches, university representatives and curators expressed the desire to expand facilities to accommodate greater enrollment.

MU Chancellor Brady Deaton said MU could move toward an enrollment of 35,000 students but stressed the university must be innovative with its space planning.

“Classroom space is becoming critical,” he said.

John Carney III, Missouri University of Science and Technology chancellor, echoed a concern of several curators and fellow chancellors.

“We have to maintain the quality of our facilities,” Carney said. “But we can’t do that without the finances.”

He said there was no doubt in his mind that Missouri S&T has to raise tuition.

Although Forsee acknowledged tuition hikes would be necessary, he said the system was looking for other ways to improve its financial standing.

For example, he said the four universities could save money by sharing services such as accounting and payroll.

Additionally, he said the high volume of financial transactions throughout the system results in high processing costs and could be streamlined to reduce expenses. He also suggested the UM System could better use its information technology capabilities.
“The question is: Do we have opportunities for cost improvement without cutting service?” Forsee said.
‘Pipeline’ fixes won’t come easy
Curators seek ways to help students prepare.

By JANESSE SILVEY
Saturday, September 25, 2010

SPRINGFIELD — Fewer than 20 percent of U.S. students are at or above grade level in science when they're seniors in high school. American students are ranked 15th out of 31 countries when it comes to reading — 19th in math. The Labor Department predicts that in a few years, there will be more than 2 million science and math-related jobs open while the number of American students earning degrees in those subjects is plummeting.

Fixing those problems is a “tall order,” said Jack Carney, chancellor of Missouri University of Science and Technology. “We have to do something about the sad state of affairs in our K-12 schools.”

The University of Missouri System is trying to get a handle on the problems plaguing the educational pipeline that, in a perfect world, would extend from preschool to post-graduate studies, UM System President Gary Forsee told about 80 education and state leaders Thursday.

The system hosted a luncheon before the Board of Curators meeting to discuss how to advance Missouri’s higher education priorities. Representatives from Springfield-area colleges and universities, as well as state lawmakers and community leaders, joined the panel discussion.

The UM System and its four campuses are involved in several initiatives aimed at combating obstacles standing between a student and a college degree, including working with high-paying employers to determine what skills students need to have to be ready to work after college.

The UM System plans to develop reports of workforce needs every other year aimed to guide decisions about curriculum development and where the university should be investing money.

The system also is moving ahead with efforts to implement a more user-friendly centralized electronic learning option for students, MU Chancellor Brady Deaton said. By providing online course options, Deaton said, campuses should be able to retain students and provide alternative learning options for non­traditional learners who don’t always have time to fit college in their schedules.

Steve Graham, vice president of academic affairs for the UM System, is working with a group of college academic officers to see where Missouri’s higher education network can better collaborate — a charge given by Gov. Jay Nixon to institutions last month. Nixon and other state leaders even suggested colleges rethink providing departments and units that graduate only a handful of students each year.

Graham said he and other chief academic officers are in the process of seeing where colleges and universities can share faculty and course offerings to make degree options more efficient. One example already in place is at Missouri State University, where faculty members from Missouri S&T help teach courses to earn civil and electrical engineering degrees on the Springfield campus.
Universities also are considering ways to add two years of general education courses on the tail end of two-year technical programs to allow more students to earn bachelor’s degrees, Graham said.

Springfield business and school leaders in the audience wanted to know what they could do to help. It’s easy, Forsee said, giving instructions he typically gives when visiting Missouri communities: Simply talk to grade school and middle school kids about career options to give them a motive to study hard. Provide internships and career days, UM-Kansas City Chancellor Leo Morton added.

“Our most successful students — who persist, complete on time and with less debt — tend to be those who come to us not only prepared,” Morton said in prepared statements, “but also knowing what they need and determined to get it.”

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Business Is Booming for Tornado Safaris

Dave Thier Contributor

(Sept. 26) -- The high plains of Oklahoma have never been a tourist destination. But what they lack in sweet sand beaches, bass fishing or mountaintop lodges, they make up for in something no place else in the world can offer in quite the same way: twisters.

Over the past decade, a growing number of companies have been taking groups of adventure-seeking tourists out to chase Tornado Alley's famous cyclones, offering a close-up view of some of the most powerful weather the world has to offer.

Gregg Potter runs his company, F5 Intercept Tours, out of Oklahoma City. He and his partner have been running tours since 1999, a few years after the 1996 movie "Twister" seeded the idea of high-stakes cyclone adventure in potential clients' minds. But in the beginning he didn't have many takers.

"I initially looked at it as a way to look at storms without spending any money on it. In the beginning it was more of a break-even thing," he told AOL News.

The United States is home to about two-thirds of the world's reported tornadoes -- about 1,200 a year. Many of those are in the area known as "Tornado Alley," covering a large section of the Midwestern plains from northern Texas to southern North Dakota. Warm air blowing in from the Gulf of Mexico gets trapped under cooler, dry air from the deserts of the West. When the pressure from those systems bursts, the results are explosive.

The worst tornado in U.S. history tore a swath of destruction 219 miles long across Missouri, Illinois and Indiana in 1925. It killed 695 people.

Since Potter started his business, the market for tornado safaris has only expanded. He takes his clients out from Oklahoma City in a Chevy suburban looking for danger zones, and he remembers when his SUV would be the only vehicle on a long dusty road. Now any given hot spot might have four or five vans giving chase. Shows like Discovery's "Storm Chasers" have raised the profile of these sorts of adventures, and these days Potter typically sells out his spring tour season by November -- and faces dozens of competitors from firms such as Extreme Tornado Tours.

According to a new study by the University of Missouri, recreational storm chasers fall into a predictable demographic for the expensive, lengthy safari they're signing up for: white.
middle aged, educated, single and relatively wealthy. Most are amateur meteorologists themselves -- more than a quarter of those surveyed owned their own storm-chasing equipment. While the majority are from North America, a surprising percentage travel internationally -- about 11 percent are from Australia and a third from Europe. Any airfare costs, as well as food and hotels, come on top of the $3,000 to $5,000 fee for the tours, the range found by the Missouri researchers.

In the end, as with any adventure, it's a gamble.

"In May 2009 we saw a vortex on every trip. Other times, it's empty," Potter said. "It's Mother Nature, you know. Could be a bonanza or could be nothing." For his customers, that uncertainty is part of the thrill.
MU professor leads group interested in human-animal interaction

Friday, September 24, 2010 | 2:49 p.m. CDT; updated 4:18 p.m. CDT, Friday, September 24, 2010
BY Caitlin Wherley

COLUMBIA — MU nursing professor Rebecca Johnson was appointed president of the International Association of Human-Animal Interaction Organizations at the group’s triennial conference in Stockholm, Sweden, in July.

The association, founded in 1990, brings together groups that have an interest in the link between animals and humans.

“As president, I hope to lead IAHAIO in the human-animal interaction field, help young scholars and advance research,” Johnson said.

Johnson is the Millsap Professor of Gerontological Nursing and Public Policy at MU’s Sinclair School of Nursing. She also is director of the Research Center for Human-Animal Interaction at MU’s College of Veterinary Medicine.

Johnson has studied the benefits of programs such as Walk a Hound, Lose a Pound, in Columbia. Community members walk shelter dogs at the Central Missouri Humane Society. That sort of activity, she said, gets people thinking more about exercise and, therefore, their physical activity increases.

Johnson also is leading a new study that has veterans training shelter dogs in Columbia and Springfield. The study will examine the side effects of post-traumatic stress disorder in the veterans and the increase in the adoptability of the dogs.

“Human-animal interaction is a rapidly growing field,” Johnson said. “Lots of research points to how important human-animal interaction is for the health of both humans and animals.”
COLUMBIA, Mo. (AP) — The University of Missouri is honoring the 20th anniversary of a federal law that broadened the legal rights of people with physical disabilities.

The "Celebrate Ability" campus event commemorates the 1990 passage of the Americans with Disabilities Act. The federal law expanded legal protections against workplace discrimination and required public buildings to offer handicap accessible services, among other changes.

Missouri's wheelchair basketball team will host a three-hour open house on Monday afternoon at the student recreation center. Missouri Supreme Court Justice Richard Teitelman, who is blind, will speak about disability rights Thursday night in Memorial Union.

Lectures and panel discussions are also scheduled throughout the week.
School’s ranking doesn’t hold up program
Deaton deflates U.S. News’ list.

By JANSE S. SILVEY
Saturday, September 25, 2010

SPRINGFIELD — The University of Missouri School of Law’s national ranking seemed to plummet in an April list from U.S. News & World Report, but the decline doesn’t look that significant if you pick the ranking apart, MU Chancellor Brady Deaton said.

Deaton spent the latter part of a UM Board of Curators meeting Thursday explaining why the law school dropped from 65th in 2009 to 93rd this year in the rankings. He assured curators that MU’s law school is, in fact, thriving.

U.S. News & World Report considered 12 criteria. In two areas — the school’s reputation among deans and professors across the country and the number of volumes in the law library — MU’s score remained unchanged from last year. MU actually improved in three areas: the acceptance rate, the percentage of graduates employed at graduation and the student-to-faculty ratio.

The law school’s score declined in several areas, including the assessment of the school among judges and lawyers across the nation. The decrease wasn’t significant: MU’s score fell from a 3.2 out of 5 to a 3.1, but it caused the rank in that category to fall from 47th place to 50th, Deaton said.

The median undergraduate grade point average also saw a slight dip in the rankings, as did the percentage of graduates who were employed nine months after graduation. MU’s expenditure per student on instruction, support services and financial aid also saw lower rankings in 2010.

Deaton said the law school has made several changes since the rankings came out in spring, including unfreezing three full-time faculty positions that had been vacant and adding two new positions, a career services coordinator and a public interest coordinator who will focus on public service opportunities and administer a $1 million fund to support student services.

There was talk in April of students transferring to another program in light of the ranking, but Deputy Provost Ken Dean told curators that’s not the case.

“Our students aren’t leaving or transferring or going anywhere else,” he said.

The school last month welcomed 150 new law degree-seeking students. Earlier this year, 19 of 20 MU graduates passed the bar exam, Deaton said.

Last month, the University of St. Thomas School of Law in Minnesota explored the scholarly impact of faculty at all American Bar Association-accredited law schools and ranked MU 55th out of the top 70. And that ranking, Deaton said, isn’t intended to sell magazines.

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Orthopedics deal unites former foes
Private-public partnership spells relief for both sides.

By JODIE JACKSON JR.
Published September 24, 2010 at 4:23 p.m.
Updated September 25, 2010 at 6:45 a.m.

A new partnership that will provide care and treatment for University of Missouri athletes was announced yesterday as part of a plan to develop a sports medicine fellowship program at the University of Missouri.

Leaders of the Columbia Orthopaedic Group and the University of Missouri Orthopaedic Institute said the agreement puts to rest animosity between the two groups, which resulted from Columbia Orthopaedic Group — a private clinic — being awarded a contract in 2007 to provide care for MU athletes.

The contract generated controversy within the MU School of Medicine and led to the departure of orthopedics chairman Jason Calhoun.

"Leadership is trying to craft win-win situations," said James Stannard, Missouri Orthopaedic Institute surgeon and chairman of the Department of Orthopedic Surgery at the MU School of Medicine. Stannard said the situation stemming from "the very public and unpleasant feud" in 2007 was a "lose-lose situation."

"I think the history is clearly part of it," Stannard said yesterday during a news conference in the Mizzou Athletics Training Complex. "The really big benefit is that the student-athletes win."

Pat Smith, an orthopedic surgeon with Columbia Orthopaedic Group and the longtime physician for the Tigers football team, will be director of the Division of Sports Medicine in the Department of Orthopaedic Surgery at the MU School of Medicine. He will continue to serve as the head team physician for MU athletics and Stannard will serve as associate head team doctor. Smith and Stannard will be co-directors of the fellowship program.

Smith credited Stannard with bringing "positive change" to MU's orthopedic department. "It took a change like that to make this happen," Smith said.

Stannard said he and Smith have worked for about eight months with Hal Williamson, vice chancellor of the University of Missouri Health System, to craft the fellowship program and collaborative agreement. Stannard said the talks were based on "our mutual desire to have a world-class fellowship for sports medicine."

A core group of sports medicine specialists from both physician groups will treat MU athletes. Smith and Stannard will assign a team physician to each of the MU athletic teams and a core group of sports medicine specialists from both physician groups will treat MU athletes.
Work will begin immediately to develop the sports medicine fellowship program with the goal of receiving approval from the American Board of Orthopaedic Surgery by the next summer and admitting the first fellow into the program by the summer of 2012, according to a university news release. A fellow is a licensed physician who has completed an orthopedic surgery residency program and is seeking additional advanced training in a specialty area.

“This partnership will place an increased emphasis on education and research in the field of sports medicine and improve the care for the athletes at MU,” Williamson said in the news release. “Combining the sports medicine expertise of COG and MOI physicians will enable us to develop a preeminent sports medicine fellowship program and provide comprehensive patient care for our athletes.”

Stannard listed the university’s athletic facilities, success of its Division I athletic programs and quality of student-athletes as reasons why the fellowship should be “very attractive” to orthopedic residents who want to pursue a career in sports medicine. Smith said there was not a similar fellowship available elsewhere.

Stannard said he and Smith are considered “national if not world experts” in their respective surgical disciplines. “I think when you’re bringing us together, you double the expertise,” he said.

Stannard said the agreement also provides stability for the sports medicine program.

“This is designed to be at least a decade agreement,” he said, noting there already is a degree of “collegiality and cooperation” among physicians. Stannard said the recent past was “a Hatfield-and-McCoy, line-drawn-in-the-sand” situation.

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Orthopaedic fellowship program to be developed for MU athletes

Friday, September 24, 2010 | 5:12 p.m. CDT
BY Amanda Doty

COLUMBIA — Columbia Orthopaedic Group and the University of Missouri Orthopaedic Institute announced Friday their plans to develop a sports medicine fellowship program that will treat MU athletes.

James Stannard of the University of Missouri Orthopaedic Institute and department chairman of orthopaedic surgery at the MU School of Medicine, and Patrick Smith of Columbia Orthopaedic Group will serve as co-directors of the fellowship program.

"I think we are going to get the best possible care for our student athletes," said Smith, who has been the head team physician for 19 years.

The goal is to have the program approved by the American Board of Orthopaedic Surgery by the summer of 2011 and admit the first fellow by the following summer.

A fellow is a licensed physician who has completed an orthopaedic surgery residency program and is interested in advanced training in a specialty area.
Living on the Edges

Even by American standards, Missourians are unhealthy. MU Health Care is embarking on a mission to change that through prevention.

By T.J. GREANEY
Sunday, September 26, 2010

MU MENTION ON P. 2

About a month ago, Brett Ervie of Marceline started to notice he didn’t feel quite right. He’d always been heavy, tipping the scales at about 330 pounds, but now he felt drained of energy.

He found that no matter how much water he drank, he couldn’t quench his thirst, and he was going to the bathroom far more frequently than he ever had before.

During a checkup, Ervie’s physician ran a test to measure his average blood sugar for the past three months. The results were off the charts. A normal blood sugar level should be around 100 mg; his was three times that. His doctor said his kidneys were being bombarded with glucose his body couldn’t break down.

Ervie was diagnosed with Type 2 diabetes. It seemed a lifetime of fast food and sedentary work had caught up and blindsided him.

Then the news got worse for the 39-year-old father of two. Ervie works as an engineer on the Norfolk Southern railroad in Moberly, and because he operates heavy machinery, his employer told him he’d have to take some time off. It could be two months or more before he is cleared to return to work. In the meantime, he’s making due with the $300 per week provided by sick-pay benefits.

"It's been really rough," he said.

But Ervie has heeded the wakeup call. By overhauling his diet, using insulin shots and exercising, he has brought his blood sugar back to a controllable level, ranging between 80 and 130 mg. He has also shed 30 pounds and is gunning to lose much more. He’s taking a class on diabetes self-management at University Hospital and has learned how to read food labels and track his daily carbohydrate intake gram by gram.

“My wife calls me the carb Nazi,” he said, laughing.

Soon, he'll be off the insulin shots and managing his blood sugar through oral medication and lifestyle changes alone. “That class has been more than an eye-opener,” he said. “It has been a lifesaver.”

Studies show there are tens of thousands of people just like Ervie across Missouri. They consider themselves healthy, but a lack of exercise and other unhealthy lifestyle choices mean they are ticking time bombs of chronic illness. Doctors say far too often it takes a visit to the emergency room to get
patients such as this to wake up, take notice and change their lives. By that time, they are often in the grips of a chronic illness.

Over the next five years, University of Missouri Health Care will try to figure out ways to get to these patients before their health problems become emergencies. They want to reach the smoker before he develops cancer. They want to get to the obese patient before she suffers kidney failure or develops diabetes. They want to reach the hypertensive patient before she has a heart attack. It’s an ambitious program that seeks to reverse troubling data showing that Missouri is in the bottom tier of states nationwide for most “wellness factors.”

Leaders aren’t sure how the plan will take shape, but they know one thing: If they can reach people like Ervie years before the nagging health problems become a blinking-red emergency, the result will be enormous in terms of lives and money saved.

In an interview in his office this week, Harold Williamson, vice chancellor for the MU health system, uncapped a pen and drew a steep bell curve on a piece of paper.

This, he said, represents the resources a health system spends combating an illness such as heart disease over the course of a patient’s life. The vast majority of the money and time are spent at the short time at the top of the curve, when the patient has acute symptoms.

“Most big academic health centers spend a lot of time here at the center,” he said pointing to the peak of the curve. “Not so much time out here on the edges.”

But research shows those edges are important. The upward slope of the curve represents the years of high blood pressure and weight problems that lead up to the day of a heart attack. The downward slope of the curve represents the months or years after the heart attack where “secondary and tertiary care” can ensure a patient doesn’t have a second attack.

The edges, though, are not the strong suits for most hospital systems.

“Right now, if people can stumble in past our perimeters, we’re pretty good at propping them up and sending them out again,” Williamson said. “But frankly, we mostly send them back out to the same environment they came in from. We’re good at acute care, “but we continue to solve acute problems where we’d like to solve them on some other basis.”

And Missourians have health problems in spades. According to the Centers for Disease Control and Prevention, Missouri ranks above the national average for rates of diabetes, adult smoking, adults with poor nutrition, low physical activity and obesity.

A 2009 report showed death rates in Missouri were appreciably above the national average for smoking illnesses, cancer, heart disease and stroke. If the U.S. were separated into tiers based on health, Missouri would be part of the third world.

“We knew Missouri had room for improvement, but we had hoped we were running with the pack,” Jerry Kennett, a cardiologist and board president of Primaris said at the time of the report. “It turns out, in many areas we are being left behind.”
To the extent possible, MU Health Care wants to turn these numbers around. As part of its five-year strategic plan, the health system, along with representatives of the University of Missouri Extension, will launch an initiative likely partnering with small, rural communities in Mid-Missouri. The focus will be on community-wide wellness programs, exercise, nutrition, disease screening — anything to focus on improving care on the edges of the curve.

"We're looking for a community with leadership — the mayor, the city council — that shares this vision," Williamson said.

MU Health Care CEO Jim Ross is equally committed to the plan and said he envisions a report card where the health system can be held accountable for progress made in its community partners. Williamson said system leaders including Ross and the three deans of the health sciences schools are meeting regularly to develop the plan. No budget has been set for the project, but it is a high enough priority that doctors who are passionate about this type of community outreach might be asked to spend 10 percent of their work hours on it.

The details are still "murky" and unformed, Williamson said, but he is excited that ideas are beginning to come his way from physicians and faculty members across a range of departments.

"This is not something that universities typically do," Williamson said. "This isn't something where we can go copy the University of Wisconsin and apply it to Missouri. This is all kind of new territory."

MU Health Care has no shortage of experts with big ideas.

PKevin Everett is a clinical psychologist who, for the past nine years at MU, has studied the types of interventions that work with smokers to help them quit.

He said Missouri, where 25 percent of adults smoke, is falling further and further behind in this category. The state has a woeful budget that only pays for some advertising and a tobacco cessation hot line, he said. Missouri also has the lowest taxes on cigarettes in the nation.

"We bear the brunt of not doing more," he said. "Missouri paid out $500 million in Medicaid dollars to address tobacco-related illness last year."

In addition to policy changes, Everett would like to see Missouri develop a network of trained professionals at hospitals and clinics who can conduct personal counseling sessions with people trying to quit. He imagines a system where nurses or therapists who complete the training could become eligible to receive nicotine patches or gum to hand out to smokers free of charge.

"I'd love to see us get systematic and have kind of a network," he said. "Whether it's through hospitals or other clinic networks across the state, it would be for someone who wants that face-to-face coach to help them through the quit process. Or even just a place to go for advice: 'Would the nicotine gum be good?' 'Would the patch be good?' or 'Do I need a medication like a Chantix?'"

Everett is also studying more targeted interventions such as helping husbands and boyfriends of pregnant women quit smoking when their child is born. He said this method has shown promise but requires diligent face-to-face follow-up.
Ten years ago, it would be virtually unheard of for a child in his or her early teens to be diagnosed with Type 2 diabetes. Now, University Hospital endocrinologist and pediatrician Michael Gardner sees it every day.

"It's no longer especially rare," he said. "Compared to all the other things that I see, that's what's filling up my clinics."

The consequences are enormous. On average, by the time a patient is diagnosed as diabetic, the underlying disease process causing cardiovascular and microvascular problems, eye disease and kidney disease has been building for 10 years.

Gardner and James Sowers, director of the Burns Cardiovascular and Diabetes Research Center, know all too well that 9.1 percent of the population in Missouri has been diagnosed with diabetes, and that figure is growing. They say the state is in for a shock coming down the line as these young patients grow older and develop some of the ailments that accompany diabetes and obesity.

"We're really set up for a major epidemic here," Sowers said. "So at a time when resources are dwindling and the pie is getting smaller, I think we as physicians have to become active and become activists."

Sowers said he wants to see physicians speak out more forcefully when elementary schools cut back on physical education, or lunch menus are created that are more and more laden with fatty, high-sodium foods. He also would like to see self-management classes such as the one Ervie is enrolled in made available for pre-diabetics. No such thing exists now. Much of this work and advocacy will take doctors out of their typical comfort areas and will mean traveling to smaller, more rural communities. But complacency is a luxury the medical profession can't afford, he believes.

"We need to be much more actively involved," Sowers said. "We need to get out and work with the schools and so forth and educate the community and set up really preventive programs."

Laura Schopp, director of the T.E. Atkins University of Missouri Wellness Program, spends her days thinking about how to get people to think and act healthier.

What makes that light bulb go off inside someone's head that gets him to change daily routines and make the effort to incorporate nutrition or exercise? Recently, Schopp and others started pilot programs based on a model known as "workplace self-management." The model, typically used for people suffering from chronic diseases, trains "laypeople" to act as group leaders and help others to set and keep goals and manage their health.

Groups meet once a week for 45 minutes. The session lasted six weeks. And Schopp said despite little oversight and no rules about what goals patients should set, the results were impressive.

"Each person defines a health goal for that week, and they check in the next week," she said. "What we found is regardless of the health goal someone chose. It might be drink more water; it might be stop biting my fingernails. It doesn't matter where they started. The people in the aggregate who were in the treatment groups ended up improving their nutrition and improving their exercise."

Even better, Schopp said, the gains in physical activity or nutrition were maintained six months later when researchers checked back in. She said reporting back to a group of peers seems to motivate people, as does setting achievable goals.
“It’s really teaching people how to get achievable goals and get success. Because once they have success, they’re more likely to continue,” Schopp said. “Usually, public health sets unachievable goals that they aren’t able to reach; they get discouraged and opt out. People use the analogy of, ‘How do you teach Shamu to jump through the Hula-Hoop six feet out of the water?’ Well, you start with the Hula-Hoop in the water and inch it up.”

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Campaign tries to increase testing for respiratory disease

BY CAROLINE DOHACK

Sunday, September 26, 2010

Despite its long name, chronic obstructive pulmonary disease, or COPD, is on the short list for deadliest diseases.

According to the American Lung Association, it's the No. 4 killer in the United States. In 2005, there were 126,005 COPD-related deaths, an 8 percent increase from the year 2000, according to the Centers for Disease Control and Prevention.

"It's more than breast cancer and diabetes combined," said Shawna Strickland, program director of respiratory therapy at the University of Missouri's School of Health Professions.

Some estimates put the number of COPD cases in the United States at 24 million. Of these, about half know they have it, Strickland said. To raise awareness for the disease, a public health initiative called DRIVE4COPD seeks to educate people about symptoms and encourage them to get screened.

COPD, which includes conditions such as emphysema and chronic bronchitis, is characterized by the deterioration of alveoli, small sacks that exist in grape-like clusters at the ends of the breathing tubes in our lungs. Alveoli are responsible for holding air in our lungs. Though small, these clusters create ample surface area for our capillaries to exchange oxygen for carbon dioxide in our blood.

Adults have between 300 million and 600 million alveoli. If a few are damaged, it's not a big deal. But when entire clusters start to deteriorate, there's less surface area for the capillaries to exchange gases, which creates a number of problems such as difficulty breathing and decreased blood flow, Strickland said.

There is no cure for COPD, and what's especially troublesome is symptoms progress so slowly that many people don't realize they have it, Strickland said.

Cigarette smoke — either direct or secondhand — accounts for 90 percent of COPD cases, Strickland said. Environmental factors such as working around toxic fumes can play a role, and a small percentage of COPD cases are characterized by a genetic predisposition that results in a deficiency in the protein alpha-1 antitrypsin.

Although some of these factors can be controlled, Strickland said, they affect people to varying degrees. For example, next-door neighbors might be exposed to the same air pollutants for years, but only one might develop COPD. In short, it's difficult to predict who will develop the disease.

Over time, a person can develop emphysema or chronic bronchitis, or both. Other breathing disorders, such as asthma, can further complicate the disease, Strickland said.

However, early detection makes it possible to slow COPD's progress and alleviate symptoms.
Screening is as simple as answering a few questions, including how often a person feels short of breath, whether he or she coughs up mucus or phlegm, whether activity has been limited because of breathing problems, how many cigarettes a person has smoked in his or her life and how old a person is.

Each response is given a score ranging from zero to two. A cumulative score of five or higher indicates a high risk, Strickland said. Those who score high enough to be considered at risk can then go to their doctors for further testing.

"Even though we can't cure this disease, we can certainly make that person's life so much better. The earlier we identify those folks, the better," Strickland said.

Treatments for COPD might include medication and lifestyle changes. Additionally, pulmonary rehabilitation programs teach patients new breathing techniques and help identify exercises that won't exacerbate the difficulty a patient experiences during workouts, Strickland said.

In cooperation with DRIVE4COPD, respiratory therapists around the country will host events to offer free screenings. In Columbia, there will be COPD screenings at health fairs and at the Roots 'N Blues 'N BBQ Festival, Strickland said. Additionally, people can be screened at the campaign's website, www.drive4COPD.com.

"We want to get this screening tool out there and have as many people" as possible "take this. If you are over the age of 35, you need to take this screener," Strickland said.

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Cancer unit gives kids a day for play
Tailgate offers families solace.

Johnathon Russom, 4, gets his face painted Saturday during the 10th annual Gold Ribbon Day event, an MU tailgate party for young cancer patients and their families. About 200 people attended the event, which was put on by the University of Missouri Children’s Hospital and the MU Athletics Department.

By KRIS HILGEDICK
Sunday, September 26, 2010

With her face painted like a tiger, 11-year-old Shelby Riggs fit right in with the thousands of fans tailgating before the start of yesterday’s University of Missouri football game.

You’d never guess Riggs is a cancer patient at University of Missouri Children’s Hospital. In fact, all the children who attended the 10th annual Gold Ribbon Day event — an MU tailgate party for young cancer patients and their families — looked like normal kids as they buzzed around with their siblings and friends.

“If you line them up with 10 other classmates, you can’t tell which one has cancer,” said Barbara Gruner, pediatric oncologist.
Because she missed last year's party, Riggs was especially excited to make it to this year's event. "I was really looking forward to it," she said.

"They're here to have fun and mingle with the families," said Debbie Huffington, a nurse who helped organize the event, which featured activities such as face painting, food and an appearance by T.J., the Children's Hospital mascot. The MU Athletic Department provided game tickets to participants.

Everyone wore gold shirts in honor of the children who are battling cancer, those who have lost the battle and survivors of the disease. Not all the children who attended the tailgate are in the middle of dealing with the disease; some are survivors. "It's a mixture of everybody," Huffington said. "And that's good because then other families can see there's an end to treatment."

In March 2009, doctors found a large tumor on Riggs' kidney and a spot on her lung.

"We knew something was wrong because I always went to the nurse at school and I never felt good," Riggs said.

She was glad to share the miseries of cancer with other kids at the tailgate. "They don't like it much," she said. "They're hoping they'll get through it, just like me."

Having cancer meant the young girl underwent morning chemotherapy treatments and then stayed at the hospital for days until her fever broke. "It was the worst thing I ever experienced," said her mother, Tracy Orton. "My advice to other parents is stay strong."

Gruner said the annual tailgate party is an opportunity for the staff to meet the families outside of the hospital. About 200 people attended yesterday's event, which was held in a parking lot south of Stankowski Field. "This is the best turnout we've had," Gruner said.

Four members of the children's cancer center staff devised the party a decade ago. "They decided for Children's Cancer Awareness Month, they wanted to do something fun ... what would be more fun than a tailgate party with the Tigers?" Gruner said.

Learning a child has cancer is the "worst possible" news a parent can hear, Gruner said. "It's devastating. It comes out of left field. And nothing prepares families for this," she said.

Cancer can strike at any age. Gruner has treated infants who are only a few hours old and young adults. "It can be really tough," she said. "But three-fourths of kids will achieve long-term remission, so you can say 'cure.' "

Gruner didn't downplay the misery of chemotherapy. "It is not free of side effects, but we are better at managing those side affects," she said. "But it can be pretty bad."

April Moreland's 9-year-old son, Justin, who has acute lymphoblastic leukemia, finished chemotherapy on Thursday. "He wasn't sick at all," Moreland said.

She tried to turn her son's clinic days into fun days with trips to Chuck E. Cheese and games of miniature golf. She's glad it's over for now, but she's worried about what the future holds.

"Don't take life for granted," she said. "Spend as much time as you can with them."

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