



FROM YOUR PRESIDENT

Ritsuko Komaki, MD, FACR

It was Sunday afternoon at the 101st meeting of the American Roentgen Ray Society (ARRS), and I was sitting at the AAWR booth across from the ARRS registration desk in the Seattle Convention Center. As usual, it was cloudy and drizzling, which was perfect for refreshing the tall pines and the yellow pansies. Many people were passing by, and some of them stopped to read the AAWR Mission Statement: "AAWR will provide a forum for issues unique to women in radiology, radiation oncology, and related professions: sponsor programs that promote opportunities for women; and facilitate communication among members and other professionals."

There would not be a more perfect time than now for us to use our Mission Statement to recruit new members. Our society needs hard-working women who recognize women's health issues as important components of the national health agenda. Without healthy hard-working women, our society and the world at large would be unable to produce future generations and care for them.

We should not be too near sighted. We do not live just for ourselves. Just think how much we can influence the younger generation by following in the steps of the great radiologists and teachers whom AAWR has previously honored and recognized.

One male radiologist stopped by the booth and asked me if I knew Dr. Lucy Frank Squire, the recipient of the first Marie Curie Award in 1986. I replied, "No, I never met her, but please tell me about her as we are in the process of organizing the celebration of the AAWR's 20th anniversary." His eyes brightened as he related that he became a diagnostic radiologist because

of Dr. Squire's influence. He was among the many medical students that Dr. Squire inspired when she taught anatomy correlated with roentgenograms with humor and enthusiasm. How wonderful to consider that those medical students she inspired to become radiologists may go on to influence and inspire more students! This is a chain reaction! One becomes a hundred, which in turn become thousands.

Another physician dropped by and said, "Oh, Dr. Komaki, you were my examiner at the American Board of Radiology oral exam last year. I'm sure you don't remember me, but I would like to introduce you to one of my fellows who would like to join the AAWR. She is currently completing a fellowship in Pathology and Diagnostic Radiology in the United States but is originally from Eastern Europe." I explained our International Membership category and directed this new member to the AAWR web site. She was very excited with the prospect of joining the AAWR and serving on the web site committee.

As the traffic slowed down, I read the most recent AAWR Focus. I was impressed with the article written by Dr. Ernest J. Ferris, "Why I am a Member of AAWR." I feel all department chairs and other leaders of our specialties should read it. This enlightened AAWR member recognizes that women have the potential of becoming great leaders as well as teachers. Women have special gifts as teachers, mentors and leaders when they persist with honesty and excellence. The rain finally stopped. I walked back to my hotel room and allowed my wonderful experience at the booth to feed my soul and blossom like the beautiful pansies outside.

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HEIDI BRIGITTE RUMSCHEIDT-PATRIQUIN, M.D.

By Diane S. Babcock, MD, Past President of the Society for Pediatric Radiology and long-time AAWR member

On November 25, 2000, Pediatric Radiology lost a special friend and colleague, an enthusiastic dedicated teacher, and a pioneer in Doppler ultrasound. Heidi Patriquin was born in Germany at the beginning of World War II, survived air raids as a child, and in 1946 immigrated with her family to Switzerland and later to Montreal, Canada where they settled in 1952. She completed her medical training at McGill University and chose Pediatric Radiology as her career on the inspiration of her teachers, Scott Dunbar and Bernadette Nogrady. According to Heidi, they “practiced radiology very differently from my other teachers; they saw the children and spoke to the parents (at a time when radiology was still a gray specialty in a dark room).” Heidi visited Dr. Neuhauser’s radiology department in Boston several times and studied Ultrasound there under Rita Teele. She subsequently studied pediatric ultrasound at *Hopital des Enfants Malades*, in Paris.

In 1985, Heidi became interested in Doppler sonography and pioneered its use for the study of pediatric disease. “It seemed almost miraculous to be able to study intra-abdominal hemodynamics with such non-invasive technology.” She studied liver disease in children being evaluated for possible transplantation because of cystic fibrosis, biliary atresia, tyrosinemia, and North American Indian cirrhosis. In collaboration with Michel Lafortune, she published the normal blood flow patterns of the splanchnic and portal circulations and the technique for their evaluation. She was interested in renal disease and described alterations of renal blood flow and recovery in the hemolytic uremic syndrome, as well as the rapid recovery

following renal vein thrombosis in infants. She applied the finding of pulsus tardus/parvus to the detection of renal artery stenosis in children. She received a research award from the Society of Uroradiology for her study of renal artery stenosis in an animal model.

Heidi became interested in the work of Judah Folkman, Peter Burns, and Peter Wells on tumor vascularity and applied it to the study of abdominal masses in children. She published articles on high velocity abnormal blood flow in the periphery of tumors and its decrease with successful chemotherapy. She also established a technique for detecting intra-testicular blood flow in babies and studied the neovascularity of affected bowel in children with Crohn’s disease. Her work in this area was recently published in *Radiology* (*Radiology* 2000 Dec; 217(3): 787-91).

Heidi was fluent in German, English and French and enjoyed international travel to lecture on pediatric radiology and Doppler ultrasound. She developed wide-ranging friendships with radiologists and clinicians on five continents. Her curriculum vitae lists over 130 presentations. In addition, she authored or co-authored more than 80 articles. Heidi was involved in a number of radiology societies including the Society of Pediatric Radiology (SPR) and the European Society of Pediatric Radiology (ESPR). She regularly participated in the annual meetings of both organizations, was an honorary member of the ESPR and served on the Board of Directors of the SPR. In 1998, she received the Pioneer Award for her work in

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WOMEN IN ACADEMIC MEDICINE: NEW INSIGHTS, SAME SAD NEWS

By Catherine D. DeAngelis, MD, MPH, Johns Hopkins University School of Medicine, Baltimore, MD 21205-2196

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In this issue of the Journal, Nonnemaker reports on a study of the likelihood that women will pursue full-time careers in academic medicine and the likelihood of their advancement to the senior ranks of medical school faculties.¹ She tracked cohorts of women based on their years of graduation from medical school between 1979 and 1993. The study is an important contribution because it is based on national data, rather than on information from single institutions, departments, or specialties, and because the results confirm what many women academicians already know from experience.

In the study, women, overall, were more likely than men to pursue careers in academic medicine. This was true for both tenure and nontenure tracks and for almost all the cohorts during the early 1990s but not during the later 1990s. The recent diminishing interest among women in pursuing academic careers invites some interesting speculations. In addition to the reasons posited by Nonnemaker, it is possible that during medical school and residency, some women became disheartened by the slow advancement of women faculty members. Also, the women entering medical schools in recent years may have goals that differ from those of women entering in earlier years. The larger proportion of women pursuing academic careers in the earlier years of the study may have felt compelled to prove that they were as good as or better than their male counterparts. In many training programs, the “best” trainees are especially encouraged to pursue academic careers. It

makes sense that there would be no substantial difference of women and men entering academic careers. The recent phenomenon may simply reflect the tendency in the recent cohorts of women to act more naturally, now that the population of women entering medical schools is larger and more diversified.

It will be interesting to see whether that proportion of women in medical school classes continues to increase while that of men continues to decrease. According to the Association of American Medical Colleges, in 1999, there were 38,529 medical school applicants—a 6.0 percent decrease overall from 1998; among those who were accepted, there were 8809 men (a 2.2 percent decrease) and 7412 women (a 3.5 percent increase).² The proportion of women among medical students has increased steadily, especially over the past decade; in 1999, 44 percent of first-year medical students were women.³

The increasing number and proportion of women entering medical school has led to increases in the number and proportion of women faculty members. Therefore, it is more important than ever to monitor their academic progress. Nonnemaker found that a significantly smaller proportion of women than men advanced from assistant to associate professor and from associate to full professor. This was true for all but two cohorts at the level of associate professor and for both tenure and nontenure tracks.¹

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The data for advancement to full professor are based on fewer cohorts because of the lag time for eligibility. However, women seemed to fare somewhat better at this level, with only three tenure-track cohorts and one nontenure-track cohort of women doing worse than men. The greatest disparity was in the tenure track.¹ It appears that once women achieve the level of associate professor, their chance for further advancement improves. This makes sense, since success tends to breed success, and women who have reached the rank of associate professor have had time in the system to prove their worth. It just seems to take more proof for women than for men.

What are we to do about the disparity in advancement between men and women? Nonnemaker emphasizes the importance of equal opportunity and the need for a greater balance of role models.¹ Although I certainly respect this opinion, I believe mentors are more important than role models, and I do not believe equal opportunity for women will ever be possible. I would settle for equity—that is, freedom from bias or favoritism.

Equal opportunity is not possible for women in academia because only women can bear children and because women have the primary (and often nearly total) responsibility for the care of children. In 1981, Angell discussed the effects of bearing and caring for children on academic careers.⁴ Not much, if anything, has changed since then—or since the first mother entered academic medicine. As I was writing this, I received a telephone call about a woman physician who is pursuing a PhD. in clinical investigation. After she had delivered her child, she was informed by the male director of the program that he believed it was in her “best interest” to stop at the master’s level. The encouraging part of the story is that the person who complained about this behavior was the male head of the department. With his intervention and the blessing of the dean’s office, the woman stayed on track for her doctorate.

Clearly, such interventions and allowances for time off or part-time work do help. However, women are then at a disadvantage in competing with faculty members who expend all their time and energy on their academic work and professional advancement.

Mentoring is also a very difficult problem to resolve, because mentors are generally senior faculty members, and relatively few senior faculty members are women. The fact that women are entering the lower faculty ranks in record numbers but women already in the system are not advancing at a reasonable rate further complicates the problem. Although women do not necessarily need women mentors, men have not yet come forward to the degree necessary to make much difference. Also, the approach to mentoring women can be different from that for mentoring men. For example, women often do better than men in collaborative ventures, but they must be taught how to protect themselves from being exploited.

It is important for women who are senior faculty members to establish mentoring programs for women by enlisting the assistance of the dean and department heads and formally reporting on progress. My colleagues and I did this at our institution, and the result has been a substantial increase in the number of women promoted to professor. In fact, in the 106-year history of Johns Hopkins University School of Medicine, over 60 percent of all promotions or appointments of women to the level of professor have occurred in the past decade.

Women who are senior faculty members need to work within their departments to encourage their male and female colleagues to act as mentors for promising young women who hold junior faculty appointments. Also helpful in promoting mentorship are seminars and small-group discussion in which topics such as negotiating for research time, space, and equipment and for research assistants and graduate students or postdoctoral fellows are addressed. In addition, the importance of a clear and concentrated academic focus can be emphasized in such groups. Too broad a focus often hinders women’s advancement. Women are accustomed to juggling many chores, and this habit can be carried over to the professional setting. Without a concentrated focus, it is difficult to establish a research topic that will generate grants and publications. Unless some major change occurs, publications and grants will continue to be the main criteria for promotion to professor. One reason having a mentor is so important is that the mentor has established an academic focus that can be shared. Generally, a young faculty member who wants to maintain a relationship with a mentor must continue to have an academic focus.

One acknowledged limitation of Nonnemaker’s study is that it excludes faculty members with PhD degrees. These faculty members are probably more likely to have an academic focus because of the nature of their training and because they do not have the additional responsibility of clinical care. In my institute, men and women faculty members with PhD’s advance sooner and at a higher rate than do those with MD’s, and I doubt this is the exception.

Mentors open doors. Introduction to others in the field who may be grant reviewers, future employers, or good advisors is essential to promotion. Breaking into the group doesn’t occur by accident. The “old-boy network” is merely one aspect of mentorship, and this network must be available to “old girls” as well.

Finally, more women in the senior ranks of faculties need to assume leadership positions. A critical mass of women department heads, deans, and vice chancellors would be nice, but if we wait for a critical mass, it may take at least another generation. In the interim, women (not one woman, but at least two or three) need to be appointed to membership on each promotion and search committee. They

can then influence the promotion process and the choice of leaders. Even if the committee ends up choosing a man, the women will have had an opportunity to emphasize the importance of the advancement of women faculty members.

In summary, there must be mentors for women faculty members, and they must be promoted at a rate that is equitable to the rate of men. Otherwise, we will waste half our genetic pool of intelligence, creativity, and critical insights and experience. Medicine simply cannot afford that loss.

Editor's note: Dr. De Angelis is now the editor of the *Journal of the American Medical Association*.

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2. AAMC report 1999;9(3):1.
3. Women in U.S. academic medicine statistics 1998-99. Washington, D.C.: Association of American Medical Colleges, 1999.
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— IMPORTANT INFORMATION FOR OUR MEMBERS —

Conference

The 11th Annual Conference; The Balance Conference for Women Physicians: Bridging Generations, Cultures, and Practices is sponsored by the University of Colorado School of Medicine, Office of Continuing Medical Education, Winter Park, Colorado. This conference provides a safe place for women physicians to explore attitudes toward healing, immerse ourselves in a learning process, and experience the particular strengths that women bring to medicine.

Conference objectives:

1. Making intergenerational connections that foster professional growth and development;
2. Identifying attitudes and emotions that affect the doctor-patient relationship and improve communication skills; and preventing burnout
3. Change practice behaviors and professional attitudes.

See web page for details. www.rfmr.com/womenphysicians; or contact 1-800-882-9153 or (303) 372-9050. Attendance is limited so register early!

Article

The May issue of *Academic Medicine* includes an article of special interest to our members: "Why Aren't There More Women Leaders in Academic Medicine? The View of Clinical Department Chairs," by Michael Yedidia, Ph.D. and Janet Bickel, M.A. An Abstract of the article can be viewed at www.academicmedicine.org/cgi/content/abstract/76/5/453

* * *

Attention Members

The American Association for Women Radiologists (AAWR) is making a special effort to obtain current email addresses for all its members. If you have not informed AAWR of your email address or if your email address has recently changed, please be sure to contact the society office:

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Thank you.

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AAWR MEMBER-IN-TRAINING AWARDS

The AAWR Research & Education Foundation is offering two Member-in-Training Awards to scientific paper or poster presenters at the RSNA meeting; one award is in Diagnostic Radiology and the other in Radiation Oncology. As a Resident or Fellow and a member-in-training of the AAWR, you are eligible to apply for these awards. The winners will be recognized at the annual AAWR business luncheon, and will receive a plaque as well as paid expenses up to \$1,500 to attend the RSNA Scientific Assembly and Annual Meeting to present their paper or poster and to attend the AAWR Annual Business Luncheon.

To apply for a Member-in-Training Award, submit a letter indicating whether you are applying for the Diagnostic Radiology or Radiation Oncology award and a copy of your abstract. If you want to expand on the merits of your abstract, you may do so. Your letter should be co-signed by your department chair, and attest that you primarily and substantially performed the research.

All applications must be received in the AAWR office by AUGUST 31. Winners will be notified in September.

AAWR

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ultrasonography. In 2000 the American Association for Women Radiologists posthumously honored her with its President's Award which her daughter, Lara, accepted on her behalf.

Heidi enjoyed life and was very active in other areas. She loved music and enjoyed playing the viola de gamba and sang in the choir of Christ Church Cathedral in Montreal. She was an accomplished athlete, jogged regularly near her home in Montreal, with colleagues at radiology meetings, and even entered an occasional marathon. She enjoyed rowing with a group of breast cancer survivors and participated in several competitions with her dragon boat friends.

She was a lover of family and friends and was very proud of her "best friends," her children Karin, an architect in New York, Lara, a radiology resident in Boston, and Martin, a writer in Toronto. She and her "soul-mate", Michel Lafortune, enjoyed collaborating on ultrasound projects together, and traveling the world delivering invited lectures in their areas of expertise.

Almost seven years ago, Heidi was diagnosed with advanced breast cancer. The prognosis was poor, but with her dedication and determination she pursued the latest

therapy, and survived many years longer than expected. During those years, she enjoyed special trips with her family, saw the birth of a grandson, Lukas, continued to care for patients, and traveled the world lecturing, giving her last presentation just ten days before her final illness.

In a letter intended for her friends and family she wrote: "If I have known excitement of medicine, it is for with your help, teachers, fellow radiologists and clinicians. Thank you. If I have known hope, it is because of your encouragement. This because you are faithful, friends, and family. Thank you."

Her unflagging optimism, energy, and resilience in dealing with her disease, set an example for all those who knew of her illness. Knowing her has been a true pleasure for those of us privileged to call her colleague and friend. The Research and Education Foundation of the Society for Pediatric Radiology established a grant in Heidi's name. Contributions in her memory should be sent to:

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C/O IMM
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Houston, TX 77027

KUDOS

and PLAUDITS

Sarah S. Donaldson, MD, newly elected member of the ACR Board of Chancellors, was awarded the Gold Medal of the American Society for Therapeutic Radiology and Oncology (ASTRO), the society's highest honor. Dr. Donaldson, an ASTRO past president, works in the Department of Radiation Oncology at Stanford Medical Center, Palo Alto, California.

On August 26, 1999, **Valerie L. Ward, MD**, received a seed grant from the Research and Education Foundation of the American Association for Women Radiologists. The title of the research project was "Definition of Normal Ultrasound and Magnetic Resonance Imaging (MRI) Characteristics of Fetal Sheep Development as a Standard for *in utero* Evaluation of Models of Congenital Abnormality." Dr. Ward worked in collaboration with Drs. Carol E. Barnewolt, Judy A. Estroff, Y. Lakshmanan, Hiep T. Nguyen, Diego Jaramillo, Alison Hayward, and Craig A. Peters, and Mrs. Patricia Dunning, RT. The work was presented on May 30, 2001, at the 4th International Pediatric Radiology Meeting, in Paris, France. At that meeting she and her co-investigators were awarded the John A. Kirkpatrick Young Investigator Award. Dr. Ward is currently in the process of producing a manuscript for publication of this work. She is grateful to AAWR for its support.

RESIDENT'S CORNER: ON MENTORING

Mentoring is...

- Role modeling
- Guidance in navigating a career path
- An atmosphere where one is able to work one-on-one with a mentor and discuss goals and how to attain them
- A place to be heard and a place to listen
- An active process, which requires your involvement

Mentoring is not...

- A therapy session
- A replacement for the resident's counselor or advisor
- A one-way directive process
- A quick fix to a resident's or junior staff's problems
- A burden on any of the participants

Possible discussion topics

- Options for jobs in radiology
- How to conduct research and how to publish in scientific journals
- Residency-related issues with emphasis on specific rotations or instructors
- Obstacles the mentor faced before achieving her current position
- How to obtain university positions
- How to further the comprehension and application of the information offered during training

Always...

- Maintain a professional relationship with your mentors even in an informal environment
- Be proactive and bring up issues of specific interest to you

CLASSIFIEDS

POSITIONS AVAILABLE

Winston-Salem, NC

Excellent opportunity for a BC/BE Radiologist in Winston-Salem. Winston-Salem offers a pleasant year-round climate, great shopping, great schools and universities, and is located approximately one hour from the mountains and two hours from the beach. State-of-the-art outpatient center has immediate need for a Radiologist proficient in all modalities except angio/interventional and neuro MRI. This position offers autonomy, excellent compensation package, Monday-Friday schedule with no nights, no weekends, no on-call. Interested applicants should mail a CV to: Nancy D. Coleman, 3295 River Exchange Parkway, Suite 430, Norcross, GA 30092, Fax to (770) 449-4293 or email to nancydcoleman@mindspring.com

**Columbia, SC**

Enjoy boating, skiing, swimming, fishing, and golfing in Columbia, SC, home of Lake Murray. The city is located approximately two hours from the mountains and seacoast. Immediate need for a BC/BE general Radiologist at a state-of-the-art outpatient imaging center. Modalities include MRI, CT, US, fluoroscopy, and mammography. This position offers autonomy, pleasant work environment, excellent compensation package, Monday-Friday schedule with no nights, no weekends, no on-call. Interested applicants should mail a CV to: Nancy D. Coleman, 3295 River Exchange Parkway, Suite 430, Norcross, GA 30092; Fax to (770) 449-4293 or email to nancydcoleman@mindspring.com

El Paso, TX

Immediate need for a BC/BE Musculoskeletal Radiologist at an outpatient imaging center in El Paso. This position offers autonomy, state-of-the-art equipment, pleasant work environment, excellent compensation package, Monday-Friday schedule with no nights, no weekends, no on-call. Situated on the border of two nations and three states, El Paso's location offers a unique array of activities and opportunities for residents. Attractions include year-round golf, art galleries, museums, amusement parks and casinos. Interested applicants should mail a CV to: Nancy D. Coleman, 3295 River Exchange Parkway, Suite 430, Norcross, GA 30092; Fax to (770) 449-4293 or email to nancydcoleman@mindspring.com

**Madison, WI**

The Department of Radiology at the University of Wisconsin Medical School, Madison is seeking an experienced Radiologist who is interested in pursuing an academic career. The ideal candidate would have a primary focus in abdominal imaging encompassing CT, MRI and ultrasound with additional skills in GI and GU radiology. Duties include medical student and resident teaching, radiology service, and clinical research. This is a full-time position at the University of Wisconsin at the rank of Assistant/Associate/Professor (open rank). Candidates must be board certified in diagnostic radiology. Send a current resume and cover letter explaining interest in the position to: Patrick Turski, MD, Professor and Chairman, Department of Radiology E3/311, Clinical Sciences Center, 600 Highland Avenue, Madison, WI 53792-3252. Unless confidentiality is requested in writing, information regarding the applicants must be released upon request. Finalists cannot be guaranteed confidentiality. An equal opportunity/affirmative action employer. Wisconsin caregiver law applies.

AAWR 2001 - Mark Your Calendars!

AAWR New Fellows Luncheon during ACR Meeting
Tuesday, September 11, 2001
San Francisco Hilton & Towers, San Francisco, CA

AAWR Luncheon during ASTRO Meeting
Sunday, November 4, 2001
Moscone Convention Center, San Francisco, CA

AAWR Business Luncheon during RSNA Meeting
Monday, November 26, 2001
McCormick Place, Chicago, IL

AAWR Sponsored Refresher Course during RSNA Meeting
Tuesday, November 27, 2001
McCormick Place, Chicago, IL

AAWR Residents' Luncheon during RSNA Meeting
Wednesday, November 28, 2001
McCormick Place, Chicago, IL

AAWR President's Luncheon during RSNA Meeting
Thursday, November 29, 2001
McCormick Place, Chicago, IL

Invitations to luncheon events will be mailed, and you can visit our website: www.aawr.org for more information closer to the event.



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Articles for consideration for publication in the *Focus* can
be submitted to the address above.

Focus is published four times a year by the American Association for
Women Radiologists (AAWR) for its members.

Editor

Melissa L. Rosado de Christenson, Col, USAF, MC, FACR
I invite members to share their ideas and expertise by submitting articles
for future publication in the *Focus*.

Editorial Deadlines

September 1, 2001
December 1, 2001
February 1, 2002
June 1, 2002