President’s Message

Fred P. Sanfilippo

I’m honored and pleased to begin my service as President of the American Society for Investigative Pathology for the year 2002-2003. I look forward to a year of further advances and expansion of the ASIP as we take advantage of the tremendous research opportunities in the science and practice of pathology.

First, where are we now? From my perspective, ASIP is doing very well, in terms of new trainees, new members, meeting attendance, success of our Journals and financial stability.

Second, where are we going?

ASIP truly represents the essence of a professional society focused on basic biomedical research and discovery. As such, it is incumbent upon us to take a broad view of our role in medicine and science, and constantly assess our connections with the clinical and educational aspects of research as well as our relationships with other societies.

Pathology is a discipline that bridges basic biomedical science and clinical practice, which makes the proximity of its basic research and clinical applications closer than in any other discipline. I believe that the expanding reciprocal models of translation between research and clinical care are bringing these two areas into an even stronger dynamic and synergistic relationship. Moreover, as the laboratory-based practice of anatomic and clinical pathology becomes more quantitative, its link to basic science will become even more important to the discipline.

This year we will begin implementing many of the ideas that have grown from the work of the Long-Range Planning Committee, which has been, in a sense, to reinvent ASIP. We’ll broaden our scope in terms of investigative pathology to include not only basic mechanistic, hypothesis-driven research, but also more translational and clinical investigation; research that tends to be driven by technology and data. This does not mean we will be moving away from our recent past or current emphases, but rather that we will be adding a new and critical dimension to the Society that actually will take us closer to our more distant past.

Within this context, the goal is to move ASIP closer to, not farther away from the translational and clinical research of pathology. One way we’ll see this manifested will be in increased partnerships and interactions with professional societies.
(Continued from page 1)

**President’s Message continued**

ties involved in these broader areas of investigative pathology. Over time, other manifestations will be evident in the breadth and depth of our membership, our meetings, and our publications.

As we continue to place the ASIP at the leading edge of biomedical science and clinical application, I believe our broader scope will create new opportunities, new members, and greater impact for the Society. Your ongoing input, as members of the Society, will be key in

**From the Executive Officer’s Desk**  

*Mark E. Sobel*

**Membership.** I am pleased to report that membership in ASIP is increasing for the first time in many years, in large part due to our efforts to improve the visibility of ASIP in the biomedical research community. Greater numbers of members increases the impact of ASIP’s voice in public affairs. I urge you to use the “Colleague to Colleague” membership packets that you recently received in the mail. Those packets include information about ASIP membership benefits, which have increased significantly in recent years. Included in your membership (with the exception of a few members who joined ASIP before 1975) are automatic subscriptions for *The American Journal of Pathology* (*AJP*) and *The Journal of Molecular Diagnostics* (*JMD*). For the last two years, corresponding authors of accepted manuscripts in *AJP* and *JMD* who are ASIP members have received rebates for color page charges. In addition, both journals are available on-line. When renewing your membership, please note that since ASIP recently changed its fiscal year, we are currently invoicing for an 18-month period of time. You have a choice of changing your subscription preference from the print and on-line versions of *AJP* to an on-line-only subscription to *AJP* for a savings of $20 annually ($30 for the 18-month period in the current billing cycle). The on-line-only subscription to *AJP* offers a substantial savings to our non-domestic United States members, who can avoid the high cost of international mailing.

**Abstracts for EB2003.** Tara Zeitner, ASIP’s Director of Meetings and Membership Services, has been busy at work preparing for next year’s Annual Meeting in San Diego. All ASIP members should have received the Call for Abstracts in September. If you have not received it, please contact Tara at tzeitner@asip.org or at 301-634-7950 immediately. Although the official deadline for on-line submission of abstracts is November 13, we urge you to submit your abstract by October 31. Over 13,000 abstracts are expected to be submitted by attendees to EB2003 from the various participating societies (including AAA, ASBMB, APS, ASNS, ASPET and guest societies such as the Histochemical Society and NAVBO). Experience tells us that half of those abstracts will be submitted in the last two days before the deadline, which can make the submission process very slow and frustrating. Tara can answer your questions and give you advice about submitting an abstract, however she will be out of the office attending another meeting from November 1-14. In Tara’s absence, I will be available to help you, however I will be out of the office on the critical last two days before the deadline at the annual meeting of the Association for Molecular Pathology (ASIP’s partner in publishing *JMD*). Last year, ASIP programmed double the number of abstracts compared to 2001, and we are expecting another banner year of submissions due to increased topic categories and the outstanding programming provided by the ASIP Program Committee.

**Elections and Nominations.** Included in this issue of the *ASIP Bulletin* are solicitations for nominations for the next election cycle. Please nominate yourself or other worthy individuals for positions on ASIP’s Nominating Committee, Meritorious Awards Committee, and ASIP Council. Please see page 14 that outlines the current membership of ASIP’s Council and the Nominating and Meritorious Awards Committee.

**Awards.** The awardees for the 2003 Meritorious Awards have been announced. Congratulations to:

- David Korn  
  Gold-Headed Cane Award

- Janardan Reddy  
  Rous Whipple Award

- David Hajjar  
  Chugai Award

- Charles Clevenger  
  Pfizer Outstanding Investigator Award

Drs. Reddy, Hajjar and Clevenger will be presenting lectures at EB2003 in San Diego. All the recipients, along with the Experimental Pathologist-in-Training, Merit and Trainee Travel Awardees, will be honored at the ASIP Awards Reception on Monday April 14, 2003.

(Continued on page 11)
Past President’s Adieu

It has been an honor to serve as ASIP President. I had the pleasure of working with a dedicated new Executive Officer, Mark Sobel and his efficient and productive team. There are many new features in the office to better serve the membership and improve communications, data management and budgeting. The staff has worked hard despite national and personal adversities to focus on the task at hand, to help each other out and to make this Society an outstanding representative of Experimental Pathology. Tara Zeitner, Director of Meetings and Membership Services, has shown efficient organizational skills in advertising the meeting sessions well in advance, in keeping the program committee, the chairs, and the speakers on track, and communicating effectively to schedule our numerous scientific, educational, award and social sessions. James Douglas has joined the group as Director of Finance and Alta Wallington as Marketing Manager. The efforts of both of these talented individuals are already showing results. Bernadette Englert is the Managing Editor of our informative newsletter, The ASIP Bulletin. The American Journal of Pathology is flourishing under Editor-in-Chief, James Madara and Managing Editor, Priscilla Markwood and the fine work of the Associate Editors and the Editorial Board is much appreciated.

The Society is only as strong as its dedicated executive, councilors, committee chairs, and committee members. I have been very fortunate to work with an exceptional group of individuals who, although busy at their own home institutions, work very hard to enhance the academic mission of pathology. Because of these individuals, we have a strong vibrant society that provides an excellent infrastructure for experimental pathology and for pathology education in its broadest sense. We have become an effective advocate for pathology in the United States and internationally. William Muller did an outstanding job as Program Committee Chair. Our new Program Committee Chair Bill Coleman has EB 2003 well planned and already well advertised. We have high quality scientific sessions, meetings within meetings (the "Muller Conferences"), a variety of program formats and more abstracts than we have had in the past. Nancy Thompson is successfully guiding the affairs of the important Committee for Career Development, Women and Minorities and Sue Heffelfinger is the new Chair of our Publications Committee. If one reads our Bulletin, we see over 65 individuals serving on our key committees. A truly outstanding achievement by our grass roots membership.

Dick Lynch, a former President, has just completed his fifth and last year on the FASEB Board and we will miss his wise counsel. He will continue as Editor of The ASIP Bulletin, and help out in a variety of other ways.

You will hear that our regular membership has stabilized this year following four successive years of significant declines. Our trainee membership has increased by 50 trainees compared to a decline of 47 last year. This augers well for our future and may in fact be due to our increased emphasis on programming initiatives targeting trainees, including graduate students, MDs/PhDs, postdoctoral students, travel awards and the Chugai Symposium for young investigators.

At EB 2002, the number of abstracts submitted by ASIP members rose by 33% compared to the previous year. The total number of abstracts programmed by ASIP increased by 50% over last year. We attribute this to the early advertising of an excellent program and two focused "meetings within a meeting" - vascular biology and inflammation and cancer biology. We are pleased that next year the vascular biologists of NAVBO, guest society of ASIP, will hold their annual meeting at EB 2003.

ASIP has spent the year identifying and benefiting from the emerging opportunities presenting themselves in pathology. We are a society of academic biomedical clinicians and scientists. ASIP provides platforms to support, showcase and reward the finest in academic pathology and laboratory medicine in its broadest form - the creation and transmission of new knowledge in the investigation of mechanisms of disease and the utilization of this knowledge to improve clinical care. There are numerous opportunities that we recognize today. The Long-Range Planning Committee is developing strategies to capture emerging areas of academic pathology and to broaden the educational objectives of ASIP. ASIP is indeed an excellent venue to discuss the current issues and to identify and seize opportunities that are applicable to our local needs and to the needs of the national and international community of academic pathologists. Become active in ASIP and be part of the solution as we plan the exciting future of pathology and laboratory medicine.

I will close with this thought. Morris Karnovsky, our 2002 Chugai Awardee, related the story that when someone asked Lord Florey why become a pathologist, he replied "for the glory".

Avrum I. Gotlieb

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Alchemy of Career Success:
Turning various elements into gold

If you attended the Mentoring Luncheon held in New Orleans at the annual meeting you know the talk by keynote speaker Dr. Vivian Pinn who directs the NIH Office of Research on Women's Health (ORWH), was outstanding. Dr. Pinn presented a well-documented overview of the status of recruitment, retention, reentry and advancement of women in biomedical careers and health care professions with highlights from her Office's report on "Women in Biomedical Careers: Dynamics of Change". Dr. Pinn also discussed a variety of Career Development programs sponsored by ORWH that currently focus on Interdisciplinary Research and Development, Mentoring, Reentry and Bridging and Collaboration with Professional Societies. Because there was so much audience interest in the information and because we could not accommodate all those interested in attending the luncheon (it was totally subscribed well in advance of the meeting!), Dr. Pinn generously agreed to share her Powerpoint presentation from the luncheon with our members. This is too large to email in its present form. The CDWM Committee is working with ASIP Marketing Director, Alta Wallington, to create a resource center on the ASIP website where such information can be posted along with links to relevant web sites. Meanwhile, please refer to www4.od.nih.gov/orwh for information on programs and publications from ORWH.

Next year's Mentoring Luncheon at EB 2003, entitled "Dancing with Journals: A Guide to Submission and Review," is co-sponsored by The Histochemical Society and American Association of Anatomists and will be chaired by CDWM Committee Member and ASIP Councilor, Elizabeth Unger. A panel of Editors will provide information and address audience questions on many publication issues that can enhance your success. Sign up early to insure your place. For registration information contact Tara Zeitner, ASIP Meetings Manager, at 301-634-7950 or tzeitner@asip.org.

Graduate Program Directors take note: Good news about Trainee Awards. The ASIP Council has approved an increase to $500 each in the ASIP Trainee Travel Awards. To be eligible, applicants must be trainee members in good standing and submit an abstract for the annual meeting. More good news: the ASIP Council has approved an initiative for dedicated Minority Trainee Travel Awards (also $500 each) for underrepresented US Minority applicants and students/postdoctoral fellows at minority-serving institutions who are ASIP trainee members. We hope this will increase our Society's diversity and encourage more abstract submissions from qualifying individuals. For further information regarding these awards contact Tara Zeitner.

Speaking of Graduate Program Directors in Pathology/Pathobiology... John Kemp and Bob Bowser led a group networking and discussion session at the annual meeting that represented such programs across the country and Canada. There was strong interest in developing a focus group that will meet regularly to develop joint resources. These activities will be under the auspices of a newly recreated ASIP Education Committee chaired by Linda McManus. The group is planning on getting together in San Diego April 11 for a planning retreat a day in advance of the meeting. Look for further information from the Education Committee as these plans materialize. John Kemp is also active in ongoing FASEB joint-society initiatives in graduate training in biomedical sciences. The Education, CDWM and Program Committees will all work to coordinate and publicize these arrangements.

Nancy Thompson represented ASIP at the July 8-9 meeting of “Achieving Xxcellence: The Role of Professional Societies in Advancing Women's Careers in Science and Clinical Research” held at the National Academy of Sciences in Washington, D.C. The goal of this workshop is to develop strategies to enhance the participation of women scientists in the clinical workforce. Nancy will share a summary of ideas and information arising from this meeting in a future Newsletter.

What's your opinion? What topics would you like to see in future CDWM workshops, panel discussions and mentoring luncheons? Please email suggestions to Nancy_Thompson@brown.edu.
Mentoring Luncheon Registration Form
Education Committee

The ASIP Council is unanimous in support of the development and implementation of new educational activities by our organization. And, the newly reactivated Education Committee has already received suggestions for consideration. Among these, we should contemplate advancing:

- formal courses (e.g., proteomics in pathology, genetics of disease, tissue analysis in molecular pathology)
- on-line courses for CME credit (including CME credit related to our journals)
- Graduate Program Directors in Pathology to address issues related to interdisciplinary graduate education
- novel teaching methodologies or collaborative ventures facilitated by technological advances
- links between academic and other institutions
- pre- and postdoctoral trainees in investigative pathology
- electronic/print resources for medical and/or graduate students to learn about careers in pathology
- updates in pathology / recent research advances
- grantsmanship and funding resources

There is much to be done to facilitate the educational missions of our research discipline. And, these missions clearly overlap with other on-going ASIP activities in career development (CDWM Committee), scientific presentation (Program Committee) and public affairs. Your ideas and participation in these efforts are solicited and will be welcomed.

Program Committee

In April 2003, the Annual Meeting of the American Society for Investigative Pathology will be held in conjunction with Experimental Biology 2003 in San Diego, CA. The ASIP Program Committee has worked diligently to assemble the ASIP program for EB2003, which will feature current topics in disease pathogenesis, including both mechanistic and translational aspects of pathology research. Many of the programmatic themes and topics for EB2003 were developed from ideas put forth by the membership of the ASIP. In addition, the ASIP Program Committee has and will continue to work in coordination with the Program Committee of NAVBO (a guest society) to develop excellent programming on topics related to cardiovascular biology and pathology.

The ASIP program includes several major symposia, workshops, educational sessions, award lectures, and other special sessions, that feature nationally and internationally recognized investigators and speakers. Scientific session topics include lung injury and repair, liver cancer, cell cycle, cell adhesion, cell signaling, environmental toxicology, and multi-lineage stem cells. The educational sessions cover basic aspects of pathobiology (inflammation, cell injury, cell death, neoplasia, growth and development) in a format designed for students and new investigators, but provides useful information to established investigators as well.

Various aspects of professional growth and advancement will be discussed in career development workshops that specifically address the needs of MD/PhD, PhD, and other trainees.

Additional sessions will be programmed from abstract submissions to the ASIP topic categories. These categories cover a wide variety of topics related to pathogenesis research. Special initiatives for abstract-driven sessions at EB2003 will include neuropathology, immunopathology, and subjects related to translational research and molecular pathology.

Overall, the ASIP Program Committee has assembled a strong scientific and educational program for EB2003. We anticipate that our program will continue to develop and strengthen as we incorporate minisymposia, poster, and poster discussion sessions from submitted abstracts. We look forward to receiving your abstract submissions.
Minority Travel Award Form
Forms for Nominating Committee
Call for Nominations—Council, etc.
Milestones . . .

in Investigative Pathology

A. R. Rich
On the Frequency of Occurrence of Occult Carcinoma of the Prostate

R.A. Moore
Morphology of Small Prostatic Carcinoma

These two autopsy-based studies identified a surprisingly high incidence of latent prostatic cancer in elderly men. At the time these findings were published, they did not generate much excitement in the medical community, possibly because it was well known that pathologists always observed higher incidences of cancers than the clinical physicians. Many decades after their appearance as back-to-back articles in the Journal of Urology, these studies have taken on an enormous importance. It is unlikely that Arnold Rich, the famous Johns Hopkins' pathologist, or Robert Moore, the eminent Cornell pathologist, ever imagined the extraordinary clinical and public health importance their findings would assume a half of a century later.

Rich became interested in latent prostatic cancer from his experience on the Hopkins' autopsy service where he came to believe that clinically unsuspected prostate cancer was not uncommon, although in searching the literature, he was unable to find any publications that addressed this issue. Moore had spent time in Vienna where he had been encouraged to investigate latent prostate cancer by the famous Austrian pathologist Erdheim. Rich's study consisted of examining a single routine histological section of the prostate gland from 292 consecutive autopsies performed on men 50 years of age or older. He found a 9% incidence of latent cancer, but assumed this was a minimum estimate because only a single random slide of each gland was available for study. Moore examined multiple step sections of 229 prostate glands removed at autopsy from patients over age 50 and found microscopic carcinoma in 20.5% of them. Both studies found that the incidence of clinically unsuspected prostate cancer increased with age and approximately doubled with each additional decade of life.

The articles by Rich (1) and Moore (2) are milestones because they were the first to identify a fundamental characteristic of prostate cancer that is highly relevant to the field of prostate cancer today. The astonishingly high incidence of latent prostate cancer has implications for research aimed at understanding the basic biology of human prostate cancer as well as for clinical investigations that address therapeutic decisions in response to the finding of an elevated serum PSA. Later studies by other investigators indicate that latent prostate cancer may have an incidence as high as 70 to 80% in men in their 80s and 90s. These extraordinary rates of latent cancer contrast with the 6 to 8% lifetime risk that individual men have of developing clinically diagnosed prostate cancer. This striking discrepancy indicates that about 90% of latent prostatic cancers remain clinically silent for decades. This conclusion is also supported by the findings of Bauer et al (3) that when latent cancer was discovered in a suprapubic prostatectomy specimen and the patients were not treated for the cancer, their survival times were not different from the normal life span for aged-matched males, if the latent cancers were well differentiated. In another study by Greene et al (4), when latent cancers were found in TUR specimens, the 5- and 10-year survival times for patients not treated for the cancer were 95% and 85%, respectively, of normal life expectancy for their age group. While the overall prevalence of latent prostate cancer at autopsy does not differ between blacks and whites in the United States, there is at least a two-fold higher incidence of progression to overt clinical cancer in black men (5).

The findings of Rich (1) and Moore (2) have direct implications for the dilemma that can be created for the patient and for the clinician when a microscopic focus of prostatic cancer is seen in a biopsy performed to evaluate an elevated serum PSA level. "Is this one of the nine latent cancers that will remain silent for many decades, or is this the one in ten that will become clinically significant?" "Since we can not be sure, should we treat all of them as if they are the one in ten?" These decisions are being influenced today by information that continues to come from the lineage of investigations that trace their origins to the findings of Rich (1) and Moore (2). These studies have shown that prostate cancer, even when locally invasive of the perineural spaces in the prostate gland, can exist for decades as a latent process that is clinically inconsequential. These studies have also shown that the degree of differentiation of the latent cancer is a reliable predictor of its subsequent clinical behavior. Latent cancer of the prostate has an enormous
public health and economic significance. About a decade ago when PSA was being recommended as an annual screening test for all males in the United States over the age of 50, the Department of Public Health in the State of New York estimated that the annual costs of the diagnostic and therapeutic procedures involved in the follow-up of elevated PSA levels were in the range of 26 billion dollars!

The studies by Rich (1) and Moore (2) were simple in design, completely descriptive, but powerful in their insight and impact. Descriptive studies often get criticized for their inadequacy, but they often are the starting point for a line of inquiry. Insights into the biology and mechanisms of disease continue to come from descriptive studies done in the clinic and in the autopsy suite. As Yogi Berra once said: "You can observe a lot by watching".

References

(Continued from page 2)

Executive Officer’s Report continued

Please see page 7 for information about ASIP’s new Minority Trainee Travel Awards. In addition, I am pleased to report that ASIP Council has voted to increase the number and stipend of travel awards to ASIP trainees.

ASIP Website. ASIP has revamped its website. The new webpage is now housed on our own ASIP server and has a simpler and easier to remember name: www.asip.org. Please let Tara Zeitner (tzeitner@asip.org) or Alta Walllington (awallington@asip.org) know if you have any suggestions to improve the site so it can better meet your needs. This is an excellent opportunity to thank Dr. Linda McManus for the many years of hard work in getting ASIP’s original website up and running, in preparation for the eventual transfer to the new site.

Public Affairs. During the last few months, there have been several developments on the United States Federal regulatory front. The charter for SACGT (Secretary’s Advisory Committee for Genetic Testing) was not renewed and the Committee has been disbanded. It is expected that its mission will be incorporated into the charter for a new Biomedical Ethics Review Panel that is being considered by the Bush Administration. In August, the Bush Administration published new Privacy Rules under HIPAA. The new rules are much “friendlier” to research than the previous rules that were published in December 2000, and will take effect on April 14, 2003. ASIP joined several other societies in urging DHHS to reconsider the December 2000 rules. It is still too early to predict exactly how the new rules will be implemented. I have been informed that all agencies under DHHS (including the NIH, FDA, CDC) will speak with one voice regarding the interpretation of HIPAA Privacy Rules and that Guidances are being written to clarify unresolved issues. DHHS is listening to the research community. I attended a day-long meeting in September, partially sponsored by DHHS agencies, specifically on the topic of the impact of the privacy rules on research. I urge all interested parties to be patient and wait for the new Guidances which should clarify and simplify the interpretation of the new rules.

Search for a new Editor-in-Chief of AJP. We are very proud of the outstanding accomplishments of AJP’s current Editor-in-Chief, Dr. James Madara, who recently accepted an appointment as the University of Chicago’s Vice President for Health Affairs and Dean of the Pritzker School of Medicine. Dr. Madara is also a trustee of the American Board of Pathology and is continuing to lead his research laboratory. Due to these increasing responsibilities, Dr. Madara has decided to step down as Editor-in-Chief of AJP. Dr. Dorothy Bainton is chairing the Search Committee for a new Editor-in-Chief. AJP continues to have the highest impact factor among all general pathology journals and its stewardship by an excellent Editor-in-Chief is critical to its success. See the announcement on page 13 in this Bulletin for details. I urge you to speak to individuals who you think would be a worthy successor to Dr. Madara (and his predecessors Drs. Nelson Fausto and Vincent Marchesi) and ask them to send a letter of interest to Dr. Bainton for consideration by the Search Committee. We hope that a new Editor-in-Chief will be selected by the Spring of 2003. Dr. Madara will continue as Editor-in-Chief until a new Editor is named and throughout a transition period. We owe a debt of gratitude to Drs. Gofrey Getz and Charles Parkos, AJP’s Senior Associate Editors, who have been essential to the recent success of the Journal, as well as to Priscilla Markwood, AJP’s Managing Editor.
# News and Notes

**Welcome to the following NEW Members:**

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<th>Name</th>
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<tr>
<td>Sarki Abdulkadir, M.D., Ph.D.</td>
<td>University of Alabama at Birmingham</td>
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<td>Geza Acs, M.D., Ph.D.</td>
<td>University of Pennsylvania Medical School</td>
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<td>David H. Adams, M.D., Ph.D., MBBS</td>
<td>University of Birmingham</td>
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<td>Abbas Ardehali, M.D.</td>
<td>University of California, Los Angeles</td>
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<td>Sanford H. Barsky, M.D.</td>
<td>University of California, Los Angeles</td>
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<td>Andre Buret, Ph.D.</td>
<td>University of Calgary</td>
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<td>Diego M. Castrillon, M.D.</td>
<td>Brigham &amp; Women’s Hospital</td>
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<td>Chi-Chao Chan, M.D.</td>
<td>National Eye Institute - NIH</td>
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<td>Lawrence S. Chan, M.D.</td>
<td>Northwestern University</td>
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<td>Kothapa N. Chetty</td>
<td>Grambling State University</td>
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<td>Alan Daugherty, Ph.D.</td>
<td>University of Kentucky</td>
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<td>Adel K. El-Naggar, M.D., Ph.D.</td>
<td>University of Texas - MD Anderson Cancer Center</td>
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<td>Milan Fiala, M.D.</td>
<td>UCLA School of Medicine</td>
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<td>Robert Folberg, M.D.</td>
<td>University of Illinois at Chicago</td>
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<td>Koh Furuta, M.D., Ph.D.</td>
<td>National Cancer Center Hospital</td>
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<td>Humphrey Gardner, M.D.</td>
<td>Biogen Inc</td>
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<td>John R. Gordon, Ph.D.</td>
<td>University of Saskatchewan</td>
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<td>Kenichi Harigaya, M.D., Ph.D.</td>
<td>Chiba University Graduate School of Medicine</td>
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<td>Zishan A. Haroon, M.D., Ph.D.</td>
<td>SRI International</td>
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<td>Ralph Hruban, M.D.</td>
<td>Johns Hopkins University</td>
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<td>Hiroshi Inagaki, M.D., Ph.D.</td>
<td>Nagoya City University Medical School</td>
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<td>Giorgio Inghirami, M.D.</td>
<td>New York University Sch of Medicine</td>
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<td>Michael Ittman, M.D., Ph.D.</td>
<td>Baylor College of Medicine</td>
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<td>Olena Jacenko, Ph.D.</td>
<td>University of Pennsylvania Veterinary School</td>
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<td>Kris Kalra, Ph.D.</td>
<td>BioGenex</td>
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<td>Y. James Kang, Ph.D. DVM</td>
<td>University of Louisville</td>
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<td>Ruth L. Katz, M.D.</td>
<td>MD Anderson Cancer Center</td>
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<td>Todd G. Kroll, M.D., Ph.D.</td>
<td>Emory University School of Medicine</td>
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<td>Masahiko Kuroda, M.D., Ph.D.</td>
<td>Tokyo Medical University</td>
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<td>Alex B. Lentsch, Ph.D.</td>
<td>University of Cincinnati</td>
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<td>Anirban Maitra, MBBS</td>
<td>Johns Hopkins Medical Institute</td>
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<td>Alvin Malkinson, Ph.D.</td>
<td>University of Colorado Health Sciences Center</td>
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<td>L. Jeffrey Medeiros, M.D.</td>
<td>University of Texas - MD Anderson Cancer Center</td>
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<td>Michal Michal, M.D.</td>
<td>Charles University</td>
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<td>Satdarshan P. S. Monga, M.D.</td>
<td>University of Pittsburgh Sch of Medicine</td>
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<td>Masatsugu Moriyama, M.D., Ph.D.</td>
<td>Tottori University</td>
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<td>James Nakashima, Ph.D.</td>
<td>Brown University (formerly)</td>
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<td>Irene Newsham, Ph.D.</td>
<td>Henry Ford Hospital</td>
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<td>Juan Pablo Olano, M.D.</td>
<td>University of Texas Medical Branch</td>
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<td>Marta R. Ortega, Ph.D.</td>
<td>Fundacion de Jimenez Diaz</td>
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<tr>
<td>Jeffrey E. Parvin, M.D., Ph.D.</td>
<td>Brigham &amp; Women’s Hospital, Boston</td>
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<td>Ralf Paus, M.D.</td>
<td>University Hospital Hamburg-Eppendorf</td>
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<tr>
<td>Luis C. Porto*, M.D., Ph.D.</td>
<td>State University of Rio de Janeiro</td>
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<td>Susan M. Prattis, V.M.D., Ph.D.</td>
<td>Yeshiva University</td>
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<td>University of Washington</td>
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<td>Grant A. Ramm, Ph.D.</td>
<td>Queensland Institute of Medical Res.</td>
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<td>Joan Rosello-Catafau, Ph.D.</td>
<td>Instituto de Investigaciones Biomedicas de Barcelona</td>
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<td>Wade S. Samowitz, M.D.</td>
<td>University of Utah HSC</td>
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<tr>
<td>Tara L. Sander, Ph.D.</td>
<td>Children’s Hospital Boston</td>
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In Memorium:

Dr. Stefan Niewiarowski, Professor of the Department of Physiology at Temple University School of Medicine in Philadelphia, PA died this past year. Dr. Niewiarowski was a member of the ASIP since 1975. He was also a long standing member of the American Physiological Society.

For assistance concerning your membership or dues, please contact:
Tara Zeitner, Director of Meetings and Membership Services
(301) 634-7950 or email: tzeitner@asip.org
2002-2003 ASIP Committee Rosters

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This committee selects the recipients of the Gold-Headed Cane, the Rous-Whipple Award and the Pfizer Outstanding Investigator Award.

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The members of the above committees and Council are elected. All other committee rosters (with members appointed by Council) are available on our web site — www.asip.org/gov/gov.htm
Calendar of Events

The 9th International Congress on TNF-Related Cytokines Conference
October 30 - November 2, 2002; Hyatt Regency on the San Diego Bay, San Diego, CA
E-Mail: meetings@liai.org

Association for Molecular Pathology Annual Meeting
November 14-17, 2002; Adam’s Mark Hotel, Dallas, TX
Contact: Maricel Herrera, Meetings Manager
Tel: (301) 634-7939; Fax: (301) 634-7990
Email: mherrera@asip.org
http://www.ampweb.org

5th International Symposium on Anti-Angiogenic Agents Recent Advances and Future Directions in Cell Biology and Clinical Research
Jan. 30 - Feb 2, 2003; Hyatt Regency La Jolla, San Diego, CA
Contact: Ora Guy
Center for Biomedical Continuing Education
8445 Freeport Pkwy Ste 680
Irving TX USA 75063
Tel: (972) 929-1900; Fax: (972) 929-1901
Email: symposia@thebce.com
Website: www.thebce.com/futureprograms.asp

New Strategies in Breast Cancer 2003
February 2003; Phoenix, AZ
To register online, please visit the website: http://www.thebce.com/futureprograms.asp or contact:
Ora Guy
Center for Biomedical Continuing Education
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