Menopause: The Journal of The North American Menopause Society
Vol. 18, No. 2, pp. 119-120
DOI: 10.1097/gme.0b013e3182039bcd

THE NAMS MENTORSHIP PROGRAM

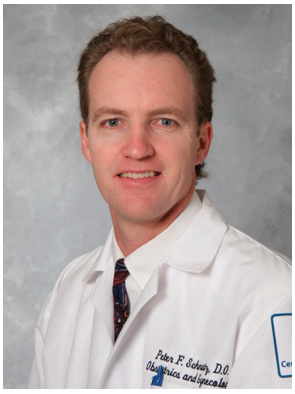
Research in a community hospital: some lessons from the Clarkson-Schnatz mentor-mentee pair in The North American Menopause Society Mentorship Program

Tom Clarkson and Peter Schnatz are demonstrating that good research can be done in a community hospital. This article is the third in my series of interviews with the six mentor-mentee pairs in the inaugural 2009 class in The North American Menopause Society (NAMS) Mentorship Program.

Peter F. Schnatz, DO, is a graduate of Drew University and University of Medicine and Dentistry of New Jersey. He completed two residency training programs at the University of Connecticut, first in internal medicine, followed by obstetrics and gynecology. Peter joined the staff of the Reading Hospital and Medical Center in Reading, PA, in October 2009 as Associate Chair of Obstetrics and Gynecology and Director of the Residency Program. He previously was an attending physician at Hartford Hospital in Hartford, CT, with appointments as Associate Professor in both the Department of Obstetrics and Gynecology and the Department of Internal Medicine at the University of Connecticut. He was the University of Connecticut Clerkship Director and Director of the Women's Ambulatory Service and Director of the Menopausal Medicine Clinic at Hartford Hospital. Peter continues to be involved with FaithCare, an organization that provides local, national, and international medical relief; indeed, he is the Founder and Chairman of the Board and Director of the Hartford FaithCare Wellness Center, a clinic in the inner city of Hartford for the needy and uninsured. He has also led medical missions to Nigeria, Siberia, and Haiti. Peter has always been committed to teaching and interacting with medical students and residents in obstetrics/gynecology, internal medicine, and family practice.

Looking for a new challenge, Peter found it in Reading, taking on additional administrative responsibilities and initiating new educational programs. He found a department eager to include research activity, combined with open support from hospital administration. A lesson here is that this positive attitude toward research was a key factor in Reading's successful recruitment of Peter. Clinical academicians today find it difficult to have time and support for research given the heavy time and economic demand for patient care. About half of Peter's time is occupied with clinical commitments, and administration usually requires the other half. So it is still a challenge to find time for research, and not uncommonly, this requires evening and weekend hours. Some things never change!

Peter's current menopausal research focuses on cardiovascular disease, an interest that evolved from the publications of the Women's Health Initiative. Collaborating with his mentor, Tom Clarkson, and the team at Wake Forest University, Peter is involved in several projects. One is determining vitamin D_3 levels and bone density measurements in a clinical trial in monkeys being treated with vitamin D_3 and either estrogen or placebo. This work produced two abstracts presented at the 2010 NAMS Annual Meeting, an oral presentation entitled "Identification of one of the potential mechanisms for increased cardiovascular risk among individuals with low vitamin D concentrations," and a poster presentation entitled "Individual differences in plasma concentrations of vitamin D3 are associated with the beneficial effect of estrogen treatment on bone density of surgically postmenopausal monkeys."



There are some interesting logistics here and another lesson for clinicians interested in research. The monkeys are in North Carolina. Serum for measurement of vitamin D levels is shipped to Pennsylvania for analysis in a laboratory funded by the Reading Hospital. The lesson is that recruitment and negotiations provide an opportunity to initiate and support research. One thing is for sure: if you do not ask, you will not get support. Do not assume that a community hospital rules out research. Peter Schnatz's experience is a great example.

One of the benefits of the Clarkson-Schnatz mentor-mentee pairing has been the opportunity for Peter to translate basic animal research into clinical studies. Peter has extended the interest of Clarkson's team in the relationship between monkey depression and coronary heart disease to a longitudinal study in women receiving mammogram screening. Assessment of depression in the women involved in Peter's study linking breast arterial calcification and coronary artery disease (the NAMS poster prize in 2009) has supported the monkey findings, an association between depression and coronary artery disease. The benefits flow in the opposite direction as well, as Tom Clarkson, the mentor, has the opportunity to confirm in women the results in the monkey model.

Peter is very thankful for the NAMS Mentorship Program and is eager to point out the gracious and accommodating

atmosphere he encountered by the Clarkson team of basic researchers, never feeling intimidated but welcomed for his contribution. Another lesson here: prospective mentees, especially clinicians, can look forward to an uplifting, positive experience. The sharing of ideas and the pursuit of new information are an enjoyable partnership that can lead to new funding and an expanding network of colleagues.

Tom Clarkson, Professor of Comparative Medicine at Wake Forest University School of Medicine, published his first research report in 1956, the effect of cholesterol-lowering drugs on cockerels. In 2009, Tom had five publications. Tom's research career spans 54 years, 53 of them at Wake Forest. After acquiring his Doctor of Veterinary Medicine degree from the University of Georgia, Tom worked briefly in the research department of the S.E. Massengill Company in Bristol, TN. On an invited visit to Winston-Salem, the founding dean of the struggling medical school invited Tom to join the academic staff, warning him that he had no idea what the school could provide for a salary. Instead, the dean offered to "share whatever he had." For a couple of years, Tom's salary check varied each month according to the amount available for sharing.

Tom was quickly joined by a team that focused initially on a pigeon model of atherosclerosis. By 1963, Tom responded to the criticism that his findings might not apply to primates, and a decision was made to work with monkeys. The first field studies were in Columbia, in the Amazon jungle. About 25 years ago, Tom's team responded to a growing scarcity of monkeys by establishing a primate center at the medical center in Bogar, Indonesia. Later, the team introduced monkeys to an island 25 miles off the coast of Indonesia. The island of Tangel, 4 miles wide and 20 miles long, had been used for bombing practice and was devoid of any animals or insects. Cynomolgus monkeys at that time were threatened with malaria and monkey AIDS. Initially, 5,000 monkeys and appropriate fauna to nourish monkeys were introduced with the help of the Botany Department at the University in Bogar, and today, the colony numbers 10,000, a population free of AIDS and malaria, available for research.

Tom is a veterinarian who is equally at home in a room of basic scientists or in a room of clinicians. He communicates at every level with skill, enthusiasm, and a straightforward, easily understood message that is also sprinkled with humor. Tom already had a track record in the study of atherosclerosis in animals when I met him in the mid-1980s, a meeting sparked by his team's work establishing the preventive role of estrogen on the progression of atherosclerosis in monkeys receiving oral contraceptives with the older high doses of both estrogen and progestin. Tom's work on atherosclerosis and coronary heart disease naturally led to understanding the progression of this disease in women and the impact of postmenopausal hormone therapy.

Throughout the world, Tom Clarkson is one of the most recognized contributors to heart research. Combining his easygoing manner with a strict adherence to the scientific method and an outstanding ability to communicate, it is not surprising that collaborations and mentoring come naturally for this man who is young in heart and mind.

Tom is dedicated to "raising the next generation of investigators" and believes that the NAMS Mentorship Program is a fine method to achieve that end. He recognizes that nurturing inexperienced investigators, especially clinician investigators, is more difficult today given the multiple demands and funding competition in recent years. This is another reason he is such an enthusiastic supporter of the NAMS program. Tom points to his own mentor-mentee relationship, indicating the successful establishment of research in a community hospital and the support provided to a clinician who was already fairly well along in his career, evidence of what the NAMS program can accomplish. All that is required for both mentor and mentee is an open mind and a willingness to learn and work.

Financial disclosure/conflicts of interest: None reported.

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