Dr. James McGinity served for more than 30 years on the College of Pharmacy faculty. In that time, he made significant contributions to the college, his students, and the profession of pharmacy. One of his most significant contributions to science was his work to make the painkiller Oxycotin virtually tamper proof. He was recognized for this and other efforts when he was named as the university’s Inventor of the Year in Fall 2014.

Cover

The University of Texas Longhorn Pharmacy Focus
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The Dean’s message

Dear Alumni and Friends:

As I write my dean’s message for this issue of Focus, I am struck by the immense transitions in which we are currently in progress. First and foremost, we have a new president designate, Dr. Gregory Fenves. I have had the privilege of serving with him as a peer dean, and I have had the honor of having him as my provost. The one thing that impresses me the most about Greg is the fact that he is strategic. As we continue to face cost constraints and address questions regarding the role of the university in serving the 21st century society, strategy will be critical, and I can think of no one more strategic than Greg Fenves to lead this great university into its next era.

Our faculty and students continue to be active in endeavors that change the world. Whether it is Dr. Jim McGinity winning the Outstanding Inventor Award, Dr. Veronica Young leading a poverty simulation, student pharmacists serving our communities through healthcare screening activities, P3 student pharmacist Bindia Patel placing first runner up in the APhA student pharmacist patient counseling competition, or Dr. Somshuvra Mukhopadhyay discovering a gene associated with Parkinson’s Disease, our students, faculty, and staff never cease to amaze me with their multitude of accomplishments.

This issue of Focus acknowledges the passing of two outstanding former members of our faculty. Dr. Charles Walton provided the vision and leadership for the original post B.S. Pharm.D. program located at UTHSC San Antonio. He was a vibrant mentor for many, including myself. Dr. Creed Able was an innovative chemist, making several significant discoveries regarding the metabolism of dopamine. He is remembered by many as being a scholar and a gentleman.

I encourage you to read the issue of Focus and give thought to what the UT College of Pharmacy has meant to your career, and thus to your life. This truly is a special place, and I am so thankful to continue to serve as your dean. On page 30, alumna Marissa Shlaifer reflects on what the college means to her and why it is important for her to give back. As you reflect on your own experiences as a former student at UT COP, I hope that you will make a commitment to give back, helping us assure outstanding educational learning experiences for future generations of Longhorn student pharmacists and graduate students.

Hook em!

Dean M. Lynn Crismon, Pharm.D.
Dean
Fenves gets nod for UT president

Former provost, dean of engineering, replaces Bill Powers

Gregory L. Fenves has been named as the next president of The University of Texas at Austin. Fenves assumed the role of leading the UT System’s flagship university on June 3. Fenves, who previously served UT Austin as executive vice president and provost, replaces Bill Powers who concluded his nine-year tenure on June 2.

“This is a new chapter in UT Austin’s proud history and we are excited to have a scholar and leader of Dr. Fenves’ caliber who is primed and ready to lead the university’s quest to be the finest public research institution in the world,” said Board Chairman Paul Foster. “We welcome him as our newest president and look forward to accomplishing great things together.”

Fenves thanked both UT System Chancellor William H. McRaven and the Board of Regents.

“I am deeply honored that The University of Texas System Board of Regents and Chancellor William McRaven have put their faith in me to lead The University of Texas at Austin as the next president,” Fenves said. “There are tremendous opportunities for our great university, and I will work hard every day to realize our state’s constitutional goal of ‘a university of the first class’.”

Fenves has served as UT Austin’s provost and executive vice president since 2013. He is a member of the National Academy of Engineering, the highest national honor awarded to engineers in the United States. Prior to being named provost, Fenves served for five years as dean of UT Austin’s Cockrell School of Engineering. With more than 7,500 students and research expenditures exceeding $160 million a year, the Cockrell School is a top-10 ranked engineering school with nine internationally recognized undergraduate programs and 13 acclaimed graduate degree programs.

Before coming to UT Austin, Fenves, 58, served as chair of the Department of Civil and Environmental Engineering at the University of California, Berkeley, where he was on the faculty for more than 20 years. He earned his bachelor’s degree at Cornell and his doctorate at UC Berkeley. He began his career at UT Austin as an assistant professor in civil engineering in 1984.

He is an internationally recognized structural engineer whose research is focused on computational simulation of structures during earthquakes and technology for earthquake engineering. He led the development of an open-source software platform in structural and geotechnical engineering that has been widely used in universities and industry across the world.

“I could not be more proud to welcome Dr. Fenves as UT Austin’s next president,” said McRaven, who served on the presidential search advisory committee. “This is one of the most important decisions this Board of Regents will ever make and I have no doubt they have selected the right person for this very important job. Greg is a brilliant academic and a charismatic leader and his commitment and dedication to UT Austin runs as deep as my own.”

During his time as provost, Fenves has overseen much of the administrative progress for the creation of the Dell Medical School. He also launched a “Campus Conversation” intended to redefine the residential college experience in the 21st Century by identifying the essential learning elements of a high quality degree and increasing the role of student discovery and research in undergraduate education.

US News ranks UT programs

Graduate schools in engineering, law, education and nursing join the College of Pharmacy in being ranked among the top programs of their kind in the country, according to new rankings recently announced by U.S. News & World Report.

The publication’s graduate rankings, separate from the magazine’s yearly rankings of undergraduate programs, are among the most prestigious ratings in higher education.

Several other graduate schools remain nationally ranked from 2012-2014 and were not revised this year. Pharmacy maintains its ranking at No. 4 nationally. UT colleges and schools that are nationally ranked by the publication include: pharmacy (4); library and information studies (6); social work (7); geoscience (8); computer science (9); engineering (10); education (10); nursing (13); law (15); public affairs (16); and business (17).
Podium competition

Patel earns high honors at national APhA meeting

Patient Counseling Competition

Both depression and schizophrenia were emphasized. The team noted positive changes associated with perceptions of schizophrenia following the curriculum.

Barner said that the college’s pharmacotherapy courses help provide students with knowledge of the diseases and related treatment medications. This project complements the coursework by equipping future pharmacists with approaches to improve empathy, understanding and willingness to engage mental health patients.

Other studies have examine stigma holistically, but this study focused on understanding more about the subdomains of stigma including: recovery (belief that one can recover); safety (danger to oneself and others); separation (unwilling to associate); disclosure (telling others about the illness) and, comfortability (comfort level in communicating with a patient). This approach helps develop more targeted interventions aimed at diminishing health disparities among individuals who may be stigmatized due to their mental health condition, Barner said.

Benita Bamgbade, a Ph.D. student working with Dr. Jamie Barner, received a Best Podium Presentation Award at the annual meeting of the American Pharmacists Association meeting in San Diego, Ca.

Bamgbade, Pharm.D. ‘11, partnered with faculty co-authors Barner and Dr. Kentya Ford for her presentation, “Impact of Mental Illness Stigma Awareness Intervention on Pharmacy Student Perceptions and Factors Influencing Willingness to Counsel.”

Mental illness impacts one in four people in any given year and one in two over a lifetime. Although various approaches are available for treatment, pharmacotherapy is most often used. Unfortunately, patients being treated for mental illness fall short in taking their medications as prescribed.

“The literature shows a disconnect between pharmacists’ perceptions, which indicate a willingness to provide care, and actual practice, which shows low levels of care provision,” said Barner. “The ‘disconnect’ may be due to stigma.”

The team addressed the stigma with pharmacy students with the intent of modifying perceptions and behaviors early in the students’ pharmacy education. A 2.5-hour intervention was developed to include several active learning components. Students also viewed videos of individuals suffering from mental illness and of health care providers who treat them.

P4 student Bindia Patel was named first runner up in the national patient counseling competition sponsored by the American Pharmacists Association’s (APhA) Academy of Student Pharmacists.

Patel emerged as a winner from the local competition to represent The University of Texas at Austin at the national competition. Announcement was made at the association’s March meeting in San Diego, Ca.

The national competition is divided into the preliminary round and final round. At the preliminary round, students select a practice scenario at random and counsel a patient on the appropriate use of the drug involved. Students are given time to refer to the reference sources available in the model pharmacy. After consulting the references and determining the appropriate information, participants counsel the patient. Evaluations are based on the content and style of the counseling presentations. The ten highest scoring participants advance.

The final round involves a more complex counseling situation where the participants again select a prescription at random and are asked to counsel the patient on safe and effective drug use. Patients in the final round will display personality characteristics to challenge the participants’ ability to convey pertinent information in a realistic situation.
Explore UT

College utilizes Texas’ biggest open house to continue to introduce itself to community

It has evolved as a rite of spring on the Forty Acres. The college joined the rest of the university in rolling out the welcome mat in March for the 16th edition of Explore UT, and the public again responded.

Throughout the rest of the year, representatives from college staff and administration, alumni, current students move about the Lone Star state to tell the story of The University. Hearing those stories are powerful, but witnessing the university in action, at events such as Explore UT can make life changing impressions.

This year Explore UT attracted thousands of people from bus loads of public school students and teachers to families with prospective students. They had an opportunity to witness college programs through demonstrations, faculty lectures and interactions with college students. Explore UT remains an outstanding public relations and recruitment tool for both the university and the college. Within the college, programs were showcased with student demonstrations, health screenings performed by students, faculty lectures, and even a potion-making session designed to introduce audiences to the compounding process.

Student co-chairs for Explore UT were Marilyn Mootz and Jaclyn Chou.

Welcoming visitors by playing games with youngsters, advising prospective students, role playing or teaching compounding, students served as college ambassadors to the thousands of guests who attended Explore UT 2015.
By Lynh Pham, P3 student
Special to the Austin American-Statesman

My first experience with The University of Texas at Austin was when I went to Explore UT with my Girl Scout troop in elementary school. I remember running carefree around the enormous campus from booth to booth with my friends. They had so many science and art projects, my brain thought it would explode from all the options available to me.

In my last couple years of high school, my dad took me back to Explore UT so I could help figure out what career I wanted to pursue. At the College of Natural Sciences and the College of Engineering, I toured the labs and classrooms, participated in hands-on activities and asked endless questions of the students. The volunteers were so helpful in answering my myriad questions, and I could see the enthusiasm and passion they had for science.

Soon thereafter came the time for me to determine where I wanted to attend college. Growing up in Austin as the youngest sibling in my family, I was against attending UT simply because the last thing I wanted to do was to stay in my hometown. I attended Hill Elementary School, Kealing Middle School and the Liberal Arts and Science Academy in Austin, and I was ready to move elsewhere.

I applied to 12 universities throughout the United States. But as the college acceptances began to trickle in, I couldn't help but think about my previous experiences at UT. It dawned on me that I had built a lot of fond memories with the school over the years, but it was one particular event that stood out – Explore UT.

Reflecting made me realize that I had amazing experiences regardless of what age I attended Explore UT, and in the process I gained so much respect for the university. Those experiences helped me solidify my decision to attend UT for my undergraduate degree.

I first studied biomedical engineering but then switched to biology after deciding to pursue a career in pharmacy. My undergraduate memories at the university are priceless, and I formed many relationships with my friends through classes, student organizations and season tickets to the football games.

When it came time for me to decide which pharmacy school I wanted to attend, I knew that I wanted to attend the best pharmacy school in the United States, right in my hometown. One of the most rewarding parts of being in pharmacy school has been interacting with the community.

In particular, my favorite event to participate in has been Explore UT. Through helping out at the health screenings and participating in the Junior Bevo Safari that the College of Pharmacy hosts, I have been able to give back to the university and share my passion in science and the pharmacy field with young visitors to the campus.

“The biggest open house in Texas” introduced me to my future and showed me what a great place the university truly is. I have come full circle from the crazy fifth-grader running throughout the campus to a student volunteer at the College of Pharmacy for this year’s Explore UT.

I hope that I will be able to help others see what a great college UT is, and why I have picked this university as my home for the past seven years and counting.
Intellectual Entrepreneurship

Work in pharmacy research lab brings clarity, confidence to pursue graduate school

Editor’s Note: Irnela Bajrovic participated in the Intellectual Entrepreneurship Pre-Graduate School Mentorship with Dr. Maria Croyle, professor of pharmaceutics. In this piece, Irnela writes about her path to higher education.

By Irnela Bajrovic

With student debt rising and an increasing number of college graduates unable to find work, many question the value of a four-year degree – especially those who come from an economically disadvantaged background. Fortunately, universities are creating programs designed to help students discover their passion, explore viable career options, and maximize the value of undergraduate education.

The Intellectual Entrepreneurship Pre-Graduate School Mentorship (IE) in Division of Diversity and Community Engagement at The University of Texas at Austin is one such initiative. Coupled with the IE Kuhn Scholars Award, a scholarship made possible by the generosity of Michael and Alice Kuhn to assist first generation and/or economically disadvantaged students, undergraduates like me have been able to overcome hurdles posed by a horrifying and challenging past.

The first few years of my life were spent evacuating a war torn Bosnia. I arrived in America as a refugee alongside my mother, father, and sister. My parents struggled to find work only to hear the one word that was the same in Bosnian and English: No. We were forced to survive on food stamps and the kindness of others. Having overcome one of the worst genocides in Europe, second only to the Holocaust, my parents were accustomed to suffering. They knew that it was too late for them, but swore that my sister and I would lead different lives.

When I arrived at UT Austin, I joined the Synthesis and Biological Recognition Stream in the Freshmen Research Initiative. I also became a mentor and began to search for a new lab to further my skills. Finding an academic home in Dr. Maria Croyle’s lab in the College of Pharmacy’s Division of Pharmaceutics, I was assigned my own project and started work on developing a new form of vaccine delivery that might prevent Ebola. This project led me to join the IE Pre-Graduate School Mentorship, hoping to gain the confidence needed to pursue graduate school and a possible career at the Centers of Disease Control (CDC).

Through IE, I had the opportunity to discuss my research ideas and make weekly progress reports; I interacted regularly with graduate students, pharmacy honor students, and Dr. Croyle. These presentations are required of graduate students and enable them to practice speaking about science with a group of their peers. As an undergraduate, this experience was extremely challenging and the source of much angst. I soon learned how to prepare for lab meetings and now have very few qualms about presenting my work to members of the scientific community.

Another invaluable experience was attending the annual meeting for the American Association of Pharmaceutical Scientists – an opportunity afforded very few undergraduates. I learned about the dynamics of oral and nasal delivery of drugs as well as the keys to success in the field of pharmaceutics.

One of my favorite lectures was on women in pharmaceutics that discussed the struggles experienced by women who are interested in careers in science, technology, engineering and mathematics. The lecture also demonstrated how having the right mentors help students address these struggles. This experience provided me with an insight into presenting research data to colleagues. It also gave me a thorough understanding of what is expected of graduate students, the value of a Ph.D. in pharmaceutics, and how I might use my knowledge for the overall betterment of public health.

My time in the IE Pre-Graduate School Mentorship has calmed my fears about graduate school, corrected many misconceptions, and alleviated confusion. I gained a clarity I have never had before. Not only do I know that graduate school is the most direct path to the CDC, a longtime dream, but it is a journey I look forward to embarking upon. I am starting this new journey in my life with my eyes wide open. I know it will be hard. I know I will be tired. But I also know that it will absolutely be worth it.

Thanks to UT what starts here does indeed change the world.
Project Collaborate

Students, patients gain in winn:win screening initiative

Project Collaborate is a college-wide initiative designed to empower the underserved in communities in Austin, El Paso, San Antonio and the Rio Grande Valley with knowledge about their health by providing free health screenings and patient education. Since its inception five years ago, the program has expanded and developed into a more established and recognized initiative. This year, student participants compiled a list of health related community resources to give to patients.

At the Feria Para Aprender event in Spring 2014, a patient approached team members to share that he had attended the 2013 screening where he was notified that his cholesterol levels were high. He spoke with our preceptor and then visited his primary care provider. With the help of his physician, he was able to lower his cholesterol levels through diet and exercise. Without the screening, he would not have known that his cholesterol was out of range and may not have taken the steps to improve his health.

Students share Project Collaborate experiences

“Project Collaborate provided me with a way to actively connect with patients and be involved in their health care. As just one member of the healthcare team, I see the need within the healthcare environment for potential expansion of services. As the patient population becomes more diverse, I realize the value in communicating with patients, regardless of language. My ability to speak Spanish allows me to feel valued as a pharmacy student at Project Collaborate screenings. Professionally I hope to one day continue such screenings in my domain of practice.” — Marilyn Mootz, P2 student

“I never thought I would be making somebody bleed during my first day in pharmacy school, but there I was pricking a new friend’s finger. It was intimidating and fun at the same time. This was my first experience into the world of health screenings and Project Collaborate, but it would not be my last. Two and half years later, I have hosted two Project Collaborate events and am in the process of hosting my last before heading off for rotations. The experience has been enriching and exhausting in the best way possible. Hosting screenings has allowed me to improve my organizational, communication, and intellectual skills. Working with other students, I have learned to be both a leader and a teammate. I have helped patients think about their health and received smiles in return. Lastly, this opportunity has allowed me to build confidence in my leadership. If I could go back to my nervous P1 self, I would tell her not to worry because Project Collaborate will help her grow into a strong and proud student pharmacist!” — Sana Qurishi, P3 student

“Having no experience working on a pharmacy team, I entered the college with little knowledge about what it was like to interact with patients. Consequently, applying for a position took little to no thought when the opportunity to be a part of Project Collaborate presented itself. Working through this initiative has opened my eyes to a world of patient care about which I could never have dreamed, and I am humbled to be able to serve the community in the way that we do through Project Collaborate. The meaningful impact that we make on patients’ lives is a driving factor in my school work and career goals, and for that, I am overwhelmingly grateful.” — Chris Medlin, P1 student
They gather early on a Saturday morning at the university’s Anna Hiss Gymnasium not exactly sure what to expect from the next couple of hours. More than 80 people put aside their lives and preconceived thoughts and either took on the persona of one of the 45 million Americans who daily face significant financial challenges or assumed the role of a staff member working in a business or community service agency that works with indigent communities. For the next two hours they will gain a brief glimpse into what it means to walk this path.

Students and faculty from pharmacy, nursing, social work, and dentistry had a chance to walk a mile in the shoes of some of their future patients and clients at the Poverty Simulation, an interprofessional education event designed to teach participants about disparities in living conditions within a community. Walking with them were staff members from community-based organizations and some young teens, creating a diverse, multi-generational group of participants.

During the course of the exercise, participants were confronted with the realities of living with a small budget and limited time by role-playing as familial units challenged by a specific set of circumstances.

As the simulation progressed, the families were challenged to collaborate among themselves and to work with available institutions and resources to provide food, water, shelter and miscellaneous expenses for a one month period, broken into four one-week units. A team of 20 volunteers represented agencies and organizations including

I felt guilty role-playing what people struggle with in real life. However, after participating in the simulation, I better understand the struggles of lower income families that I will serve as a pharmacist. Between the constraints for time and money, I realized why healthcare would be one of the last priorities. When there were bills threatening evacuation, healthcare became a luxury. When our simulation family was late on a payment because we did not have the means to pay, we were charged late fees. The bill became more and more difficult to pay. It became a downward cycle. Going through the simulation with students of other healthcare fields, we discussed how we can help turn around the cycle by tailoring resources for needs. I am sincerely glad I participated in the Poverty Simulation. I learned a lot.

- Haemy Chung, P2 participant

The leadership team for the Poverty Simulation included from left: Dr. Adelita Cantu, Alex Bishop, Brian Torabi, Natalia Malesa, and Dr. Veronica Young.
public schools and work environments, utility and mortgage companies, pawn and quick loan agencies, grocery stores, as well as social service agencies.

The program, sponsored by the College of Pharmacy and Target, was organized by a pharmacy student team of Alex Bishop, Natalia Malesa, and Brian Torabi under the direction of Dr. Veronica Young, director of the college’s interprofessional education. Dr. Adelita Cantu, of the UT Health Science Center School of Nursing, led the simulation.

“The simulation is an impactful tool that helps increase our empathy towards those we serve,” said Dr. Young. “I would love to see all health and social care professions students, including anyone who serves the community, participate in the Poverty Simulation. It helps participants set aside preconceived notions of what they think it means to live in poverty, and helps them to better appreciate the stress and daily struggles of those living with disparity.”

“Participation in this type of simulation can cause us to re-evaluate how we communicate and relate with our clients,” she continued. “It should make us question whether the care or services we provide are truly client-centered and community-oriented.”

She went on to say that pharmacy student participants learned that front-line pharmacists play an integral role in helping clients navigate the complex network of social services. Public schools and work environments, utility and mortgage companies, pawn and quick loan agencies, grocery stores, as well as social service agencies.

Through the planning/execution of the Poverty Simulation, I was asked “What does pharmacy have to do with poverty?” During the simulation, my volunteer partner, a social work student, expressed surprise that pharmacy was hosting this event. These reactions had a big impact on me. Community and ambulatory care pharmacists are on the front lines in providing care for patients living with disparity, yet we are among the last healthcare professionals that people think of in relation to issues of inequality. Since the event, I have wondered whether these reactions reflect a larger image of our profession. To begin a dialogue about these image issues, the Poverty Simulation student leadership team hosted a discussion for pharmacy students who participated in the simulation to examine our role in serving the underserved and the public perception of this role.

- Natalia Malesa, student leadership team

What does pharmacy have to do with poverty?

I understand better now what it is like to live in poverty. One of the most eye opening things for me was the intense level of stress I experienced in just a one hour simulation. As the “weeks” went by, my stress level kept increasing and tension between my family members increased as well. Navigating a system I did not fully understand while feeling embarrassed and stressed about not being able to pay bills was very intimidating. This experience will greatly impact my future practice because I will think more about the challenges my patients face on a daily basis and how those challenges might affect their health and ability to effectively use medications. I will also make an increased effort to learn about resources available in my community so that I am better able to pass the information along to patients who might benefit from it. I am grateful for the opportunity to participate in this life changing event.

- Sarah Rumbellow, P2, participant

Expand world view

When Natalia approached me about helping to put on an interprofessional event I was intrigued, but I didn’t really know what to expect. After talking with Dr. Young about the Poverty Simulation, I became more excited – it seemed very interesting and like it would be a good experience for my peers in school. I was already familiar with some issues relating to financial disparity, but by participating in the simulation I gained a more personal connection to these issues. I wish that every healthcare student could participate in a simulation like this in order to expand their world view – it goes beyond what can be taught in a classroom.

-- Alex Bishop, student leadership team

Greatly impact my future practice

I understand better now what it is like to live in poverty. One of the most eye opening things for me was the intense level of stress I experienced in just a one hour simulation. As the “weeks” went by, my stress level kept increasing and tension between my family members increased as well. Navigating a system I did not fully understand while feeling embarrassed and stressed about not being able to pay bills was very intimidating. This experience will greatly impact my future practice because I will think more about the challenges my patients face on a daily basis and how those challenges might affect their health and ability to effectively use medications. I will also make an increased effort to learn about resources available in my community so that I am better able to pass the information along to patients who might benefit from it. I am grateful for the opportunity to participate in this life changing event.

-- Alex Bishop, student leadership team

Continued on page 12.
Poverty Simulation

Continued from 11.

services. They also learned that helping patients through this process is best achieved by taking the initiative to collaborate with other professions and community-based organizations.

As the simulation began, the room was filled with smiles and laughter as participants slipped into their roles and came to know other members of their family unit. The atmosphere quickly transitioned to somber and later stressful as time and resources slipped away and participants began to understand the unique challenges faced by those living below the federal poverty rate of $22,000 annually for a family of four. In Texas, where many of these participants will enter the workforce, living in poverty is a daily concern for 38 percent of single-parent families and for 16 percent of senior citizens. It is also estimated that more than one in four Texas children lack adequate access to food.

Many individuals can’t afford to be sick

Empathy is hard to acquire in a world where self-interest and self-preservation are often a priority. In some pharmacy courses, issues such as patient noncompliance and financial insecurity are discussed, but it is difficult to truly understand these concepts without personal experience. The Poverty Simulation was an outlet to really discover why patients do not always adhere to their medication regimen. When you are living day to day with financial limitations, health care becomes a low priority. In the simulation, it was hard to afford necessary food for one month, let alone find the time and resources to visit a health professional. Many individuals can’t afford to be sick. When they become ill, treatment becomes an option only after other avenues are exhausted. Pharmacists have the power to provide over-the-counter or non-pharmacological recommendations to alleviate symptoms for many patients who can’t afford prescription drugs or a visit to a physician.

The Poverty Simulation not only educates pharmacy students, but also acts as a catalyst to build stronger relationships with other health professionals. The simulation offers a glimpse of what other professions like social work can offer these individuals. Co-curricular professional education can greatly change our perspective and knowledge. The power of the Poverty Simulation is that you can trade three hours of your time for a lifetime of empathy towards a specific patient population.

—Brian Torabi, student leadership team

Gaining real life insight and skills

The “volunteer” roles assumed by social work students in the Poverty Simulation exposed them to issues faced by agency workers, such as not having all the services the client needed, not knowing about other available resources, and witnessing emotions and behaviors of the clients as they became more desperate over the time period. They learned how to assist their clients better by consulting with students from pharmacy and nursing, as they had knowledge and skills in different areas. The Poverty Simulation provided realistic situations and created opportunities for all students to experience the stress, emotions, physical and financial distress that real people experience every day. Some stereotypes were debunked and the increased sensitivity to individuals and families in their environment will benefit all of our students. This experience promotes empathy within our students that will help them when working with people as nurses, social workers, or pharmacists. One of our students was assigned to the Faith Social Service Agency which included a homeless shelter. One of his first clients was his professor (Dede Sparks) in the role of an 85 year old homeless man. At the end of the second week, the student had to inform Dr. Sparks that she could no longer stay in the shelter. He said it was really hard to kick out his own professor.

—Dr. Mary Mulvaney, participant
Clinical Professor, School of Social Work
Pharmobility: An experience of a lifetime

Student explores pharmacy via study in Portugal

By Joseph Brewster

My experience in Portugal was both fulfilling and memorable. I was exposed to a wealth of knowledge through the Pharmobility Program as I learned about the field of pharmacy and Portugal’s healthcare system, but also about many aspects of myself and where my passion thrives.

I began with experiential training at the 350-bed Hospital Sao Francisco, the main facility in a network of three that collaborate in oncological specializations. The pharmacists made sure all my questions were answered and that I was exposed to each of the hospital’s unique areas of pharmacy. I shadowed the oncology specialty pharmacist to grasp a better understanding of oncology and drugs used to treat different cancers. I had exposure to ambulatory care practices and thoroughly enjoyed the interaction with the patients. I learned that all had free access to healthcare including medications for cancer, HIV, and AIDS. There was no significant need for health insurance in Portugal since there is a public healthcare system and some significant medications are free.

I was exposed to clinical trials where I worked in preparing paperwork and in assuring that the patient received the correct medication. This is a growing field in Portugal and the law states it must be separated from other drugs. It also has written policies about the receiving, storage, and distribution of drugs. I had never before seen this practice.

Another week I applied pharmacokinetic parameters to medication regimens of patients. Doctora Erica gave the interns a review of pharmacokinetics and the program used to help determine the correct dose, regimen, and schedule. This valuable experience helped me strengthen my skills of pharmacokinetics and apply my knowledge to real patients.

I also was able to pull the controlled substances for the different wards, shadow the cardiac pharmacist, round with the infectious disease team, watch chemotherapy drugs and total parental nutrition being made, create medication drawers for patients on different floors, distribute hemodynamic, observe a CVL and inguinal hernia surgery, and make an educational bulletin for nurses on Instillagel.

In July, I transferred to the community pharmacy in Belem. One of the differences I found between practice in Belem and in the United States was the Belemian concept of the pharmacist going to the patient before the patient approaches the pharmacist. Belem’s pharmacists truly understood the meaning of patient centered care in all aspects of their practice. There are rooms and desks for the pharmacist and patient to have private consultations and to perform health screenings. They offer collaborations with nutritionists, physiotherapists, and podologists. I saw many over-the-counter products that were European specific and not available here, were the same medication but offered in a different strength, or were prescription only in America.

One of the main differences was there was no wait time for patients to get their medications. Once the prescription was brought to the pharmacy, it was processed immediately and patients could walk away with their medication in hand. This was incredible to see as I have always experienced a wait time for prescription medications to be filled.

There were many wonderful aspects I grasped from the pharmacy, there were some that were not as favorable. For instance, the pharmacist could not open prepackaged medication boxes. If a patient needed five tablets, but the medication was only available in boxes of 30, the patient is obligated to purchase the entire box. This can be unfortunate, especially if the medication is expensive.

It was an incredible experience at Pharmacy Belem where I was able to perform blood pressure screenings, shadow different pharmacists and technicians, learn about their automated system, observe various health screenings, learn the practice of community pharmacy, and glean valuable information and practices to take back to the United States.

The Pharmobility Program was an experience of a lifetime. I am grateful to have had this exposure and been chosen to study in Portugal. The experience has made me a more well-rounded and compassionate pharmacist with a drive to see a positive change in the world and in the practice of pharmacy.

The Pharmobility Program was established in 2001 to facilitate international exchange of pharmacy students. Participating institutions include the UT Austin College of Pharmacy, Bath University (England), University of Barcelona (Spain), University of Lisbon (Portugal) and Hoshi University (Japan). P4 student Joseph Brewster participated in the program in Summer 2014. Learn more about Pharmobility at http://www.utexas.edu/pharmacy/edutrain/utp-pharmobility.html
Pharmacy Council officers announced
New Pharmacy Council officers for 2015-2016 include from left: Bobby Lamontagne, president; Matt Davis, financial director; Jonathan Enchinton, senate representative; Aanika Das, secretary; Marilyn Mootz, vice president; and Lilian Tran, student government representative. They took the oath of office at the April meeting of the council.

UT-SSHP members attend mid-year meeting

Approximately 45 members of UT-SSHP attended ASHP’s Midyear in Anaheim, Ca. P4 students Nancy Pattyn and Stacy Warren represented the college in the national Clinical Skills Competition where they placed 8th out of 127 teams participating teams. Ten members presented research posters and multiple members interviewed with residency programs through the PPS service. Student leaders presented the poster “Promoting Safe Medication Disposal Within Communities” at the Student Society Showcase. UT-SSHP was also involved in the statewide initiative with other Texas SSHP chapters to increase antibiotic awareness. Samantha Vogel serves as president and Dr. James Karboski is faculty advisor of UT-SSHP.

NCPA hosts pharmacy ownership workshop
The UT student chapter of the National Community Pharmacists Association hosted its first ever workshop on independent pharmacy ownership in November. Participants included more than 70 pharmacy students representing UT Austin, Incarnate Word, University of Houston and Texas Tech. The event featured two morning sessions followed by an afternoon program where small student groups rotated through sessions focusing on four specialty areas. Special thanks to Andy Ruiz from Stonegate Pharmacy (compounding), John Anderson from B&J Pharmacy (herbal and nutritional supplements), Chris Perling from Genorite (pharmacogenomics), Mark Newberry and Zach Corbell from Tarrytown ExpoCare (long term care). The program received sponsorship support from McKesson. NCPA leadership includes Cody Gummelt as president and Dr. Nathan Pope as faculty advisor.

TPA honors students
The Texas Pharmacy Foundation (TPF) provided scholarship assistance to two pharmacy students for 2014-2015. P-3 student Jennifer Navar received TPF’s Tarrant County Pharmacy Association Scholarship given in memory of Dale Garrison while P-4 student Kalyn Acker received the TPF’s Luther and Mary Ann Parker Scholarship.

HAP recognized by President’s Council
The Hispanic Association of Pharmacists (HAP) has been selected as a recipient of a 2015 Community Leadership Award presented by the President’s Council on Fitness, Sports & Nutrition. HAP was one of 47 individuals and programs selected to receive the honor. The award is given annually to no more than 50 individuals or organizations that provide or enhance opportunities to engage in sports, physical activity, fitness, or nutrition-related programs within a community.
Research rotation

Monologue, Stavchansky partnership yields high rewards for student researcher

Rotations, even elective rotations, can be much more than just a requirement for graduation. Maggie Monogue learned this first hand when she enrolled in an elective research rotation under the direction of preceptor Dr. Marcus Stavchansky, Pharm.D. 2000, at Convance, Inc.

The two discussed areas that pharmacists can impact pharmaceutical research and were inspired by an ongoing clinical trial investigating the pharmacokinetic and pharmacodynamic properties of an investigational drug product. They wondered how varying levels of education and follow-up requirements affect medication adherence among patients in a controlled clinical research setting. The participating subjects self-administered an injection of the product in their home environment.

In clinical trials, as in pharmacy practice, pharmacists play a large role in providing patient education. Maggie analyzed a trial in which high-quality, consistent pharmacist and clinic staff intervention led to adherence levels at or above 97%. The majority (>70%) of the injections were self-administered by study participants outside of the clinic, recreating what a pharmacist might experience in pharmacy practice. Adherence was measured through diaries that the subjects kept and by conducting drug accountability in the research pharmacy. This rate of adherence provided a reliable source of data by which to examine the results and draw accurate conclusions.

Marcus guided Maggie in accomplishing this research, but Maggie drove the project forward to completion. She spent many hours outside her 6-week rotation reviewing data, ensuring the latest adherence numbers were included in her analyses. Maggie had an opportunity to present preliminary results of the research to the principal investigators and other health professionals at the Covance clinical research unit in Dallas. The discussion among the clinic staff reflected a solid understanding of the impact of pharmacist intervention on a clinical trial, especially when a significant portion of the dose administration occurs in the outpatient environment.

Once they were able to start putting the final touches on the project, Marcus introduced Maggie to the Drug Information Association, a global forum for therapeutic innovation and regulatory science. The association holds an annual conference in which they select 20 students from around the world to present their poster. Maggie was selected to participate in the 50th annual DIA conference in San Diego. In addition, her abstract was published in the July 2014 issue of Therapeutic Innovation & Regulatory Science. Maggie was awarded a scholarship to fly to the conference where she met students from other states as well as Japan, Ireland, and the Netherlands.

The experience has changed Maggie’s perspective on the developmental process of drug products and therapies. Though she did not expect to see significant pharmacist involvement in this area, she now has developed a passion she hopes to continue throughout her professional career. She was the only pharmacy student from Texas at the conference. Marcus was thrilled to have a student eager to commit to such an expansive project while on an elective rotation. He is always looking for ways to expose future pharmacists to clinical research, and this rotation introduced Maggie to an area with which she was unfamiliar. With hard work and focus, Maggie contributed her own research to the clinical research community and to the profession of pharmacy.

Editor’s Note
Maggie Monogue’s abstract is available at:
DIA 2014 50th Annual Meeting Student Poster Abstracts.
Therapeutic Innovation & Regulatory Science. July 2014
48: 507-516.
McGinity named inventor of the year

Longtime researcher shares UT’s Technology Commercialization honor

James McGinity, the Johnson & Johnson Centennial Chair Emeritus in Pharmacy, was named co-recipient of the Inventor of the Year Award by the UT Office of Technology Commercialization. He shared the honor with Dr. George Georgiou of the Cockrell School of Engineering.

Experts say McGinity’s work with Oxycontin is not only promoting appropriate use of the powerful painkiller but also saving “countless lives” by cutting down the potential for abuse.

“If there’s a Mount Rushmore for drug delivery scientists, his face is definitely up there,” says Dave Miller, who studied under McGinity and is now vice president of research and development for DisperSol Technologies. “He has influenced almost every major facet of drug delivery in the oral space I can think of over the past four decades of research.”

“If necessity is the mother of invention, then surely education is its father. When the two come together in a place like The University of Texas at Austin, magnificent things happen,” said UT President Bill Powers at the November gathering to honor the two inventors.

Speaking directly regarding McGinity’s work to tamper proof Oxycontin, President Powers said, “His has been the only abuse-deterrence technology endorsed by the FDA. This invention has influenced the university, pharmaceutical industry, and healthcare communities.”

To manufacture the tamper-proof painkillers, the medicine is subjected to a unique combination of pressure and temperature during the extrusion process, giving the final dosage form a remarkably strong physical strength.

Though that external strength prevents crushing with even a hammer, patients are still able to adequately absorb the medication internally.

“The new and improved Oxycontin formulation has saved countless lives because it’s so difficult to abuse,” McGinity says. “The tablet cannot be broken with a hammer, so it cannot be snorted, and the drug cannot be really extracted such that it can be injected into the bloodstream.”

The U.S. Food and Drug Administration touted the invention, saying the technology McGinity invented and that was then applied to Oxycontin is an “improvement that may result in less risk of overdose.”

“The FDA is very impressed with that particular technology,” McGinity says.

Honoring McGinity

In Fall 2014, former students, colleagues, family and friends of James McGinity honored him at his retirement by announcing creation of the Dr. James W. McGinity Graduate Endowment in Pharmaceutics. Momentum continues toward the $250,000 fundraising goal needed to fund the endowment. If you are interested in honoring Dr. McGinity with a contribution toward this endowment, please go to https://utdirect.utexas.edu/apps/utgiving/online/nlogon/?menu1=PH and select the McGinity Graduate Endowment from the sub department pull down menu.
Vasquez named AAAS Fellow

Dr. Karen Vasquez, professor of pharmacology and toxicology, is among five faculty members at The University of Texas at Austin recently elected fellows of the American Association for the Advancement of Science (AAAS).

Vasquez, the James T. Doluisio Regents Professor in the College of Pharmacy, was recognized for pioneering contributions concerning genome instability, particularly by demonstrating that non-canonical DNA structures can be mutagenic, and for discovering new roles for DNA repair factors.

She identifies three areas of research focus on her website including:

• DNA structure in genomic instability and human disease.
• Molecular mechanisms of DNA damage recognition and repair.
• Novel strategies to modify gene structure and function in living organisms.

AAAS fellows are chosen annually by their peers to distinguish individuals who are members of the association cited for “efforts on behalf of the advancement of science or its applications which are scientifically or socially distinguished.”

Other UT Austin faculty members named as AAAS fellows include Richard Warren Aldrich and Stanely Roux (College of Natural Sciences) and Roger T. Bonnecaze and Aramugan Manthiram (Cockrell School of Engineering).

Erickson discusses advanced in alcohol research

Dr. Carlton Erickson, associate dean for research and graduate studies, wrote an article for The University of Texas at Austin website concerning advances in alcohol research over the past few years. The article also appeared on the opinion-editorial page of the Austin American Statesman on Jan. 26 and on the website of the Greater Austin Underage Drinking Prevention Council.

Stavchansky named outstanding alumnus

Dr. Salomon Stavchansky, professor of pharmaceutics, is one of four named to the Hall of Distinguished Alumni at the University of Kentucky’s College of Pharmacy. The awards’ presentation was conducted in late March.

Stavchansky, who received his Ph.D. in pharmaceutical sciences from the UK College of Pharmacy in 1974, has directed and participated in research concerning the development of analytical methodology for the measurement of drugs in biological fluids; the absorption, metabolism, distribution, and elimination of drugs from biological fluids in animals and man; and the evaluation and design of drug delivery systems. His pioneering work has resulted in more than 150 publications, 270 national and international presentations, and two book chapters.

Brown named to Faculty Council

Dr. Carolyn Brown, professor of health outcomes and pharmacy practice, has been elected to the university’s Faculty Council. She was one of ten professors and associate professors from throughout the campus selected in the Spring 2015 election. The Council is one of two governing bodies representing the faculty.

Hand weighs in on vaccine debate

Dr. Elizabeth Hand, assistant clinical professor of pharmacotherapy who specializes in infectious diseases and pediatrics, was quoted in an article appearing in the San Antonio Express News. The Feb. 9 article examined the incidents of students in area school districts who claim exceptions from required vaccines.
Parkinson gene link

*Discovery may aid battle against disease*

It starts as a slight tremor in a hand and gradually worsens.

Parkinson’s disease and parkinsonian disorders are the second-most common neurologic disease in the United States with more than half a million diagnosed cases. No cure currently exists, but a recent discovery by a research team in pharmacology and toxicology offers new hope.

Dr. Somshuvra Mukhopadhyay, assistant professor of pharmacology and toxicology, leads the research team that focused on the gene SLC30A10 and its role as a "door opener" in helping to remove elevated levels of manganese from cells. The study was published in an October issue of *The Journal of Neuroscience*.

"Manganese is essential for life, but elevated levels are toxic," Mukhopadhyay said, adding that excessive amounts of the metal eventually make their way into the blood stream and then to the brain where they kill neurons and cause parkinsonism.

The link is considered a major step in the process of finding an effective treatment for parkinsonian disorders, including Parkinson's disease, which affects more than a half million people in the United States alone. There is no known cure for any form of parkinsonism.

Parkinsonian disorders usually occur because of a combination of genetic and environmental factors. Exposure to the metal manganese is an environmental factor known to cause parkinsonism in humans. Manganese-induced parkinsonism is most often seen in individuals with documented exposures to manganese. Exposures may originate from occupational sources such as in welding and mining professions; through environmental sources such as consuming tainted drinking water and food sources; and as a result of disease such as cirrhosis of the liver and alcoholism, which block manganese excretion.

Prior studies of a cohort of European families that exhibited hereditary parkinsonism led earlier researchers to look at a genetic link. The families’ genomes were sequenced, leading to the discovery that all family members with the disease had mutations in SLC30A10. The gene was believed to be a key element, but its role and function were not determined.

Mukhopadhyay and his team discovered that the protein coded by the gene resides on the surface of the cell and works as a transporter to escort or remove excessive levels of manganese from the cell. Mutations of the gene, as seen in the research family, impede this function as they cause the gene to become trapped within the cell and thus fail in its work to transport excessive metals from...
the cell. Patients then retain excessive amounts of manganese within their cells and develop parkinsonism because of manganese toxicity.

"The gene basically acts as a door opener to release the excess metal from the cell," the researcher said.

Defining the function of the gene is critical, he said, adding that these findings provide a unique insight into how interactions between a genetic mutation (mutations in SLC30A10) and an environmental factor (manganese) come together to cause parkinsonism in humans. Researchers can now focus on developing effective treatments by developing drugs that enhance the efflux activity of the gene to treat patients who carry mutations in this gene. Such treatments also are expected to be beneficial for patients who suffer from manganese-induced parkinsonism stemming from exposure to elevated manganese but who do not have mutations in SLC30A10.

The UT Austin team worked in partnership with a team from the Albert Einstein College of Medicine led by Dr. Michael Aschner. Others from UT Austin involved in the study: Dinorah Leyva-Illades, a former postdoctoral student; Charles E. Zogzas and Caleb D. Swaim, graduate students; Jonathan M. Mercado, an undergraduate student; and Steve Hutchens, lab manager for Mukhopadhyay. Dr. Richard Morrissett, a professor of pharmacology and toxicology, provided technical expertise. This work was supported by a grant from the National Institutes of Health to Mukhopadhyay.

**Spreading the news**

Somshuvra Mukhopadhyay’s findings regarding the role of the SLC30A10 gene in Parkinson’s disease opens a new door of hope to the half million people who suffer from the disease as well as their families and friends. News of his research findings was selected to be shared via *The Academic Minute*, an audio production that highlights new and exciting research from professors at top institutions around the world. Mukhopadhyay’s piece aired in February, but can be accessed via The Academic Minute webpage found at [www.wamc.org/programs/academic-minute](http://www.wamc.org/programs/academic-minute)
Editor’s Note: Dr. Carlton Erickson internationally recognized for his work in both alcohol research and in helping to move breakthroughs in research into clinical practice. This article appeared in several publications early in 2015 including the Austin American Statesman.

Over the past 20 years, the quality of alcohol research has improved until it compares favorably with cancer, heart disease and other life-threatening diseases. Breakthroughs in genetics, neurobiology and neuropharmacology have led scientists to know that people who drink harmfully may develop a full-blown disease, leaving them unable to stop drinking without help. Many people drink too much to get high, to celebrate, or to overcome anxiety or depression. However, 10-15% of people who use alcohol develop the disease of alcohol dependence, commonly called “alcoholism”.

People who argue over whether alcohol dependence is a disease are like blind persons examining an elephant – they believe only the parts they touch. If people are familiar with the part of alcohol overuse that is the pain caused by an alcoholic parent, their belief is shaped by that experience. If they have been touched by their own alcohol use, that will define their understanding. Alcohol research has now firmly shown that one type of alcohol overuse is a definitive, diagnosable, brain pathology in the realm of epilepsy, Parkinson’s and Alzheimer’s. This means that one of the causes of what is popularly called “alcoholism” is a neuropsychiatric problem resulting from “dysregulation” of specific parts of the brain.

In the alcohol dependent brain, something goes wrong with the reward pathway so that nerve signals sent to the frontal lobes (judgment and impulse) are misinterpreted as encouragement to continue using the drug even though adverse consequences may be looming or occurring. Alcohol dependence results when the brain loses the ability to recognize that it is time to stop using alcohol. It is the same as a schizophrenic person losing the ability to dampen “internal voices”.

Alcohol dependence is different and far more serious than another diagnosable alcohol overuse condition – formerly called alcohol abuse. These problem drinkers fail to drink responsibly and show foolish, often illegal, behaviors. Problem drinking is a self-controllable condition that may be reduced by education, punishment, maturity, will-power or simply learning from an embarrassing or costly experience. Problem drinkers may need “tough love” to help them see how the behavior harms themselves and others. On the other hand, people who are alcohol dependent require powerful intervention and intensive treatment that can be expensive and prolonged. Research that has helped clarify the differences between alcohol dependent and problem drinkers has been massively underreported. For example:

- Diagnostic criteria published by the American Psychiatric Association can discern both mild to moderate alcohol use disorder (problem drinking) and severe alcohol use disorder (alcohol dependence).
- Overwhelming evidence indicates that the dependence brain disease can develop from early use as well as from long-term use of alcohol. Genetic vulnerability plus other psychological and environmental factors also play a role.
- Alcohol dependence responds well to treatments that have been developed and validated over the past 15-20 years. In fact, several studies show that for every dollar spent for treatment, seven dollars are saved due to reduced accidents, medical complications and injuries, and improvements in attendance, performance, and behavior in the workplace.
- Alcoholics Anonymous and similar 12-step programs have been researched so thoroughly over the past 10 years that they are considered to be evidence based or research-proven. In the future, insurance companies may reimburse reputable treatment facilities for using 12-step programs as part of their treatment plans.
- Anti-craving and abstinence-enhancing medications are sufficiently effective that they have helped significant numbers stay clean and sober, especially by preventing relapse. Continuing genetic studies are expected to provide even better reward system-targeting medications.
- Recent studies with brain scans suggest that 12-step programs and “talk therapies” such as counseling work to normalize the “dysregulation” of the brain’s reward pathway, involving a change in neurotransmitter systems that have gone wrong.

Research on alcoholism has been ongoing for more than 25 years in several colleges and departments at The University of Texas at Austin, including the College of

Continued on page 21
Young cited for Regents teaching honor

Dr. Veronica Young, clinical associate professor, is recipient of a 2014 Regents’ Outstanding Teaching Award from The University of Texas System.

Young, who also serves as director of interprofessional education and community engagement for the college, joins 26 other UT Austin faculty members in receiving the award, the highest teaching honor bestowed by the UT System Board of Regents. The Regents awards program is one of the nation’s largest monetary teaching recognition programs in higher education, honoring outstanding performance in the classroom and dedication to innovation in undergraduate instruction.

“We are so pleased that Dr. Young has been honored by the UT System Board of Regents in this manner,” said Dean Lynn Crismon. “Not only is she a dynamic classroom teacher, she also has been instrumental in engaging our student pharmacists in interprofessional community service experiences. She has emerged into a true leader for advancing the college’s goal to transform pharmacy education.”

Young said that developing interprofessional education and collaborative practice learning experiences are key components to transforming the culture of healthcare. The experiences, she stressed, should be meaningful experiences that fully engage students.

“Our goal is to empower students to work effectively together to deliver quality patient-centered and community-oriented care,” she said.

Interprofessional education occurs when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes. The goal is to prepare a collaborative practice-ready workforce dedicated to delivering high quality and safe healthcare.

Established in 2008, the Regents’ Outstanding Teaching Awards program recognizes educators who deliver the highest quality of instruction in the classroom, the laboratory, the field or online.

Faculty members undergo a series of rigorous evaluations by students, peer faculty members and external reviewers. The review panels consider a range of activities and criteria in their evaluations including outstanding teaching, mentoring, personal commitment to students and motivating students in the classroom.

Alcohol research

Pharmacy. Other academic institutions around the world, many in collaboration with UT, have contributed to our knowledge about the causes of harmful drinking; the genetics of alcohol dependence; the development of new medications to help individuals who cannot control their drinking; and social, psychological, and clinical correlates to basic science findings in this area. UT researchers are especially collaborating with their colleagues in health science and medical centers around the nation. Even more importantly, UT scientists teach undergraduate, professional, and graduate students, as well as the public, about these new findings. Great progress is being made in the attack on alcoholism, through the efforts of UT faculty to change the world.

For UT students experiencing problems with alcohol and other drugs, help is available through the Center for Students in Recovery, the only student program at the University aimed at “un-hooking” Horns.

Prospective students participate in MMIIs

In February, the college completed two weekends of interviews for prospective students seeking a place in the Class of 2019. For the first time, the college utilized the multiple mini interview (MMI) format in the candidate review process. A total of 232 candidates made their way through the interviews that were conducted by approximately 40 evaluators. A team of approximately 250 current students led by student leaders Tori Vaughan, Lilian Tran, Angelica Cuenco and Issac Perales assisted Dr. Rich Wilcox, assistant dean for admissions/advising and Ann Spencer, administrative associate in admissions, in organizing the event.
Patients admitted to hospitals in the U.S. during 2010 were twice as likely to have a potentially life-threatening bacterial infection than those admitted 10 years earlier, according to a study by Dr. Kelly Reveles, assistant professor of pharmacotherapy.

The study found that the incidence of Clostridium difficile infection (CDI), a highly contagious gastrointestinal disease often linked to the overprescribing of antibiotics, nearly doubled between 2001 and 2010. It also determined there were no improvements in patient health outcomes, including mortality or hospital length of stay, over the study period.

Dr. Reveles is primary author of the study that looked at 2.2 million cases of CDI from 2001 through 2010. Data were drawn from the U.S. National Hospital Discharge Surveys. Results of her work were published in the October issue of the American Journal of Infection Control under the title, “The rise of Clostridium difficile infection incidence among hospitalized adults in the United States: 2001 to 2010.” Highlights of her study were also printed in The New York Times.

According to the Centers for Disease Control and Prevention, CDI is one of the most common healthcare-associated infections. The UT Austin study found that CDI patients are most likely to be female (59%), white (86%), and older than 65 years of age (70%). Of the 2.2 million cases, about 7.1%, or 154,184 patients, died during the study period. The proportion of patients with CDI who died in the hospital increased slightly, from 6.6 percent in 2001 to 7.2% in 2010.

“Overuse of antibiotics is the primary risk factor for this disease,” said Reveles, adding that “up to 50 percent of all antibiotic use is unnecessary.”

Antibiotics are effective in combatting bacterial infections, but do nothing to fight viruses. Reveles said that when patients do not feel well, they often believe an antibiotic is needed and will ask their provider for a prescription. Most common respiratory illnesses are due to viruses. The use of antibiotics for these infections can lead to unnecessary side effects or the eventual inability of antibiotics to kill certain bacteria in the future.

Reveles said patients entering the hospital with a suspected infection are often given multiple antibiotics, known as “empiric therapy” to combat the suspected infection while healthcare workers attempt to identify the bacteria causing the infection. Once a diagnosis is made, hospitals sometimes are slow to pull back on the higher levels of antibiotics. Reveles said this is an area where pharmacists can play a big role as part of the health care team, by helping physicians choose appropriate antibiotics while limiting unnecessary use.

In a follow-up study presented as a platform presentation at the 2014 Interscience Conference on Antimicrobial Agents and Chemotherapy, Reveles found that the incidence of CDI is highest in the northeast portion of the country and lowest in the western region. This might be due to differences in antibiotic prescribing patterns or population characteristics, although Reveles said additional studies are needed to pinpoint reasons for the regional differences.

The human body uses “good bacteria” to function properly, the she said. For instance, good bacteria reside in the digestive tract to help break down food. Antibiotics can kill these bacteria and allow C. difficile to multiply in the gut. C. difficile can then cause severe diarrhea often accompanied by fever, as well as abdominal swelling and cramping.

CDI incidences were highest in 2008 and slightly declined for the last years that were reviewed, Reveles said.

“The leveling off of CDI incidence toward the end of our study period may be the result of increased antibiotic stewardship programs and improved infection control measures such as use of contact precautions, cleaning and disinfection of equipment and environment, and hand hygiene,” she said.

Hospitalized patients, their family members, and their caregivers can help avoid CDI by washing their hands upon entering a patient’s room. Reveles said patients also should understand that antibiotics are not always needed to fight many illnesses such as the common cold.

Reveles conducted the study as part of her Ph.D. program in translational sciences. She completed the program in August under the guidance of Dr. Chris Frei, professor of pharmacotherapy, and joined the faculty as an assistant professor shortly after completing her studies.

“Dr. Reveles has been an exceptional trainee and treasured asset for the institutions involved in the new Translational Science Ph.D. program,” said Frei. “She is a strong researcher and prolific writer, and her work holds great potential to transform the care for patients with healthcare associated infections, including CDI.”
College mourns two former faculty members

**Dr. Creed W. Abell III**
Dr. Creed W. Abell III, the Henry M. Burlage Centennial Endowed Professor Emeritus, died September 9, 2014.

Dr. Abell was internationally recognized for his contribution to neurochemistry and neurobiology. His work contributed to the scientific information and understanding regarding diseases such as Parkinson’s and Alzheimer’s and to the understanding of how aging affects neurological function.

He earned a M.S. from Purdue University (1958) and a Ph.D. from University of Wisconsin (1962) before completing a postdoctoral residency under the direction of the renowned cancer researcher, Dr. Charles Heidelberger.

He accepted a position with the U.S. Public Health Service in Bethesda, Md., before accepting faculty positions at the University of Oklahoma Medical School and the University of Texas Medical Branch at Galveston.

In 1986, he was named professor of medicinal chemistry at the College of Pharmacy. At UT Austin, he held the Henry M. Burlage Centennial Endowed Professorship in Medicinal Chemistry until his retirement in 2008 when he was named as the Henry M. Burlage Centennial Endowed Professor Emeritus.

He introduced new courses and launched a new program in neuroscience at UT Austin. His graduate course, Molecular Biology of the Nervous System, was the first of its kind at UT Austin and it served as one of the core courses in the College’s graduate program for many years. He helped pioneer interdisciplinary research efforts at UT Austin, serving as director of the Institute for Neuroscience from 1992-2004 and helped develop UT’s M.A. and Ph.D. degree programs in neuroscience.

He held several patents related to his work and was the author of more than 125 scientific research papers.

**Dr. Charles A. Walton**
Dr. Charles A. Walton, the William J. Sheffield Professor Emeritus, died July 31, 2014.

Dr. Walton devoted his professional life to the advancement of pharmacy through his initiatives in pharmacy education, his contributions to the development of clinical pharmacy, and his scholarly publications. He was a true visionary and evangelical leader who early in his career predicted a time when pharmacists would be providing direct patient care to patients and would be responsible for assuring that patients achieved positive health outcomes. He played a primary leadership role in establishing innovative, premier clinical pharmacy education programs in both Kentucky and Texas.

He earned a B.S. in pharmacy from Auburn University (1949), and M.S. (1950) and Ph.D. (1956) degrees in pharmacology from Purdue University.

He practiced as a pharmacist in both community and hospital environments before joining the faculty at the University of Kentucky College of Pharmacy (1952).

In 1973, he joined the UT Austin College of Pharmacy faculty where he was instrumental in establishing one of the country’s premiere post B.S. Pharm.D. programs with an integrated residency. The program had its academic home within the college in Austin, but its physical home was on the campus of the UT Health Science Center at San Antonio. The two UT institutions partnered to offer the joint Pharm.D. degree.

Walton was a founding member of the American College of Clinical Pharmacy; served on its first Board of Regents; was presented the organization’s Service Award; and was named as the first honorary ACCP fellow.

He served on the Board of Directors for the American Association of Colleges of Pharmacy and received the AACP Distinguished Pharmacy Educator Award.

**Honoring pharmacy’s finest**
Charles Walton and Creed Abell made significant contributions to pharmacy education as well as fields of research directly linked to pharmacy. You are encouraged to honor their service, by making a gift to The University of Texas at Austin College of Pharmacy.

To do so, go to www.utexas.edu/pharmacy and click on the Make a Gift icon at the lower right corner of the page. If you have questions concerning your gift or would like assistance with a gift or a pledge, contact the College’s Office of Development & Alumni Relations at (512) 232-1893.
By Eric Ho

I am a believer that it is impossible to achieve your dreams alone. Each of us holds aspirations both great and small – today I want to let my family know how much they mean to me, tomorrow I want to establish a lifestyle that lets me do so every day. Today you may seek to make sure your patients are touched in a positive way by your actions, tomorrow you may look for ways to impact many more lives or teach others how to take better care of their own patients. Little daily ‘asks’ quickly turn into great efforts when we begin to truly apply our passions to them over our lives. These tasks can certainly appear insurmountable when faced alone.

It is no mystery that pharmacists are encountering increasingly strong headwinds in pursuing their career and life goals. This is especially true for professionals changing into new practice areas and doubly true for new pharmacists first entering the field. However, alumni of The University of Texas at Austin College of Pharmacy are beneficiaries of one important boon that is unique to our great community – each other.

Fellow alumni are among your greatest resources. Whether you are in need of mentorship in an area of practice, a clearer view of the pharmacy landscape, or simply want to connect with likeminded individuals that share a common milestone, the Pharmacy Alumni Association and I would like to welcome you to join and stay involved with this most distinguished group of pharmacists.

Each of us has obligations beyond developing our professional lives. However, keeping an active tie with the college has frequently made many of the challenges and hurdles of my professional life easier to manage which, in turn, leaves more time for other pursuits. I have personally found time and time again that it is fellow UT alumni that are among the colleagues and mentors that have made the greatest impact in my life, and I would challenge you become a member of the Pharmacy Alumni Association and help support our great community and alma mater. If you would like to join, contact the alumni affairs staff at: vanderson@austin.utexas.edu.

The association recognizes that many of our alumni are already tremendously involved and so great effort is made to be present wherever there are gatherings of pharmacists across the country.

Find us at one these upcoming future events:
• New Student Orientation August 23-26
• Alumni reception at NCPA TBD in DC
• Alumni reception at AAPS meeting October 26 in Orlando
• Homecoming November 6 and 7

Join now! Stay involved! Hook’em Horns!

2014–2015 College of Pharmacy Alumni Association officers

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| Secretary-Treasurer | Lori Evans | Houston Reg. Rep. | Anne Nguyen |
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| Dallas Reg. Rep. | Student Body President | Student Liaison | Jillian Blackwell |
| Dallas Reg. Rep. | Austin, Texas | Austin, Texas | Assistant Dean for Development & Alumni Relations (ex-officio) | Susan Brown |
| Dallas Reg. Rep. | Assistant Director for Development & Alumni Relations (ex-officio) | Development Associate (ex-officio) | Elizabeth Cox |
| Dallas Reg. Rep. | Student Body President | Student Liaison | Jillian Blackwell |
| Dallas Reg. Rep. | Austin, Texas | Assistant Director for Development & Alumni Relations (ex-officio) | Virginia Anderson |
| Dallas Reg. Rep. | Development Associate (ex-officio) | Elizabeth Cox | Austin, Texas |
Paul Davis spent the majority of his life directing the spotlight on the profession of pharmacy. In April, pharmacy got an opportunity to turn the tables by recognizing Davis with a resolution presented by the Texas Legislature.

Davis, B.S.’70, retired in January 2014 after almost 45 years in the pharmacy profession. In 1972, he began service as director of public affairs for the Texas Pharmacy Association (TPA). He led the Kentucky Pharmacists Association from 1978 until 1986. Upon returning to Texas, Davis rejoined TPA and was promoted to its executive director in 1990.

The Texas Society of Health-System Pharmacists tapped Davis as its executive director beginning in 2003. Under his leadership, the organization enjoyed steady growth. He also became executive director of the New Mexico Society of Health-System Pharmacists.

He is recipient of the college’s William J. Sheffield Award, the TPA Leadership Award and the TSHP Distinguished Service Award.

Paul Davis, seated center, was honored by the Texas Legislature for his years of service to pharmacy. Pictured from left with Davis are: Larry Egle (TSHP president), Shane Greene (TSHP president-elect), Sidney Phillips (TSHP president-elect designee) and Emory Martin (TSHP immediate past president).

Save the Date
College of Pharmacy Homecoming
November 6-7, 2015

Alumni Reception & Awards Ceremony
Friday, Nov. 6 • UT Club President’s Room
Know deserving alumni who are good candidates for our awards? Read about past recipients and learn how to nominate someone for one of our awards at http://www.utexas.edu/pharmacy/dean/alumni/awards.html

Free Continuing Education
Saturday, Nov. 7 • College of Pharmacy
featuring
Gay Dodson presenting
Texas Pharmacy Law Update

Tailgate Party
Saturday, Nov. 7 • College courtyard
Pull out your burnt orange and come get ready to cheer the Longhorns on as they take on Kansas. Party begins 3 hours prior to kickoff with food, fun, and Longhorn Pharmacy fellowship. Don’t miss it.

Check our website for homecoming updates at http://www.utexas.edu/pharmacy/dean/alumni/homecoming.html

All alumni welcome!
Special recognitions to anniversary classes of 1965, 1975, 1985, 1995, 2005
China/Texas collaboration

Alumni gathering at AAPS meeting spark cooperative venture between two universities

In 1994, Chuanbin Wu, Ph.D. ‘99, came to the United States to pursue doctoral studies at The University of Texas at Austin with Dr. James McGinity. During that same period, Robert Williams, B.S. ‘81 and Ph.D. ’86, returned to teach at UT Austin. Drs. Wu and Williams launched, both a close friendship and a cooperative venture between two universities.

After working in industry, Dr. Wu returned to China as a professor in Sun Yat-sen University (SYSU) in Guangzhou, one of China’s top 10 universities. With Dr. Wu’s experience and the help of the Chinese government, his research lab developed rapidly and became one of the leading pharmaceutics research groups in China.

UT Austin annually hosts an alumni luncheon at the annual meeting of the American Association of Pharmaceutical Scientists for alumni to visit, share ideas and collaborate.

At the 2013 luncheon, Dr. Williams proposed a collaboration between the two universities, and the idea attracted Dr. Wu’s interest immediately. After discussing with the Sun Yat-sen graduate school committee, the proposal generated support from both universities. Soon after, Sun Yat-sen University founded its own AAPS student chapter.

At the 2014 AAPS meeting, Drs. Williams and Wu met with major faculty members from the School of Pharmaceutical Sciences in Sun Yat-sen University and finalized the agreement. The faculty members found great research similarities at both universities so collaborations began even during the brief meeting. This collaboration between AAPS student chapters sets a new model for AAPS student chapter activity suggesting great benefits to future research efforts.

Recently, the two groups had their first video conference with Drs. Williams and Wu introducing each university and pharmaceutics program. Faculty members and graduate students in each department discussed their individual research interest as collaborations were established. Plans were made for graduate students and faculty members to visit each other during the summer semester and to provide internships for graduate students to spend longer times at the other institution conducting research. Ultimately the collaborations are hoped to lead to joint grants and publications. The group decided to hold seminars every two months with up to four students giving research presentations. Dr. Williams and Dr. Hugh Smyth, another UT Austin researcher, may also open up their summer 2015 class marking the first time that Sun Yat-sen students could attend virtual classes.

After Drs. Williams and Wu initiated the collaboration, Guilan Quan, Yukun Gu and the SYSU’s AAPS student chapter adviser, Dr. Xin Pan, worked with UT Austin’s Siyuan Huang, Ping Du, Amanda Bui along with Dr. Smyth, UT’s AAPS student chapter adviser, to schedule the first video conference. It was the first time for SYSU to prepare for a remote conference. Guilan Quan and Yukun Gu worked several days continuously to test the system link with UT Austin, sometimes working far into the night to test the audio and video system due to the 14-hour time difference between the two universities. Finally, the success of the first meeting made everything worth it.
Alumni News

Alfredo Moreno, Jr., B.S. ‘40, died on Feb. 23, 2015 at age 95. He was only 20 when he finished pharmacy school, legally a minor, so he had to wait until his 21st birthday to be licensed as a pharmacist. He owned and operated Moreno’s Pharmacy in Beeville from 1946-1991. It was sold to HEB in 1991 and Alfredo became an HEB pharmacists working in Beeville and San Antonio. In September 2012, he completed 72 continuous, uninterrupted years practicing pharmacy and was recognized by the Texas Pharmacy Association as the oldest and longest active pharmacist in the state.

Tricia Meyer, B.S. ‘73, was cited to receive the Distinguished Service Awards for the Section of Clinical Specialists and Scientists at the 2014 meeting of the American Society of Health-Systems Pharmacists (ASHP). She was among six volunteer leaders cited by ASHP to receive the honor.

Justin Tolman, Pharm.D. ’05 and Ph.D. ’09, has been promoted to associate professor with tenure at Creighton University College of Pharmacy. Justin was one of the college’s first PharmD/PhD students. His emphasis is pharmaceutics.

Eric Ho, Pharm.D. ’12, was named to the Distinguished young Pharmacist Award by the Texas Pharmacy Association during the group’s annual meeting in 2014. The award recognizes a pharmacist who has graduated within the last 10 years and has demonstrated leadership excellence, made important contributions to their community, TPA, and the practice of pharmacy. The Award is sponsored by Pharmacist Mutual. Ho works at Paragon Infusion Care, Inc. of Dallas and lives in Addison.

Carolina Rodriguez, Pharm.D. ’14, received the Texas Pharmacy Association’s Distinguished Student Pharmacist Award at the 2014 annual meeting of TPA. She currently resides in Laredo, TX.

Several awards were presented to alumni at the annual meeting of the Texas Society of Health-System Pharmacists including the Leo F. and Ann Godley Residency Fellowship to Phuoc Anne Nguyen, Pharm.D. ’13; New Pharmacist Award to Christine Wicke, Pharm.D. ’12; Pharmacy Mentor Award to Steven Knight; Pharm.D. ’09; Larry C. Nesmith Pharmacist to Paul Davis, B.S. ’70; and TSHP Fellow status to Paul Holder, M.S. ’91 and Pharm.D. ’94.

Know someone special?
Each year the College of Pharmacy seeks nominations for awards that honor alumni and friends including the William J. Sheffield Outstanding Alumnus Award, the Legend of Pharmacy Award, the Distinguished Young Alumnus Award, and the Wm. Arlyn Kloesel Outstanding Preceptor Award. To make a nomination for any of the awards, go to http://www.utexas.edu/pharmacy/dean/alumni/awards.html

Keep in Touch

Whether it’s been five years or fifty since you walked the halls of the College of Pharmacy, we consider you part of our Longhorn pharmacy family and we want to stay in touch. Longhorn Pharmacy Focus, this publication, is our primary print communication tool. It is produced two times a year, roughly once in the fall and once in the spring. Increasingly, we rely upon e-newsletters and email to communicate. If we do not have your email address, please consider sharing it with us so that we can assure that you have the latest news from the college. Send your name and contact information to Susan Brown at skbrown@austin.utexas.edu. We want to hear from you - the who, what, where and when of your life. New job, new location, family changes. Send us your news and we’ll share in the next issue of Longhorn Pharmacy Focus.

Finally, we turn to social media including web pages, Facebook and now Twitter in our attempt to keep you informed about the exciting news and ongoing activities at the college. Find us:
On the web at http://www.utexas.edu/pharmacy/
On Facebook at https://www.facebook.com/TexasPharmacy
and now
On Twitter at https://twitter.com/UTexasPharmacy
Addressing Psychiatric Pharmacotherapy Topics for Today’s Practice
This conference’s goal is to improve the quality of care delivered to people with mental health problems by providing timely and clinically useful information for the practicing clinician. Conference speakers focus on the practical application of neuroscience principles and evidence-based approaches for the treatment of serious and persistent major psychiatric and neurologic disorders, including depression, schizophrenia, bipolar disorder, and dementias. Participants are provided with treatment advances in the psychiatric pharmacotherapy of children, traumatic brain injury, substance abuse, and an update on new psychotherapeutic uses of existing agents and new psychotropic agents that will impact your practice in the next year.

Who Should Attend? • Interprofessional Program
Pharmacists, psychiatrists, physicians, nurses, psychologists and social workers who specialize in or have an interest in neuropsychiatric disorders and wish to enhance their awareness and knowledge of the most recent advances impacting contemporary practice. 15 CPE Credit Hours

“"The UT Psychiatric Pharmacotherapy Update began 27 years ago to address an unmet need for high quality continuing education for psychiatric pharmacy specialists. It has grown to a regional interprofessional educational meeting that addresses the psychiatric pharmacotherapy needs for a variety of mental health professionals in Texas as well as from other states. We are proud that the UT College of Pharmacy has been able to provide leadership in providing high quality pharmacotherapy education for mental health professionals.”

M. Lynn Crismon, Pharm.D., Dean & James T. Doluisio Regents Chair and Behrens Centennial Professor, The University of Texas at Austin College of Pharmacy

APhA’s Delivery Medication Therapy Management Services Certificate Training Program
The University of Texas at Austin College of Pharmacy is a licensed instructional partner of APhA’s Delivering Medication Therapy Management Services Certificate Training Program (MTM). The College is now offering MTM programs in two locations:

Austin, Texas
Saturday, May 2, 2015*
Saturday, June 27, 2015*

San Antonio, Texas
Saturday, June 6, 2015*

The University of Texas at Austin
UTHSCSA

* Note: Must Complete Self-Study Program prior to live seminar. Recommended to register at least two weeks prior to the seminar.

Visit the Website: http://www.utexas.edu/pharmacy/ce/conferences/mtm/

The University of Texas at Austin College of Pharmacy is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.
Upcoming CPE Programs from The University of Texas at Austin College of Pharmacy

PPS
Pharmacy Practice Seminar
Austin, Texas • 15 CE Credit Hours

Visit the Website: http://www.utexas.edu/pharmacy/ce/conferences/pps/
DoubleTree North Hotel in Austin, Texas on Saturday and Sunday, September 26th and 27th, 2015.

Join over 560 pharmacists and pharmacy technicians for our annual CPE seminar. Program provides tools and knowledge that can be immediately applied upon return to practice. The seminar offers up to 15 contact hours of ACPE accredited pharmacy continuing education.

Who Should Register
The Pharmacy Practice Seminar (PPS) is designed for pharmacists and pharmacist technicians practicing in a variety of settings, including but not limited to: community/retail (chain and independent), hospital, clinical, pharmaceutical industry, academia, and government/regulatory practices.

Pre-Seminar Programs: September 25, 2015 • 6:00 PM

Immunization Update
3.00 Contact Hours

IV Update*
3.00 Contact Hours

*IV Update meets new TSBP rule (291.133) requirement for specific CE to maintain IV certification.

Online CPE
The University of Texas at Austin College of Pharmacy now offers CPE educational activities online. Now you can take quality CPE programs facilitated by top ranked UT Austin faculty whenever you like.

Over 20 Online CPE Courses to Choose From!
Check the full CPE online catalogue at:
http://www.utexas.edu/pharmacy/ce/

Texas Pharmacy Law Update • Online Activity
3.00 CPE - Gay Dodson, R.Ph
The 2014 Texas Pharmacy Law Update covers recent changes in regards to Texas Pharmacy Law in the past year and updates by the Texas State Board of Pharmacy. TX Board of Pharmacy Rule: This activity may serve as a Texas licensed pharmacist or pharmacy technician’s requirement of “1 hour of CE related to Texas Pharmacy Laws or Regulations for renewals received after 5/1/13”, as recently required by the Texas State Board of Pharmacy.
0367-000-14-018-IND-81T

The University of Texas at Austin College of Pharmacy is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.
Pharmacy has been a great career choice for Marissa Schlaifer, B.S. ’87 and M.S. ‘92. She spent her childhood in California before relocating with her family to Texas for high school.

When it came time for pharmacy school, she considered the University of Southern California but was deterred by the cost. She turned her sights to UT Austin and has never looked back.

“Having earned two degrees from the College of Pharmacy, I am keenly aware that a pharmacy education, even one of such quality at found at UT Austin, is richer by experiences outside of the classroom and laboratory,” she said.

That’s why she is establishing an endowment to support student professional development.

“I am thankful to the UT College of Pharmacy for giving me the education, the resources and tools that have allowed me to accomplish what I have in my career,” she said. “Without my pharmacy degree, I would not have enjoyed the career accomplishments that I have - which in turn mean that I would not have had the financial means to enjoy the life I do including traveling to almost every UT football game home and away.”

Schlaifer, who currently serves as head of policy for CVS/Caremark, continued, “I also realize that it’s not just my pharmacy degree that has given me great opportunities - but it’s the experiences I had while in pharmacy school and the pharmacist role models that I had the opportunity to meet. While at the college, I received funding to attend numerous annual meetings. Each one of those meetings expanded my view of what opportunities existed with a degree in pharmacy.”

“I met Gay Dodson at a Kappa Epsilon conference and learned the importance of more administrative ways to practice the pharmacy profession,” she said. “Marv Shepherd introduced me to the possibility of graduate school. My aspirations were formed by the pharmacists I met through the opportunities that the College of Pharmacy brought me.”

The college remains one of the most affordable programs of study for pharmacy students, still the cost is sometimes challenging.

“While my pharmacy education was in my family’s financial means, attending multiple extra-curricular conferences not required for graduation was not,” she said. “Without the funding from the Dean’s discretionary funds provided by donors, I would not have had the opportunities that led me to where I am today.”

“With the cost of a pharmacy education today being so much of a challenge, I realize that it is a challenge just to pay tuition - and that many students are accomplishing this through student loans. I want to do my part to allow students to participate in professional association meetings that I consider essential to their development as a professional,” she said.

“I’d love to know that at least one student (and hopefully many more) ends up on a career path that was influenced by something they learned or someone they met at a professional association meeting that they might not have been able to attend without funding from this endowment,” she concluded.
July
10 TPA meeting begins, The Woodlands, TX
10 COP reception at TPA meeting

August
24 New Student Orientation
25 Gone to Texas
26 First Day of Fall Classes

October
10 NCPA meeting begins, Washington, DC
25 AAPS meeting begins, Orlando, FL
26 COP reception at AAPS meeting

November
6 Alumni Reception/Awards Ceremony
7 Homecoming Tailgate Party

December
4 Last class day
23 Winter break begins

College Quick Reference

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CONGRATULATIONS CLASS OF 2015!

Look for full coverage of graduation exercises from the Class of 2015 in the Fall issue of Focus.