The Two Dr. Zics
My European crime spree

BY WAYNE WOOD

S
ince I believe that promoting international peace and goodwill is one of the most valuable things an American citizen can do, I should probably stay home for a while.

On a recent trip to Europe, in only 10 days I had two brushes with the law, which is about two brushes more than I’ve had in about the last 20 years or so in the U.S.

My wife Sharon and I, along with our friends Susan and Susan, had been planning this trip for a while, and we had a lot of things figured out. We were going to land in Munich, Germany. We were going to stay at a family inn in the Carinthia region of southern Austria for a couple of days, and then go on to Vienna and Prague, before returning to Munich.

Since some of the places we planned to go were away from big cities, we decided we would go in together and rent a car, rather than travel by train.

“More freedom!” we thought.

“More opportunity for police interaction!” we discovered.

The most serious incident, as measured in dollars (or, more accurately, Czech crowns), occurred as we were merrily driving down the autobahn connecting Prague (where we had been) with Munich (where we were going).

I was driving, and, as those of you who have driven on vacation trips know, it is always the driver’s responsibility to conduct periodic Bathroom Need Surveys of those in the car. Based on an extensive BNS, there was a consensus that it would be a good idea to stop soon, and I pulled off an exit and into a gas station.

This foolish and reckless action drew the attention of a couple of police officers in a nearby van who were lying in wait for tourists to flee diligently keeping this gas

continued on page 12
Art show at One Hundred Oaks showcases talent of Vanderbilt employees and family members

BY WAYNE WOOD

The “Vanderbilt Employee and Family Art Show” at One Hundred Oaks, features art with a Vanderbilt connection—every piece is done by either an employee, or a family member of an employee.

The work named Best of Show was the abstract painting “Kay” by Doris Wasserman, whose husband, David Wasserman, Ph.D., is Ronald E. Snato Professor of Diabetes Research and professor of Molecular Physiology and Biophysics.

The exhibit, featuring 110 works, will be at Vanderbilt Health One Hundred Oaks through Jan. 4, 2011.

It is sponsored by the National Arts Program, which was founded in 1983 to encourage and identify artistic talent in the U.S., and which provided prize money. The program partners with other organizations for its exhibits, and this show at One Hundred Oaks is a partnership with Vanderbilt through VUMC’s office of Cultural Enrichment.

The show, in its second year, was judged by Vanessa Baker, a part of the Admission team at Watkins School of Art, Design and Film; Jim Hoobler, Senior Curator of Art and Architecture at the Tennessee State Museum; and Deborah Walden, a contributing writer for the Nashville Arts Magazine.

The judges not only chose Wasserman’s piece as Best in Show, but named winners in various categories for professional artists, intermediate artists, and amateurs, as well as teen and youth categories.

Here are the winners:

Best of Show: Doris Wasserman, wife of David Wasserman of Molecular Physiology and Biophysics

Professional:
1st Place: Robert Vantrease, Marketing
2nd Place: Susan McGrew, Pediatrics
3rd Place: Bharati Kakkad, Clinical Pharmacology
Honorable Mention: Kim Nielson

Intermediate:
1st Place: Carly Swindell, daughter of Bridget Swindell of Allergy, Pulmonary and Critical Care
2nd Place: Saundra Motley, Institute for Medicine and Public Health
3rd Place: Myra Renee Dwyer, family member of Miranda Knapp of Radiology
Honorable Mention: Ellen O’Kelley, Judson Newbern

Amateur:
1st Place: Xiaotao Lu, Pediatric Infectious Disease
2nd Place: Walter Jermakowicz, Medical Scientist Training Program
3rd Place: Lynn Christman, Medical Specialties Clinic
Honorable Mention: Guy Winzenburger, Sally Bebawy

Teen:
1st Place: Jenna Milinsky, 16, daughter of Jennifer Milinsky of the VMG Business Office
2nd Place: Kelsey Hoggard, 16, daughter of Jiao Hoggard of Interpretive Services
3rd Place: Benjamin Taylor, 15, son of Susan Taylor, a nurse at Monroe Carell Jr. Children’s Hospital at Vanderbilt.
Honorable Mention: Lucy Qu

Youth:
1st Place: Stacey Xiang, 10, daughter of Zixiu Xiang of Pharmacology
2nd Place: Zoe Kendall, 10, daughter of Amy Kendall of Biological Sciences
3rd Place: Rachel Rabalais, 11, daughter of Denise Rabalais of Strategic Development
Honorable Mention: Jiming Tu, Lu Zheng

Best of Show: Doris Wasserman at the Employee Art Show reception at One Hundred Oaks.

1st Place Teen: Jenna Milinsky receives her award at the Employee Art Show reception.

2nd Place Youth: Zoe Kendall poses with her painting entitled “Flowers.”
One is a physician and associate dean of the Medical School.
The other is a horse.

BY LESLIE HILL

Conventional wisdom says never to look a gift horse in the mouth, but on a normal day seeing patients in the clinic, John Zic, M.D., found himself staring down at a literal gift horse, not quite sure how to react.

His patient Beth McDaniel and her husband, Roger, had just proudly presented Zic with a manila envelope. Inside he found a glossy 8x10 photo of a racehorse striding for the finish line.

“I thought they were giving me a horse,” he recalled, the shock still evident in his voice. “The first thought that ran through my head was ‘My wife is going to kill me’ because we have nowhere to put a horse.”

The McDaniels quickly explained that they were the horse’s owners and had named it Dr. Zic in honor of their physician.

“I really didn’t know what to say. You’re always honored when a patient even brings in a case of peaches from their farm or cookies for the staff. But this is really on a different level,” said Zic, associate professor of Dermatology at Vanderbilt University Medical Center and associate dean of admissions at Vanderbilt University School of Medicine.

Since learning about the namesake, Zic’s family and colleagues have followed the horse closely, making it necessary to use distinctions like “Dr. Zic, the horse” and “Dr. Zic, the man.” It helps that Dr. Zic is a chestnut filly, meaning the equine Dr. Zic is not a he, but a she.

When naming a racehorse, the owners usually play on a variation of a famous horse in its lineage or give it a family name. Several of the horses on the McDaniel’s farm are named mostly for grandchildren—Riki McD, Julia’s Star, Benny Boy, Princess Nadia and Bad News Sophia (because “bad news travels fast”). But Roger had always admired Dr. Fager, a famous racehorse from the 1960s, and wanted to do a similar name. The short, snappy “Zic” was the perfect fit.

“I’m honored that the McDaniels would name such a beautiful horse after me, and it’s been fun to watch the horse perform and race,” Zic said. “I grew up on the south side of Chicago. The closest thing to horseracing was an off-track betting facility four miles from my house, but this has certainly tweaked my interest.”
Zic said many patients from Kentucky have brought a newspaper with race results to their clinic visit, wondering if their doctor owns a racehorse. His roommates from college also noticed there was Dr. Zic running in a race on Kentucky Derby day and sent e-mails to inquire.

“I still don’t think they believe my patients named their horse after me,” he said ruefully.

**A scary diagnosis**
The McDaniels are both from Lexington, Ky., the Mecca of horseracing, but are relatively new to the business. Roger was in the electronics industry and the family lived all over the country, but it had always been his dream to own a horse farm back in Lexington.

“We had no experience whatsoever, but my husband is a businessman. Before we even bought the farm, he did a business plan just like he would do with anything else,” Beth said, and in 2005, Derby Lane Farm was born.

Around the same time, Beth began to have mysterious itching on her trunk. She saw specialists around the country, but no one could find a solution.

“They said maybe I’m allergic to type-26 blue dye or propylene glycol. It just went on and on and on,” she said. “Then I moved to Lexington, and it got really bad—the itching and redness and infection. Here I was moving into a new neighborhood and I wanted to hide.”

Finally a doctor in Lexington referred her to Zic who made the diagnosis—cutaneous lymphoma. In this relatively rare cancer, T or B lymphocyte cells (white blood cells) become cancerous and infiltrate the skin.

Beth’s cancer was at stage 4, and she needed to begin treatment immediately, but first had to choose where. On the recommendation of her daughter-in-law’s godfather, a director at the National Cancer Institute, Beth came to Vanderbilt to see Zic.

“He told me Dr. Zic was one of the top three people in the world and reasonably close to me, so this would be the perfect place,” she said.

Later when their trainer Joan Scott suggested the McDaniels purchase a promising filly she found in Florida, they knew just who to name her after.

**A gift from the winner’s circle**
Dr. Zic surprised everyone by winning her very first race at Keeneland under jockey Calvin Borel, a three-time Kentucky Derby winner. And she just kept winning.

“Dr. Zic won quite a bit of money, and my husband wanted to get me something for my birthday. I kept saying I have everything I want, so he came up with the idea that we would give to Vanderbilt,” Beth said.

Their gift was split in half between a fund for immediate use and an endowment so the funding opportunities will continue in the future.

The funds support cutaneous lymphoma research, including the work of two new Dermatology faculty members, Laura McGirt, M.D., and Jeffrey Zwerner, M.D., Ph.D., who are chomping at the bit to research the disease.

“There have been great strides in diagnosing the disease earlier and some significant discoveries in new treatments but we need more,” Zic said. “Patients with advanced disease are at higher risk for developing serious infections, and as with most cancers, the more advanced the disease, the fewer options we have to help those patients.”

Zwerner has a special interest in the pathologic markers that might predict outcomes in patients with cutaneous lymphoma, while Zic focuses more on clinical outcomes research. McGirt will be spending the majority of her time doing bench top research in the immunology and genetics of cutaneous lymphoma.

“I think the three of us together will complement each other’s interests and hopefully will lead to some exciting discoveries. The timing really couldn’t be better with two new faculty joining the division,” Zic said.

“It really shows how generous the McDaniels are. They are not just interested in helping themselves but in helping others by giving Vanderbilt researchers the resources they need to make discoveries.”

“My thinking is that it probably won’t help me,” Beth said, “but maybe my kids might have this disease and it would help them. I don’t want anybody else to go through this misery.”

**It really shows how generous the McDaniels are.**
**They are not just interested in helping themselves but in helping others by giving Vanderbilt researchers the resources they need to make discoveries.**
Cutaneous lymphoma is a broad term that encompasses many variants. They typically present with a chronic rash in a sun-protected area, as opposed to most skin cancers, which present in a sun-exposed area. The rash can resemble eczema or psoriasis, which is why it can take as many as six to 10 years to get a diagnosis. Approximately nine patients per million per year develop the disease.

“The hallmark of this disease is that you itch to death,” Beth said. “My skin is often red all over and it dries and peels constantly. I feel as if I have full-body dandruff.”

Treatments include chemotherapy agents that are mixed in ointments and applied to the skin and phototherapy that bathes the patient’s skin in ultraviolet light.

When the cancerous cells enter the bloodstream, treatment progresses to photopheresis, which is what Beth undergoes once a month in addition to traditional chemotherapy. The patient’s blood is circulated through a machine that bathes it in ultraviolet light, which causes some lymphocytes to die. As the dying cells are infused back into the body, it triggers an immune response and the malignant cells are killed off.

**A wonderful horse**

With her treatment under way, Beth is now focused on overcoming a surprising fear—horses.

“When we first bought the farm I wouldn’t even pat the horses. You always hear about them biting and kicking,” Beth said.

But Dr. Zic is changing that.

“She is just so gentle and sweet and is such a wonderful horse. I’ll go to the barn to pat her and she’ll nuzzle me.”

Now Beth is taking riding lessons with the goal to one day ride in a show.

After her initial burst of success, Dr. Zic had to be taken out of racing for nearly a year after an operation to repair an ankle injury. Now she is in great shape, and won a Grade I stakes race at Keeneland this spring, upsetting favorite Informed Decision, who was undefeated in seven races on synthetic surfaces. (Grade I stakes are the most prestigious races, on par with the Kentucky Derby and Belmont Stakes.)

The McDaniels have pledged future winnings from Dr. Zic to the cutaneous lymphoma research fund.

“Dr. Zic may never win another race in her life, but we plan on adding to the fund when she does,” Beth said.

“It’s such an honor to have this recognition by one your patients, but it’s also very humbling,” Zic said. “I still smile whenever someone mentions it.”

And now he knows exactly what to do with a gift horse—watch it round the final turn and race for the finish, cheering all the way.
New book by Vanderbilt Eskind Diabetes Center clinicians highlights patients

Stories of LIVING WITH DIABETES

BY RHONDA KELLEY

Forty patients—all with different circumstances, backgrounds and treatments each have one common story to tell: living with diabetes.


“Our hope is that the millions of people who don’t have diabetes, but have family, friends, or co-workers affected by it and don’t understand what it’s like to live with diabetes, will have a renewed appreciation for how challenging it is to manage it well,” Wolfe said.

The book contains personal narratives, based on taped interviews from the perspective of the patient, spouse, parent or child. It highlights living with diabetes from many different angles: various types, coping, severities, as well as looking at the complexity and challenges of living with the disease. The chapters organize the stories around topics such as the role of family and diabetes, the social context of control, and the clinician and patient.

Brown and Wolfe first began job sharing in 1982, working with Graber. The authors spent 25 years working together as an endocrinologist and two nurse practitioners treating diabetes patients.

In 1986, while in private practice, the authors organized one of the first outpatient American Diabetes Association-recognized patient education programs in the country. They later worked together for many years at the Vanderbilt Eskind Diabetes Center. In 2006, Graber first introduced the thought of the book and they began meeting weekly to toss around ideas.

The project was initially meant to be a book on patient scenarios but quickly changed to become a compilation of stories to give a voice to people who have lived with diabetes.

“We identified a patient that we thought had an interesting story.” Wolfe said.

“This book is a quality product written by a wonderful group of people who have been here over a decade,” said Tom Elasy, M.D., medical director of Vanderbilt Eskind Diabetes Clinic.

“As a clinician, I love how it reminds me of the importance of [the idea that] the first principle is the actual person, and the second principle is they have diabetes. The ability to enter into their story and appreciate the context of where they come from is part of the richness of caring for people.”

Health care students can also benefit from the book. Although not meant to be a textbook or a how-to guide, it contains a list of references, a glossary and explanations of medical jargon and terms. Students in training can easily develop a compassion for diabetes patients through the stories of their journey with the disease.

Brown says the stories are informative for all.

“We hope patients see they are not the only ones struggling and they can take some comfort from people in the book and even get a few laughs,” she said. “It is also for people to read that do not have diabetes. The general public doesn’t understand the process diabetes patients go through to be normal. We wanted to help give a voice to some of the people with diabetes so the people without it can know what the patients go through day in and out.”

Elasy notes that several stories in the book give the reader an insight into the importance of family and community.

“In the Eskind Diabetes Clinic, we have accelerated personalized approach in the midst of caring for a population, because we consider how to care for a population and individual personalized care simultaneously,” he said. “We are focused on how to improve on personalized care and this book helps with the individualized piece. We place a tremendous emphasis on improving both.”

Both Brown and Wolfe are currently heavily involved in diabetes clinical research, teaching, and patient care in the Eskind Diabetes Clinic. Graber has now retired, although he continues to actively participate in diabetes activities.

“A Life of Control: Stories of Living with Diabetes” is available at Vanderbilt University Press, Amazon, and Middle Tennessee bookstores.

Anne Brown RN, MSN and Kathleen Wolfe RN, MSN, along with Alan Graber, M.D., have written a book about Diabetes titled “A Life of Control, stories of living with diabetes.”
“What I like is the opportunity to explore and think about all these things that, in the surgical world, I don’t have the opportunity to think about.”
is not brain surgery

And that’s part of its appeal for Vanderbilt neurosurgeon Robert Singer, who has turned his passion for musical instruments into a company

BY PAUL GOVERN

In 2002, having recently undergone board certification as a neurosurgeon, Robert J. Singer, M.D., sat down at his kitchen table with some butcher paper and a few drafting instruments and began designing electric guitars.

Once he had completed a dozen designs, he engaged a factory in Korea to make the prototypes.

That’s how Waterstone Music Instruments was launched. The company has since brought out several lines of guitars and bass guitars, all designed or co-designed by Singer, the founder and CEO.

Singer’s subspecialty is neurovascular surgery, mainly interventions for stroke. He joined Vanderbilt in 2008, after residency at Vanderbilt, fellowships at Stanford and Harvard and a number of years in private practice in Nashville. He loves neurosurgery.

“I’m really lucky. It’s a lot of work, but I get to do something that I always really wanted to do and I always feel very fortunate.”

His entry into the guitar business was an outgrowth of lifelong interests in music, art and design. Singer started out as a drummer, age 6, on his older brother’s trap set; he played saxophone in elementary school, picked up trombone and tuba, then moved to bass guitar in his junior high’s jazz ensemble. In junior high he listened to progressive rock and jazz, admiring bassists like Jaco Pastorius of Weather Report and Chris Squire of Yes.

On the advent of punk and the Walking Sprinklers

In 1978, punk broke. Singer was in ninth grade.

“What I liked in musicianship, punk was antithetic to. I suppose, at that age, it fit. It was so rudimentary and rebellious. I was captivated by the spirit and intensity of it all right down to the shaved head.”

Throughout school, “Instead of just going to the party I got to play, which I always preferred. It gave me something to do.”

In chronological order, the names of Singer’s bands were: Power Test, the Ernie Douglas Project (his first punk band), The Walking Sprinklers (“that one was pretty popular”), The Antidotes, The Nylon Choir, The Fertile Crescent, and, with fellow medical students, The Bezoes.

“Then that was it. No more playing out because it got too busy.”

Singer has an abiding interest in art history, particularly abstract expressionism and its offshoots. (He took art history and studio art classes at Iowa, thinking he might end up as an art historian or curator. But then he got deeply into biochem and followed a family tradition when he opted for medical school.) There are no diplomas on the walls of Singer’s office in Medical Center North. “I don’t like to look at a bunch of certificates with my name on them. My neurosurgical training was about a lot of dedicated people and institutions.” Instead, there are photographs of building facades, one from each campus where Singer took medical training.

About 10 years ago, Singer began frequenting the Gibson custom shop here in Nashville, learning more about guitar design and construction. He had never stopped collecting guitars (his collection now numbers some 85 instruments). When guitars by one of the designers represented in Singer’s collection showed up in an Austin Powers movie, Singer e-mailed his congratulations and he wound up making friends with the designer, who happened to be an oral surgeon in Philadelphia. This friend encouraged Singer to take the plunge and launch his own company.

Singer works with makers at factories in Korea and China. During a design phase, after rounds in the hospital, he’ll return to his office and hop on Skype for videoconferences with factory foremen across the Pacific.

“Everything is of course derivative,” he says, and offers an example from his design portfolio: “Gibson, for example — the L5, the Country Gentleman; I’ve taken that basic shape then rounded it here, shortened the lower bout a little here. You look at it and say that balance doesn’t seem right, so I’ll redraw it.

“What is it about a guitar that makes it beautiful — it’s a matter of your interpretation, it’s not anything else. So I look at it and say, that appeals to me. And then you just hope that it appeals to someone else.”

Singer also experiments with different finishes and with the placement of electronic pick-ups. “Then you make a prototype and decide if it works or not. We hand them to artists, they play them, and we decide.”

Different from surgery

Waterstone sells around 200 instruments per year. The warehouse is in Marathon Village, near downtown Nashville. Singer employs a staff to handle marketing, sales, artists relations and instrument setup. The marketing strategy is based on getting instruments into the hands of touring musicians.

“You’ve got to be cognizant of the fact that you’re often selling to a young demographic, and they can fixate on whatever so-and-so is playing on stage. That’s what sells instruments. It works out well; we get to meet a lot of young bands, a lot of people who are very, very talented.

“I’m definitely not making a lot of money at it. I’d love for that to happen—who wouldn’t?—but what I like is the opportunity to explore and think about all these things that, in the surgical world, I don’t have the opportunity to think about.

“I have a great job as a neurosurgeon and I love it. The basic rule about Waterstone is that it’s about fun. If it’s not fun then it’s not going to happen. That’s liberating to me.”

November 2010 11
station stop free of criminal elements.

Before I could even get out, the officers, a tall skinny guy and a shorter, chunkier one, were walking around the front of the car, each with a major case of Serious Policeman Face.

They motioned for me to roll down the window. They asked to see my passport, which the chunky guy took back to their van—I’m sure for safekeeping.

Although their English was certainly better than my Czech, it was a little difficult to understand what they were asking about, so they produced a brochure with helpful multilingual translations.

Bottom line: there was a sticker I was supposed to have on the windshield to allow me to drive in the Czech Republic. This sticker had not been mentioned by the car rental agency, nor by the hotel, nor by anybody where we had previously bought gas in the Czech Republic, nor by anybody we had talked to about our plans to drive in the Czech Republic.

We had one for Austria. But we did not have one for the Czech Republic.

“Es problem,” explained the skinny cop.

Amazingly, the gas station at which we were parked sold the sticker in question. Why, I could just walk right in and buy one! Which I did.

More amazing still, I could pay my fine directly to the policemen! Which I did.

They seemed very eager for me to use a credit card to pay the fine, but I said I preferred to pay in cash and keep my credit card numbers to myself.

The fine came to 500 Czech crowns, he said, and the sticker cost 500 crowns, too, which came to about $60 U.S.

While this was going on, Sharon and the Susans were keeping an eye on the car, taking the license number of the police van, and, as best they could, keeping tabs on my passport, which, after the fine was paid, and the fresh new sticker was affixed, the officers returned with a smile.

“Es minimal fine,” the skinny cop assured me. “Could be much high.”

I’m sure it could have been. I was guilty. I needed a road tax sticker, and I didn’t have one. It still felt like a shake-down. We were all wishing we had just waited another 40 miles to take a break; we would have been in Germany.

This incident is in distinct contrast to my other brush with European law enforcement, which occurred in a small village in Austria.

We had flown all night, landed in Munich, picked up our car, driven for hours (including a long delay due to tunnel repairs in the Alps), and now it was dark and we were searching for the two-lane country road that led to our inn, a family-run inn, restaurant, tavern, farm, orchard, and schnapps distillery (!) where we had reservations.

And I was driving slowly, while all four of us in the car were swiveling our heads around looking around for one of the landmarks leading to the inn, a bus stop. Somebody spotted a likely road, and I made a quick turn into it. We were driving up this narrow road plotting our next move when I saw the blue lights in the mirror.

The Austrian policeman asked for my license, which he frowned at, and the car rental papers, which he frowned at some more.

But having apparently assured himself that the car was not stolen, and I was not drunk, only lost, he decided to let me off with a lecture.

“My English not very good,” he said. “But you were driving like a silly boy!” That’s right: I was detained in a foreign country on suspicion of DLSB. I was probably guilty of that, too.

He then gave us directions to our inn and wished us a good night.

I’m looking forward to getting back to Austria some day. The country was beautiful, the people friendly, the food and drink were delicious. And that positive impression, improbably, started with blue lights in my rear view mirror.

---

**Flu Shots Continue at a Variety of Medical Center Locations**

- Flu vaccine is available in the Employee Health Clinic, 640 Medical Arts Building, from 8 a.m.–5 p.m. Other locations around campus for shots may be found on the Flu Shot Event Calendar at [http://occupationalhealth.vanderbilt.edu/uploads/ohcFluCalendar.pdf](http://occupationalhealth.vanderbilt.edu/uploads/ohcFluCalendar.pdf). A Vanderbilt ID badge is required.

  For a complete calendar of locations for faculty and staff to get a flu vaccine throughout flu season, go to [http://occupationalhealth.vanderbilt.edu](http://occupationalhealth.vanderbilt.edu).

---

Vanderbilt employee Amy Cox gets a flu shot from Occupational Health nurse Lisa Sisk outside the Eskind Library.