



Medical School

Department of Medicine

Peter Igarashi, MD · Department of Medicine · Nesbitt Chair and Head



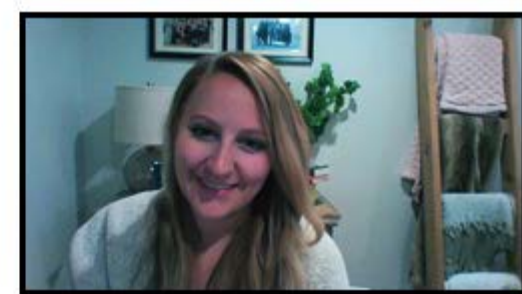
Chair's Corner

Dear Medicine Colleagues,

This issue of the DOM newsletter is largely devoted to updates on the department's work in diversity, equity, and inclusion (DEI). The last three months since the murder of George Floyd on the streets of Minneapolis have been a time of intense self-reflection, anger, protest, and renewed commitment to anti-racism and social justice. The recent vandalism of the George Floyd Memorial by a University of Minnesota medical student has re-opened wounds and hurt our community. It can seem hopeless and never-ending. Yet, I am optimistic about the future. The Department of Medicine has a long track record of providing care for the diverse patient populations in our community; the Community-University Health Care Center and Phillips Neighborhood Clinic are just two examples. Our faculty are national leaders in refugee and immigrant health and research to understand and address healthcare disparities. Two-thirds of our residents are women or underrepresented minorities, which bodes well for the future. And, our Office of Faculty Affairs and Diversity has sponsored DEI initiatives such as the DRAW and WERC awards, the BRIM study, and visiting speakers in topics such as cultural-sensitive mentoring. I invite you to read more below and visit our new DEI website to learn about these exciting activities. I am proud to be the first person of color to serve as chair of medicine at the University of Minnesota. We have much to do, and I look forward to working with each of you to produce tangible and durable improvements. Finally, we close this newsletter with an update from the Minneapolis VAMC and a tribute to Dr. Jimmy Li. Thank you for all of your contributions to the department. Stay well.

Peter

Office of Faculty Affairs and Diversity



Top: Mohamed Hassan, Anne Joseph
Middle: Cuong Pham, Anne Marie Weber Main
Bottom: Michon Peterson, Emily Kowalczyk

OFAD Diversity Activities

In the wake of George Floyd's murder, the Office for Faculty Affairs and Diversity has worked to accelerate DOM initiatives relating to race and racism. Mohamed Hassan (GI) and Cuong Pham (General Internal Medicine) have played a key role in these activities. Projects have included writing a mission statement for DOM:

The University of Minnesota Medical School, Department of Medicine, is committed to promoting diversity, equity, and inclusion as an essential strategy to support all members of our academic community: faculty, trainees, staff, and the patients and communities we serve. We strive for a culture of inclusive excellence in which our commitment to the core values of equity and diversity are reflected in all of our clinical care, research, education, and service activities.

We have a working list of DOM commitments to diversity, equity and inclusion (DEI) issues that can be found [here](#). There is a new [DOM DEI website](#) that will feature stories on health disparities research and advocacy activities going forward.

A major development is the creation of a new DOM leadership position, Vice Chair for

Diversity, Equity and Inclusion. The new Vice Chair will help develop and oversee DEI efforts across the Department's education, clinical, research, and service missions. The Vice Chair will work with other leaders in the Department, Medical School, health system, and community to promote and advance innovative ideas, programs and initiatives making diversity, equity, and inclusion a foundation of excellence. DOM will form a Search Committee by the end of August to help fill the new position. The position description should be posted in September, after the Search Committee finalizes the position description.

DOM Affinity Group Listening Sessions

The DOM held its first zoom Affinity Group Listening Sessions for faculty in the Department of Medicine who self-identify as Black, Indigenous, or Persons of Color (BIPOC) on Thursday, July 16. Thanks to all those who were able to join the group. We were fortunate to have Virajita Singh, the Assistant Vice Provost in the Office of Equity and Diversity for the University of Minnesota, help facilitate safe conversations about life in the last several months in the context of COVID-19 and the murder of George Floyd. The conversation was an opportunity for BIPOC faculty to foster connections across divisions. The BIPOC Affinity Group plans to meet approximately monthly to continue this conversation. The next meeting will be September 15th. We hope to build other listening sessions to include more faculty and trainees and discuss topics such as implicit bias, anti-racism work, and health equity.

Our office is looking into various social intranet programs, such as RESOURCE and Slack, to create a space where ideas can be shared but not create a large quantity of emails. On one of these platforms, we would create a forum regarding a specific topic and our faculty would be able to subscribe and collaborate with others that have similar interests. More to come on this.



DOM Advocacy: Minnesota Doctors for Health Equity (MDEQ)

Division of General Internal Medicine faculty Michael Aylward, Aarti Bhatt, Ryan Kelly, Cuong Pham, and Elizabeth Rogers have worked in their spare time over the past few years as founding board members of [Minnesota Doctors for Health Equity](#). MDHEQ is a statewide coalition of physicians and other health professionals working toward equity in health for all Minnesotans, and its mission is to educate health professionals to work toward health equity. It is founded on the belief that everyone deserves to live a healthy life, and that health equity for all Minnesotans is possible when the root causes of poor health are addressed, such as poverty, racism, gender inequity, climate change, and limited access to health care. MDHEQ sees that every physician is charged with doing their part in addressing these issues.



MDHEQ officially became a 501c3 non-profit organization in January, 2020, and currently has over 200 members. The current board and membership span the state, health care systems, and different medical specialties. MDHEQ's current priorities include addressing structural racism in health care, advocating for paid family and medical leave, decreasing sugar-sweetened beverages in children's meals, improving access to housing and to healthcare, and promoting voter registration. Besides providing networking events for members, MDHEQ has offered a wide range of educational opportunities, including on areas such as implicit bias, how to effectively engage with the media, caucusing, sugar-sweetened beverages, structural racism, and access to opioid addiction treatment. MDHEQ members have met with community groups, been invited to testify in front of the legislature, spoken at press conferences, provided local media interviews and advocated for change within their health systems. Multiple op-eds and speaking engagements by members have spotlighted equity issues that affect health. Most recently, MDHEQ's letter in support of declaring racism a public health crisis was signed onto by eight other MN physician organizations before being sent to the Minnesota House, who passed a similar resolution, authored by Rep. Ruth Richardson, in July. The organization is partnering with [VotER](#) to provide easy-use toolkits so that health systems and clinics can support patients in registering to vote. In August, MDHEQ was part of the [Civic Health Month](#) collaboration to promote civic engagement through health care. If interested in joining, you can find more information at mdheq.org. You can also follow on Twitter [@md4healthequity](#) and Facebook www.facebook.com/MDHEQ/.

DOM Faculty DEI Spotlight: Mumtaz "Taj" Mustapha, MD

"Taj" Mustapha, MD has been appointed Diversity, Equity & Inclusion Education Lead for the Office of Academic Clinical Affairs (OACA). Dr. Mustapha has been at the University of Minnesota since 2005, beginning as a resident in our combined Internal Medicine and Pediatrics residency program, subsequently serving as a chief resident, and then joining faculty in 2010 as a Medicine and Pediatrics Hospitalist and medical educator. Through the multiple educational leadership roles she has held (Medicine Clerkship site director for UMMC, Associate Program Director for the Med-Peds program, Faculty Advisor in the Medical School and the Director of Clinical Coaching for the Medical School) she has always had a keen focus on optimal learner outcomes and equity. Her engagement with learners at the UME and GME level allowed her to



see issues in the learning environment that prohibit optimal learner outcomes across the continuum. This led to her academic work investigating discrimination and harassment in the clinical learning environment, as well as developing and piloting both systemic and educational interventions to promote a more inclusive workplace. Additionally, she gained a better understanding of the flaws in current assessment systems that contribute to educational performance and evaluation disparities, and is currently working on developing assessments using anti-

racist frameworks.

Medical School Vice Dean for DEI, Ana Núñez, MD

Ana Núñez, MD (pictured le) and her partner , Jill Foster, MD

We look forward to the arrival of the new Medical School Vice Dean for DEI, Ana Núñez, MD. Dr. Núñez is a general internist and held a similar position at Drexel



University; we are excited that she will be faculty in our Department. She is a nationally recognized medical education and health services researcher, and has developed curricula across the health professional training spectrum including topics such as sex and gender medicine, trauma/violence prevention and cultural competence. She has served as principal investigator on numerous educational and health services grants, including directing Drexel's nationally designated Center of

Excellence in Women's Health. Dr. Núñez serves on a number of national advisories including the National Science Foundation/NIH Smart & Connected Health (SCH) Program, the Technical Expert Panel (TEP) for Achieving Health Equity in Preventive Services Project and the National Association of Chronic Disease. OFAD and the entire DOM look forward to the arrival of Dr. Núñez in late August, and to collaborating with her on our new initiatives.

Department of Medicine Research News

In this issue we recognize several investigators in the Department of Medicine whose research promotes Diversity, Equity, and Inclusiveness, supporting the development of strategies that will mitigate the scourge of social and economic injustice. Notable examples in the Department of Medicine are highlighted below:

Dr. Elizabeth (Beth) Rogers, Assistant Professor in the Division of General Internal Medicine, is a health services researcher who seeks to identify, understand, and address obstacles safety net clinics face in providing care for adults with chronic conditions made more complex by social vulnerabilities. Dr. Rogers recently reported on the factors associated with colorectal cancer screening among Lao-American

immigrants in Minnesota (PMID: [31098763](#)). Dr. Rogers is currently funded by an NIDDK K23 that uses a framework of patient “workload” and “capacity” to understand the experience of patients with type 2 diabetes receiving care in safety net primary care clinics in engaging in clinical care and in self-management. She also has a WERC award to examine the role of treatment burden on diabetes self-management in patients with limited English proficiency. With this understanding, her team will develop and pilot test an intervention engineered to reduce patient workload and treatment burden, augment patient capacity, and thereby optimize patient-centered care for medically and socially complex patients with type 2 diabetes.

The Health Equity Leadership & Mentoring (HELM) program, led by **Dr. Sue Everson-Rose**, supports and promotes a diverse faculty workforce at the University of Minnesota. The mission of HELM is to enhance the academic excellence and leadership capacity of diverse faculty and health disparities researchers at the University of Minnesota to reduce health inequities. HELM is designed for junior faculty and postdoctoral trainees from backgrounds under-represented in academia and/or those doing health disparities or health equity-related research. With consistent support from the Office of Faculty Affairs, HELM has offered focused career mentoring 1-on-1 with a senior faculty member, access to nationally recognized scholars and leaders in health equity and diversity, and monthly seminars devoted to professional development as well as topics that specifically connect to many of the unique challenges faced by our Fellows owing to their backgrounds and research focus. To date, HELM has supported over 70 Fellows from across the University of Minnesota, a majority of whom are from racial/ethnic minority groups and/or NIH-designated health disparity populations. HELM uses a culturally responsive model of mentoring and leadership development to provide training and opportunities for the HELM Fellows. For more information and to apply to be part of the next cohort of HELM Fellows, please see the [HELM](#) link.

Dr. Carolyn Bramante’s clinical and research interests center around obesity treatment and prevention for children and adults. She researches ways to assist daily behavior change at home, as well as other weight management interventions. Dr. Bramante recently published data from a survey conducted in person in internal medicine waiting rooms asking patients if they owned a scale for self-weighing, and if they would be willing to own a scale and self-weigh for weight management. They found that persons of color and patients in a clinic serving a low-income urban population, were least likely to own a scale, and most likely to have obesity. Dr. Bramante also reported that patients were willing to own a scale, self-weigh, have their weights transmitted to the clinical setting, and receive reminders to weigh. ([DOI: 10.1111/cob.12363](#))

Dr. Cuong Pham with his research assistant Koushik Paul have been working with the urban Native American community and local Native serving non-profit organizations in the Twin Cities to better understand how to treat opioid use disorder in primary care clinics with a family and cultural-centered lens. Their research integrates the community as equal research partners via wisdom sharing within an indigenous Community-based Participatory Research (CBPR) framework where Indigenous youths are trained as qualitative coders and Indigenous elders are advising on the

interpretation of qualitative interviews to highlight critical gaps in outpatient addiction care delivery. Thus far, the interviews featuring patients, family members and providers have highlighted recurring themes of racism, historical trauma, criminal justice, multigenerational poverty, housing instability, and lack of culturally responsive treatment which have caused and perpetuate numerous health inequities in opioid use disorders in Minnesota.

Drs. Adams Dudley and **Paul Drawz** and individuals from health systems from across the state along with other organizations including MN Community Measurement and the Institute for Clinical Systems Improvement have formed the MN EHR Consortium. The group utilizes EHR data for research and quality improvement efforts and reports to the Minnesota Department of Health on COVID and COVID like illness on a weekly basis. The MN EHR Consortium has an interest in addressing health disparities. They have obtained funding from Dean Tolar to engage with communities adversely affected by health disparities to identify ways to 1) enhance the Consortium EHR data and 2) improve the collection of social determinants of health data through the EHR. The goal of these efforts is to facilitate research and quality improvement efforts to better understand and reduce health disparities. They have also applied for funding from NIH to utilize Consortium data to inform COVID testing efforts with the goal to target testing outreach to vulnerable populations and communities disproportionately affected by COVID.

Peter Crawford, MD, PhD · Vice Chair for Research

Paul Drawz, MD · Associate Chair for Clinical Research

Updates from the Minneapolis VA Health Care System (MVAHCS)

Dr. Areef Ishani, Chief of Medicine, Service Line Director, Primary & Specialty Care Medicine

In Memoriam

Dr. Jian-Ming Li, Director of Cardiac Electrophysiology, Associate Program Director for Clinical Cardiac Electrophysiology and Professor at the University of Minnesota, died suddenly on June 12, 2020, at his residence in Eagan, Minnesota.



Jian-Ming, known as “Jimmy” was born on September 24, 1962, at Jilin City, Jilin, China. Dr. Li graduated with a BS in Biochemistry from Nanjing University in 1982. In 1983, as one of 60 students selected for a US-China CUSBEA exchange program, he went to the University of Texas Southwestern Medical School in Dallas and earned a PhD in Biochemistry in 1988. His dissertation was titled, “The N-terminus of the tRNA methyltransferase contains both nuclear and mitochondrial signals”. This led to a publication of his seminal work in

‘Science’ on reversal of the orientation of an integral protein of the mitochondrial outer membrane in 1992. Dr. Li earned his MD and CM (Master of Surgery) at McGill University in 1995. In medical school, he studied the relationship between the L-type Ca channel and hypertension by using molecular cloning technique. This research

won him the Medical Scientist Award from the Heart and Stroke Foundation of Canada (three times). In 1994, he won the Young Scientist Award from the 15th International Society of Hypertension and in 1995, he received the Sandoz Research Excellence award. 1998, he completed his Internal Medicine residency at the University of Toronto and in 2002 he completed the Cardiology and Cardiac Electrophysiology fellowship at the University of Texas Southwestern Medical School. He then joined the Minneapolis VA Health Care System and established the Cardiac Electrophysiology and Fellowship program while taking it to an International level. He was the past president of the Association of Minnesota Chinese Physicians and of the Chinese American Heart Association. His research interests included the mechanism of sudden cardiac death and the effect of cardiac resynchronization therapy. In April 2013, he received the “Outstanding Contribution Award,” from the Chinese Heart Rhythm Society for his role in advocating pacemaker infection awareness and management in China. In November 2013, he received the American Heart Association Hero Award for his outstanding contribution to cardiovascular care and research.

Jimmy was passionate about teaching fellows which lead to many accolades including, Best Teacher Award. His main strength was in bridging the gap between major international societies with his tremendous interpersonal skills including serving as an ambassador of Heart Rhythm Society, Ambassadors’ Counsel for Asia-Pacific. He brought in new ideas in education and health care and authored many publications. More importantly, Jimmy was even a better person than he was an academician. He was respectful, humble, held no bitterness or resentment and was always grateful. His brilliant smile and infectious laughter uplifted the spirits of everyone around him. He was a social magnet who had friends throughout the world.

Jimmy’s last talk was on June 10, 2020, an online meeting titled “Cardiovascular Therapeutics Summit Conference”, (CTSC 11th 2020). He was addressing an audience of 37,631, showing his dedication and energy until his last moments. Jimmy did not stop working until his last moment.

He is survived by his father, two brothers, a sister and loving wife, Min Hu. He was also a devoted and loving father of two daughters, Stephanie Li and Lori Li.

Clinical Mission · COVID-19 Pandemic

The Minneapolis VA Health Care System expanded its intensive care and medical-surgical beds; we added an Acute Respiratory Care Clinic; developed processes for screening and triaging patients at the front door, and attended countless hours of meetings to develop standard operating procedures in response to the COVID-19 pandemic. This was done under the guidance of Infection Control, Infectious Disease and the Service Line Physician and Nursing leadership. To date, we have diagnosed and treated 166 COVID (+) veterans and 47 COVID (+) employees. We continue to prepare for more veterans infected with the SARS-CoV-2 virus as and are preparing to fulfill the fourth mission which is to accept community COVID (+) patients who are not veterans.

Research Grants, Articles, Publications & More

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