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Making a Big

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AMERICAN SOCIETY OF TRANSPLANTATION

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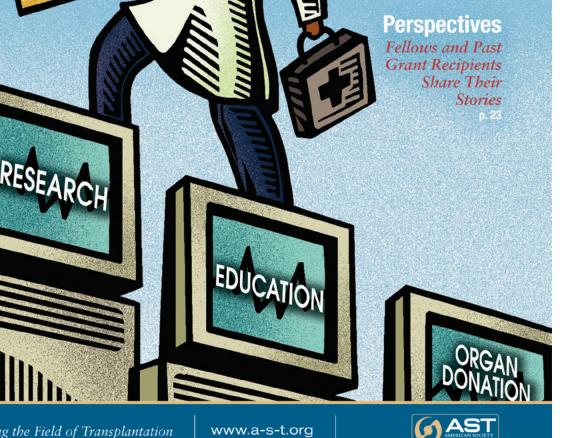
Improving Human Life by Advancing the Field of Transplantation

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Leads the Way p. 20 **AST Gets** Political

Changing the Way We Learn:

AST & Online

Education

AJT Mobile App

A Busy Year on the Hill p. 6

Feeling LOST in the crowd at BIC meetings? Tired of the SAME old, same OLD?

End the madness and attend the AST Annual Scientific Exchange

- Present your work and get critical feedback from senior investigators
- Extended abstract presentations and Q&A time
- Smaller sessions with expert commentaries linking basic and clinical science

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AST Annual Scientific Exchange





December 1-4, 2011 · San Antonio, TX

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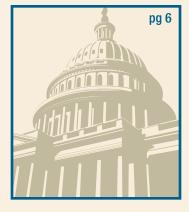
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Staff

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Executive Vice President - Susan J. Nelson, CAE snelson@ahint.com

Executive Director - Libby McDannell emcdannell@ahint.com

Director of Meetings - Tina Squillante, CMP tsquillante@ahint.com

Senior Accreditation & Project Director - Courtney Wright, MBA cwright@ahint.com

Director of Membership - Beth Maher emaher@ahint.com

Meeting Manager - Kristin Brammell, CMP kbrammell@ahint.com

Administrative Director - Terri Hague thague@ahint.com

Meeting & Registration Coordinator - Liz Piegzik lpiegzik@ahint.com

Membership Coordinator - Melissa Covici mcovici@ahint.com

Committee & Project Coordinator - Christine Stamm cstamm@ahint.com

Media & Public Relations - Kelly Lange klange@brownsteingroup.com

Chief Learning Officer - Floyd Pennington, PhD ctlassoc@mindspring.com

Government Relations Directors -William Applegate and Christopher Rorick bill.applegate@bryancave.com

Design and Production

Production Manager - Laure McClellan

Art Director - Mark Denato

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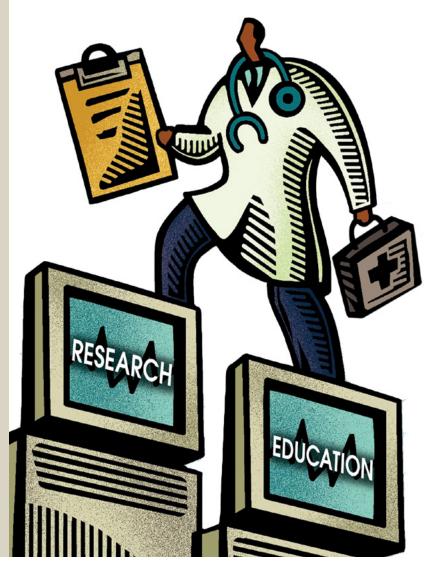
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The American Society of Transplantation, founded in 1982, is an international organization of professionals dedicated to advancing the field of transplantation and improving patient care by promoting research, education, advocacy, and organ donation.

From innovative networking opportunities, to providing exceptional transplant education in a variety of forums, to its strong presence on Capitol Hill, AST is committed to providing benefits that are relevant to its members.

AST also supports a wide range of basic and clinical research by providing grants to young investigators and junior faculty.

AST members are united in their commitment to excellence, ethics, compassion, innovation and inclusiveness.





AST Magazine 2011

Letter from the President



Dear Colleagues,

Thank you for the opportunity to serve as AST President these past 12 months. I trust you would all agree that we have seen some exciting things occur, both within the AST and in the field of transplantation.

The highlights for me have been our collaborative efforts with other societies, our strategic involvement in public policy matters, and the expansion of our Communities of Practice model. Specific highlights in each of these areas are outlined below.

Collaboration

Increased collaboration with other transplant stakeholders was a key theme in 2010-2011. We hosted our first joint meeting with the European Society for Organ Transplantation (ESOT) in October and hosted a Joint Distinguished Fellows Symposium and Joint Clinical Research Symposium with the Canadian Society of Transplantation (CST). Discussion is ongoing regarding collaborations with ESOT, CST and other organizations in future years.

We continued to work closely with the ASTS to advocate for transplantation on Capitol Hill and at Federal Health Care Agencies. Our efforts included joint visits to the Agency for Healthcare Research & Quality (AHRQ) and the Centers for Medicare & Medicaid Services (CMS) as well as joint letters to the Department of Health and Human Services (HHS) and the Health Resources and Services Administration (HRSA). We are also working closely with the ASTS in the area of Biovigilance as it relates to improving the safety of organs for transplantation without becoming overly cumbersome and resulting in a decline in organ availability.

As AST President, I attended portions of two ASTS Council meetings, and in February, ASTS President Dr. Michael Abecassis attended a portion of our AST Board meeting. Over the past year, we have truly expanded AST/ASTS collaborations beyond the American Transplant Congress and the *American Journal of Transplantation*, and it is my sincere hope that such collaborative efforts will continue and expand in the future.

Public Policy

Public policy continued to be a major focus of the Society this year. In September, members of the AST Public Policy Committee and I traveled to Capitol Hill to meet personally with 20 members of the U.S. Senate and House of Representatives. In February, the AST Board met with key legislative offices involved in health policymaking in the new Congress. Society leaders also met with the Secretary of Health and Human Services (HHS) Kathleen Sebelius and presented her with the AST Policy Leadership Award.

This year, AST expanded its reach beyond Capitol Hill and provided counsel to state legislatures and governors on transplant-related issues. We formed a coalition to encourage Governor Jan Brewer (R-AZ) to restore Medicaid coverage for many Arizonans awaiting a life-saving transplant. These efforts helped lead to a restoration of transplant services that were previously eliminated as part of the State's FY 2011 budget. And in the state of Mississippi, the AST was the first national organization to issue a statement requesting that Governor Haley Barbour (R-MS) delink the suspension of Gladys Scott's prison sentence from her willingness to donate a kidney to her sister.

Communities of Practice

2010 saw the addition of three new Communities of Practice: Liver/Intestinal, Diagnostic and Trainee/Young Faculty. These communities enable us to adequately represent diverse disciplines and to grow our membership. Even more importantly, they allow contributions to be made by an increased number of members.

The Society has continued to support research and education in the field of transplantation but has found the funding of these efforts to be increasingly challenging in the current fiscal climate. The AST Board continues to discuss "bold and visionary" ways to provide for the needs of our members and our field.

It has been my great honor to lead the AST this past year and to have had the opportunity to work with other AST members, AST staff and leaders of other organizations to advance the field of transplantation. I pledge my ongoing support to the AST and know that under the leadership of Dr. Robert S. Gaston, the Society will continue working toward the realization of our vision statement, "Improving Human Life by Advancing the Field of Transplantation."

Maryl Johnson, MD

Maryl R. Johnson, MD AST President 2010-2011



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Support the Future of Transplantation

Contribute to the AST Endowment Fund



In these difficult economic times, AST's Endowment Fund continues to support promising transplantation research that otherwise would not have been funded.

It also supports the training of the next generation of talented transplant professionals through the annual Fellows Symposium.

Past recipients confirm the critical role of AST's endowment-funded grants:

6 6 The AST grant supplied critical support during my early academic career to assist in maintaining and evolving basic research efforts.
 9 9
 – Mark Rigby • Assistant Professor, Departments of Pediatrics and Surgery, Emory University

6 The AST grant provided me with the necessary time to develop my project and usher it to completion. It helped open doors when I was searching for an attending position.
 9 Jennifer Jackson • Assistant Professor of Pediatric Nephrology, University of Kentucky

Visit the AST website to donate online and do your part in providing resources for transplantation research and education. Every gift makes a difference.

100% of your contribution goes directly to the Endowment Fund.



Awards & Grants

The Changing Landscape of Research Funding

In our history, physicians and scientists have expanded and advanced the field of transplantation through many significant discoveries. One of the earliest and most significant examples is Dr. Joseph Murray's groundbreaking surgical experiments that opened wide the field of solid organ transplantation and ultimately led to a Nobel Prize for Dr. Murray. Many years into its existence, the transplant field is now faced with a critical shortage of organs for transplantation, an inability to prevent the chronic loss of organ function, and reliance upon toxic, nonspecific immunosuppressive medications in order to prevent acute rejection. Each of these challenges must be faced within basic science laboratories focused on fundamental questions in transplantation immunobiology.

The ability of our transplant scientists to meet these basic challenges is seriously threatened. Over the past few years, funding for basic science research in the United States has been sharply reduced and the National Institutes of Health (NIH) budget remains at an all-time low. The result of the funding reduction is that many transplant scientists can no longer sustain productive laboratories and are leaving the field of basic laboratory investigation. We have entered an era of scientific chaos and decline driven by the loss of publicly funded research.

The answer to this crisis is not simple, nor is the eventual outcome. Support for transplantation research in particular can come in the form of increased funding through the American Society of Transplantation (AST). Supporting research is a key mission of AST, and there are several funding mechanisms provided through its Endowment Fund as well as generous pharmaceutical support. These efforts will hopefully increase in order to prevent the loss of the vital members of the transplant team, physicians and scientists dedicated to transplantation research.

Although the funding available for research from the pharmaceutical industry has declined, the AST has continued to support the invaluable efforts of transplant scientists and has committed support essential for investigators at critical times in their careers through funding from the Endowment.

To support the future of transplantation, visit **http://annualgiving.a-s-t.org**. Donations are tax deductible and contributions fund promising transplant research and the training of the next generation of talented transplant professionals.

The AST research portfolio has been very successful in retaining investigators in the field. Since 1995, the Society has administered more than 150 fellowship and faculty grants. The success enjoyed by these investigators is attributed in part to the assistance provided by the AST Grants Program. The number of grant applications received by the AST increases annually, but the number of grants available to provide support has declined in recent years. The Society needs help to prevent the loss of one of the members of the transplant team – the transplantation scientist. This help can come from increased industry support or from contributions from generous professionals like you.

96 AST grant recipients were surveyed. Of the 70% who responded:

- 64% are currently involved in basic science research
- 12% are currently involved in clinical science research
- 21% are currently involved in both basic & clinical science research
- 20% received NIH funding
- 42% received other funding
- 18% received funding from both the NIH & other sources

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Public Policy

From D.C. to Arizona to Mississippi: AST Lobbies for Patient Rights

The AST Lobbying and Government Relations Program dug deep over the last 12 months at both federal and state levels as the health care landscape and reform continue to evolve.

* The AST president and leadership met with the Secretary of Health and Human Services (HHS) Kathleen Sebelius to discuss national health reform, the essential health benefit, and key federal transplantation oversight issues.

* AST is meeting with HHS Assistant Secretary Howard Koh, MD, to further ensure that new regulations governing transplantation have adequate impact directly from the Society's experts.

* AST has led strong government relations campaign efforts in the State of Arizona to combat and restore drastic patient transplantation cuts by Governor Jan Brewer. In addition to direct lobbying of the Governor and State Legislature, the Society has worked closely with local centers, patient organizations, and Democrats and Republicans in the Arizona State House. These efforts helped lead to a restoration of transplant services that were previously eliminated as part of the State's FY 2011 budget.

* The AST president was asked by leaders in the Arizona Legislature to join them and represent the transplant physician community at a press conference on the steps of the Capitol in Phoenix.

* AST is the only national organization to officially oppose the Mississippi governor's release of two state prisoners in return for their agreement to serve as kidney donors to one another. The Society worked with the Mississippi Governor's office and with national governors' organizations to advise against this policy.



Secretary of HHS Kathleen Sebelius Receives Leadership Award from AST President Dr. Maryl Johnson, President-Elect Dr. Bob Gaston, Public Policy Committee Co-Chairs Drs. David Cohen and Barbara Murphy, and AST Director of Government Relations Bill Applegate.

* AST met with Republican and Democratic congressional leaders regarding key legislative and agency (clinical and research) issues impacting transplantation, including decision-makers Senate Deputy Majority Leader Dick Durbin (D-IL), House Majority Leader Eric Cantor (R-VA), House Ways and Means Committee Chairman Dave Camp (R-MI), and Senate Finance Committee Chairman Max Baucus (D-MT).

* AST Board of Directors and Public Policy Committee met personally with more than 50 members of the U.S. Senate and House of Representatives to ensure that AST has a seat at the table for all health care reform implementation discussions that may impact patients and physicians.

* AST was called upon directly by more than 30 different congressional offices and several governors and state legislatures during the last year to provide expert analysis and statistically valid data regarding questions and inquiries regarding solid organ transplantation.

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* AST communicates the transplant community's concerns directly to the directors of the CDC, FDA, and other key agencies on new federal rules addressing biovigilance, patient concerns, allocation, etc.

* AST works closely with new leaders in Congress to re-introduce and continue to support expanded immunosuppressive coverages for patients.

* AST collaborates with and jointly leads the Transplant Roundtable, a coalition in Washington, D.C. of all national transplant stakeholder organization lobbyists, brought together to coordinate and streamline state and federal advocacy messages and joint effectiveness exercises.

* AST represents transplant community concerns and views regarding the importance of transplant research within NIH, NIAID, NHLBI and NIDDK. These strong efforts have included coordinated activities with NIH and direct lobbying of the U.S. House and Senate federal funding committees.



AST Public Policy Committee meets in the U.S. House of Representatives Rayburn Building before dispatching to targeted meetings with Senators and Representatives serving on key Health Care Committees.

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Congressman Pete Stark (D-CA), ranking member, House Ways and Means Subcommittee on Health, receives award from AST Public Policy Committee leaders for his years of support for organ donor and patient transplantation initiatives.

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FELLO IN SYMPOSIUM on Transplantation Medicine

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September 23-25, 2011 Hilton DFW Lakes Conference Center • Grapevine, Texas

The AST Fellows Symposium offers an in-depth and interactive study of both clinical transplantation and basic transplant immunobiology while offering unparalleled access to expert faculty.

TRAVEL GRANTS AVAILABLE

Fellows, residents, trainees, pharmacists and non-doctoral allied health professionals – apply for one of the limited number of travel grants to attend the AST Fellows Symposium.

Registration & Travel Grant Request Deadline: Monday, August 1

www.a-s-t.org/fellows

The Power of Partnership

2010-2011 was a year of partnerships for the AST. The focus on building collaborative relationships was integral to improving the effectiveness of efforts related to education, advocacy, research, and organ donation awareness.

Stronger relationships have been formed through collaborative meetings hosted with the European Society for Organ Transplantation and the Canadian Society of Transplantation. The shared philosophy and common goals with these organizations will likely lead to continued partnerships in the future.

"Alone we can do so little; together we can do so much."

- Helen Keller

In addition to our collaborations abroad, we continue to forge new partnerships with our sister society, the American Society of Transplant Surgeons (ASTS).

On the public policy front, the AST and ASTS worked closely together as a unified voice on several State and Federal issues affecting the transplant community and our patients this past year. Key collaborative efforts included:

- Joint letters to the Department of Health & Human Services (HHS) and the Health Resources & Services Administration (HRSA)
- Joint meetings with key government and regulatory agencies including the Agency for Healthcare Research & Quality (AHRQ) and Centers for Medicare & Medicaid Services (CMS)



- Joint comments on UNOS proposals throughout the year
- Taking a stand against transplant cuts for Medicaid patients in Arizona and providing counsel to the Mississippi Governor's office regarding the imprisoned sisters and their release based upon a living kidney donation.

The AST and ASTS government relations teams have also worked to further strengthen the Transplant Roundtable, a coalition of more than a dozen national transplant stakeholder organizations involved in government relations.

These collaborations strengthen the work of the Society and provide added value to the community and members.

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MEMBERSHIP



Getting the Most Out of Your AST Membership Contributions by

James R. Spivey, MD

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When funding is tight and every expense is scrutinized, some of us are forced to take a long, hard look at our "extracurricular" activities. The AST Board of Directors and Membership Committee are committed to making sure that no member ever questions his/her decision to become or remain a part of AST. We're constantly looking for ways to make your involvement with the AST even more beneficial, both professionally and personally.

This past year, we've forged new partnerships with the American Society of Nephrology (ASN), the European Society for Organ Transplantation (ESOT), and the Canadian Society of Transplantation (CST), and we've continued to strengthen our partnership with the American Society of Transplant Surgeons (ASTS). These joint collaborations broaden the reach and impact of the AST and its membership.

AST has embraced the concept of communities of practice (COPs), and over the past year three new communities were established. There are now ten COPs representing various areas of transplantation including infectious diseases, diagnostics, administration, liver and intestinal transplantation, and women's health. The COPs are an excellent way for members with like interests to share their experiences and network with one another.

We are all well aware that cost is a significant consideration when determining whether or not to be involved in a professional

Your Membership Can Save You Money...

- On ATC Registration: Full doctoral and International members save \$385, Nondoctoral members save \$115 and Trainee members save \$90!
- On ASE Registration: Full doctoral and International members save \$175, Nondoctoral and Trainee members save \$35!
- On Online Education: Podcasts, audioconferences, Lectures in Transplantation, and past meeting slide presentations are all FREE to members!

For more information and to become a member, visit

a-s-t.org/about/membership-benefits

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organization. An AST membership is worth the cost, and then some, when you consider the following benefits:

- Reduced meeting registration costs: Members can save up to hundreds of dollars on registration to the American Transplant Congress (ATC), the Annual Scientific Exchange (ASE), and other society meetings.
- Networking: We offer member interaction through the Communities of Practice, Committee and Advisory Council service, meetings, AST events at ATC, and the AST website.
- AST e-Newsletter: This bi-monthly electronic newsletter updates members on all developments in the field.
- Reduced subscription rate to *American Journal of Transplantation (AJT)*: Members receive a significantly discounted subscription (savings of more than \$600) to AJT, the highest ranked journal in the field. Full and International members receive the journal as part of their dues; all other members may purchase a discounted subscription.
- Funding opportunities: AST offers more than \$600,000 in research grants each year, available only to members.
- AST website: Members have full access to all features of the website including the online membership directory and past meeting slide presentations.
- Online education: The website houses a wide range of education opportunities, including:
 - Conversations in Transplantation free podcasts of interviews with experts about important scientific advances in transplantation.
 - Lectures in Transplantation Series slides and commentary from leaders in transplantation presenting their research, perspectives, or clinical experience.
 - Audioconference Series a free program that provides topical information on issues at the forefront of transplant medicine.
 - Transplant Nephrology Core Curriculum

 electronic course offering a review of knowledge deemed essential for the care of kidney transplant recipients based on the ABIM/Nephrology blueprint.
 - Ask the Expert a free service designed to provide answers to frequently

DID YOU KNOW?

- Of AST's 200 charter members who formed the Society in 1982, 183 are still members today.
- More than 1,000 members have been part of the Society for more than 10 years.
- More than 100 members have been part of the Society for more than 25 years.
- Currently, there are 3,139 AST members.

asked questions by physicians, nurses, pharmacists and other professionals interested in learning more about transplant immunobiology and clinical management of organ transplant recipients.

- Career Center: Search for a new job, post your resume, or reach the most qualified candidates by posting your open job position on the AST online Career Center. Members save \$75 on all job postings.
- A voice in the governance: Full members are eligible to vote on all matters brought before the general membership and to serve on the Board of Directors. International members are also eligible to vote and may serve on the Board as Councilors-at-Large. All members are eligible to participate on Committees, Communities of Practice, and Advisory Councils.

The AST continues to serve as the leader in transplantation, providing its members with cutting-edge education, funding for research grants, numerous networking opportunities, and advocacy on transplant-related issues in Washington, D.C. The AST has become the leading voice for all things transplantation, and we continue to require the support of our membership in providing accurate information to our lawmakers. But most importantly, the AST is dedicated to listening to our members. Not only are we thankful for your continued commitment to the AST, but we are eager for your feedback and your suggestions for making your membership even better.

James R. Spivey, MD is the 2010–2011 AST Membership Committee Chair.

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Providing guidance for the next generation of transplant professionals

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Official publications of the American Society of Transplantation

The AST Handbook of Transplant Infections

Deepali Kumar and Atul Huma

MERICAN SOCIETY OF

WILEY-BLACKWELL

Primer on Transplantation

Edited by Donald Hricik

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2011 AST Ernest Hodge Distinguished Achievement Award

Robert H. Rubin, MD Father of Transplant Infectious Disease



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The AST is pleased to present the 2011 Ernest Hodge Distinguished Achievement Award to Dr. Robert Rubin, one of the founders of transplant infectious disease. This award is AST's highest honor and pays tribute to a senior investigator whose lifelong work has advanced the field of transplantation. Dr. Rubin has been a key figure in the

evolution of clinical transplantation worldwide and his contributions have been central to the development of the entire field of transplant infectious diseases.

Dr. Rubin received his medical degree from Harvard Medical School in 1966 and went on to continue his medical training at the Peter Bent Brigham Hospital. He completed his training in clinical and research fellowships in infectious disease at Massachusetts General Hospital and the New England Medical Center in 1973. Today, Dr. Rubin is Professor of Medicine at Harvard Medical School and the Gordon and Marjorie Osborne Professor of Health Sciences and Technology at Harvard-Massachusetts Institute of Technology, Division of Health Sciences and Technology.

Dr. Rubin's research interests include prevention and treatment of infection in the immunocompromised host, particularly organ transplant recipients; development and application of innovative imaging approaches for the assessment of human physiology, pathophysiology and therapeutics; and experimental pharmacology (translational research).

Among his accomplishments is the development of new strategies for preventing the most important infections, particularly those due to viruses and fungi. He also established the link between certain viral infections and allograft injury and the development of certain malignancies. In addition, he developed novel antimicrobial approaches that are effective not only in transplant patients, but also in other immunocompromised patient populations such as those with AIDS and cancer.

In the 1990s, Dr. Rubin saw the need to integrate clinical pharmacology with clinical practice. This led to a series of successful programs in education for medical students and fellows in the health sciences. As a result, Dr. Rubin was appointed Director of a new Center for Experimental Pharmacology and Therapeutics in the Harvard-Massachusetts Institute of Technology Division of Health Sciences & Technology. Dr. Rubin's ability to explore the business aspects of medicine led him to an appointment as a Senior Lecturer in the Sloan School of Management at MIT.

"Dr. Rubin has been a true innovator in the field of infectious diseases, establishing the unique subspecialty of transplant infectious diseases. His trailblazing efforts have informed major clinical and research developments in our field, and his timeline of post-transplant infections has been universally recognized and utilized by ID and non-ID transplant physicians worldwide in the evaluation of transplant recipients with possible infections. His impact has been immeasurable and it is wonderful to be able to finally recognize his extraordinary accomplishments with the AST Ernest Hodge Award." - Emily Blumberg, MD

He "discovered" cytomegalovirus, CMV, and began to characterize the syndrome that has tormented transplanters since the beginning of the field. His efforts led, in part, to the clinical development of fluconazole and ganciclovir. Dr. Rubin's





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observations resulted in his characterization of the "net state of immunodeficiency" and the "timeline of post-transplant infections" that have guided the development of prophylactic regimens and diagnosis.

"Bob Rubin was truly the father of transplant infectious diseases. He worked to organize the initial conferences dedicated to this topic and to build a space for infectious disease specialists interested in the care of organ transplant recipients on the transplant team. This was both at the local level and within national and international organizations. His efforts and leadership have paved the way for those of us who have followed him. His thoughts and teachings have helped all of us to understand and optimize the care of this unique patient population that we have chosen to serve."

- Michael Green, MD, MPH

Dr. Rubin's work has dramatically enhanced the safety and practice of organ transplantation. His rigor as a bedside clinician and teacher has led to the development of most of the diagnostic paradigms for infection and the evolution of most current prophylactic and therapeutic regimens for infection in transplantation.

Dr. Rubin teaches excellence in clinical practice and has gained the respect and admiration of his colleagues for his contributions to patient care. His efforts to grow the recognition of the central role of infection in transplantation and to develop a sense of community for transplant infectious disease specialists truly paved the way for the successful development of this field. His trainees have become leaders in many aspects of infectious disease, and his teachings have been carried forward by an entire generation of transplant clinicians.

The AST Ernest Hodge Distinguished Achievement Award is AST's most prestigious award. Nominations are received from the AST Board of Directors only. The award honors an AST member who is a senior-level investigator approaching the end of his/her career in the field of transplantation, and who has made significant contributions in transplantation science or medicine and to the AST over the course of his/her membership.

Five Facts about Dr. Rubin

- 1. He has written more than 400 original reports and reviews, including five books in the field of infectious disease.
- 2. He is a charter member of AST.
- 3. He is the founding editor of Transplant Infectious Diseases.
- 4. He helped create the AST Infectious Disease Committee.
- 5. He serves as Emeritus President of the Section of Infectious Disease for the Transplantation Society.

"Dr. Rubin represents the tradition of superb bedside infectious disease clinicians coupled with innovative thinking that predicted many of the pillars of current care for transplant recipients. Among his major contributions was the idea that infectious disease was an integral component of successful transplant care. His ability to reduce complex concepts to teachable ideas. such as the 'net state of immunosuppression', has advanced the entire field of transplantation. Further, the role of viral infection as a risk factor for subsequent infections, for graft rejection, and for malignancy has been central to his teaching throughout his career. He has been a superb teacher, mentor and friend for over 30 years to me and to everyone in the field of transplantation."

- Jay A. Fishman, MD

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Transplant Grand Rounds & ATC Highlights Webinar Series Returning Fall 2011

AST's webinar series is specially designed for today's busy transplant professional. One-hour programs are provided by speakers in their field and provide in-depth coverage of current topics to keep participants abreast of recent developments in the field of transplantation.

The 2011 series will once again include programs focusing on basic and translational sciences, kidney, liver and cardiothoracic transplantation, and infectious diseases.

Several programs will focus on highlights from the 2011 American Transplant Congress. These programs are ideal for those who seek a concise review of ATC meeting highlights or information from sessions they could not attend while in Philadelphia.

Transplant Grant Round programs will feature two presentations delivered by expert panelists, followed by an interactive question and answer period.

Continuing medical education credits will be offered for the series. Visit www.a-s-t.org for information about the program as it becomes available and listen to on-demand programs from 2010.





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AST's Communities of Practice Enable Greater Society Involvement

Signing petitions, reading newsletters, or completing surveys are common ways for transplant professionals to get involved in a particular area of interest within AST. But for those who wish to actively advance and be an advocate for the field of organ transplantation, there's a much higher level of involvement. AST offers a growing initiative that encourages all transplant professionals, from administrators to pharmacists to surgeons, to become more deeply involved in the field as well as the AST.

The AST's Communities of Practice (COPs) are autonomous groups within the Society that represent various transplant specialty areas, including Allied Health, Infectious Disease, Liver/Intestinal, Pediatric, Thoracic/Critical Care, Administrators, Diagnostic, Pharmacy, Women's Health and Trainee/Young Faculty. These communities provide education, resource development, administration, idea exchange, and outreach opportunities to foster advances in niche areas of transplantation. The COPs are selfgoverned by an Executive Committee elected by its COP members.

Ranging in size from 55-189 members, each AST COP has numerous workgroups assigned to specific initiatives, such as writing white papers, recording podcasts, and developing educational programs. This year, for example, the Pediatric Community of Practice has initiated a joint adult and pediatric workgroup to address the issue of transitioning from pediatric to adult transplant care. The Transplant Pharmacy Community of Practice has developed a variety of sessions slated for this year's American Transplant Congress to assist transplant pharmacists in obtaining adequate ACPE credits. The Transplant Administrators COP developed a Full-Day Pre-Meeting Symposium for Transplant Administrators held during the 2011 ATC. Additionally the Infectious Disease COP has embarked upon a research initiative focused on diagnostics, therapeutics and other challenges associated with fungal infections in transplant patients. Through these various projects, AST's COPs strive to be preeminent voices on transplantation issues around the globe.

Our newest COP, the Trainee and Young Faculty Community of Practice, was formed to provide young transplant professionals with education and networking opportunities and support. Membership



is open to individuals who are undergoing training or are within their first few years of faculty appointment.

All COPs and their members assist the AST in its role as an active and reliable resource for organ transplantation. They enable AST to rapidly respond to the evolving field of transplantation and implement novel initiatives to advance the field. In addition to addressing issues of public policy and clinical concern, the COPs provide educational resources and networking opportunities to transplant professionals who want to deeply involve themselves in the transplant community and the AST.

Finding the COP for You: AST currently has 10 Communities of Practice representing

AST currently has 10 Communities of Practice representing various specialty areas:

- · Community of Allied Health Professionals
- · Infectious Disease Community of Practice
- Liver and Intestinal Community of Practice
- · Pediatric Community of Practice
- Thoracic and Critical Care Community of Practice
- Transplant Administrators Community of Practice
- Transplant Diagnostic Community of Practice
- Transplant Pharmacy Community of Practice
- · Women's Health Community of Practice
- Trainee and Young Faculty Community of Practice

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AST's Newest Communities of Practice ᡟ

AST is proud to announce the latest additions to our ever-expanding world of COPs. Read on to find out what these COPs are about and where they're headed in the future.

LIVER AND INTESTINAL Community of Practice Who we are: The AST Liver and Intestinal Community of Practice (LICOP) was formed to provide a mechanism by which surgeons, physicians and medical

professionals involved in liver and intestinal transplantation can network and exchange knowledge.

What we do: We provide a forum where transplant professionals can disseminate ideas and work collaboratively on scientific and policy issues relevant to liver and intestinal transplantation.

Where we're going: The goal of the LICOP is to be the preeminent voice in policy issues regarding liver and intestinal transplantation while providing educational resources geared towards this constituency.

TRANSPLANT DIAGNOSTICS Community of Practice

Who we are: The AST Transplant Diagnostics Community of Practice (Tx Dx COP) represents and serves this constituency through advocacy, support and

development of activities that will enhance the quality, effectiveness and integrity of the transplantation process, in particular in the area of diagnostics.

What we do: Support, develop and advance the knowledge and practice of Transplant Diagnostics, in particular transplantation pathology, immunogenetics, histocompatibility and HLA antibody testing.

Where we're going: This COP strives to provide quality education, standardization, quality assurance and support for individuals and groups working in the area of transplant diagnostics, which in turn supports transplant programs resulting in improved outcomes for transplant recipients.

TRAINEE AND YOUNG FACULTY Community of Practice

Who we are: The AST Trainee and Young Faculty Community of Practice (TYF COP) represents and serves AST members who are training in any

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www.a-s-t.org

transplant-related field, or are within the first few years of their faculty appointment.

What we do: The COP supports the needs of young transplant physicians/scientists through empowerment and encouragement, as well as providing networking opportunities and educational resources.

Where we're going: The TYF COP looks to serve as the primary source in providing education, networking opportunities, and support to individuals early in their transplantation career.

How Do I Join?

COP membership is open to both AST members and nonmembers. Qualified nonmembers are invited to join a COP for a one-year trial, after which they must become an AST member if they wish to continue their participation in a COP.

To join a COP, interested individuals must complete the online form available at www.a-s-t.org/communities-of-practice.



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Be a Part of a Team - Join a Community of Practice

Community of Allied Health Professionals

The Community of Allied Health Professionals (COAHP) is dedicated to advancing excellence in transplantation by promoting research and professional development through knowledge sharing, networking and learning among all allied transplant health professionals.

Infectious Disease Community of Practice

The Infectious Disease Community of Practice (IDCOP) offers transplant infectious disease professionals a vehicle for networking, accessing resources and references, as well as finding new ways to share best practice ideas and solutions.

Liver and Intestinal Community of Practice

The Liver and Intestinal Community of Practice (LICOP) was established in 2010 to support professionals with an interest in liver and intestinal transplantation. The LICOP is dedicated to being the preeminent voice in policy issues regarding liver and intestinal transplantation and providing a framework in which surgeons, physicians and medical professionals can network and engage in research collaborations.

Pediatric Community of Practice

The Pediatric Community of Practice (PCOP) provides professionals in the pediatric transplant field opportunities to unite in addressing pediatric issues and provides networking opportunities for community members.

Thoracic and Critical Care Community of Practice

The Thoracic and Critical Care Community of Practice (TCC COP) offers the opportunity for all those interested in thoracic transplantation, including transplant physicians and surgeons, intensivists, and allied health professionals, to work together to advance the field of thoracic transplantation. ()

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Trainee and Young Professionals Community of Practice The newest COP, the AST Trainee and Young Faculty

The newest COP, the AST Trainee and Young Faculty Community of Practice (TYF COP) was established to provide a forum for trainees and young faculty in any transplant-related field to network with peers and senior investigators, exchange thoughts, and participate in educational programs specifically targeted to physicians/scientists who are early in their careers.

Transplant Administrators Community of Practice

The AST Transplant Administrators Community of Practice (Tx Admin COP) is dedicated to providing quality education, advocacy and peer support for transplant administrators and other personnel involved in the management of resources that support functionality of transplant programs.

Transplant Diagnostics Community of Practice

The Transplant Diagnostics Community of Practice (Tx Dx COP) is dedicated to all professionals involved in diagnostics, including transplant pathologists, immunogeneticists, and other laboratory medicine specialists. The community will work together to create and promote best practices through the communication, implementation and thus maintenance of the highest diagnostic and quality assurance standards in organ transplantation.

Transplant Pharmacy Community of Practice

The Transplant Pharmacy Community of Practice (Tx Pharm COP) is dedicated to working together to develop and/or enhance existing training programs, develop new patient education brochures and advance the transplant pharmacy profession in collaboration with the entire transplant profession.

Women's Health Community of Practice

The Women's Health Community of Practice (WHCOP) focuses on women's health issues within the field of transplantation. The Community is also interested in supporting the careers of individuals interested in women's health.

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Communities of Practice (COP) are open to anyone with an interest in the areas noted above. Complimentary COP membership is offered to nonmembers of the AST for one year. To join a Community of Practice, please visit http://www.a-s-t.org/communities-of-practice and select one of the COPs to join.

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AST Expands Online Education Portfolio

One of AST's top priorities is to give you the tools you need to enhance your knowledge and advance your career. With budgets being trimmed and belts being tightened, traveling to multiple meetings for your educational needs is not as realistic as it once was. So instead of just cutting back on what we offer, we've decided to change the way we offer it.

AST has expanded its online educational portfolio to provide resources in a variety of formats for all types of transplant professionals – all on a brandnew website!

AJT Mobile App

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Stay current with the latest developments in transplantation through the *American Journal of Transplantation's* mobile application. The new app for the #1 transplantation journal (published jointly with the ASTS) brings you content wherever you are, providing real-time updates from *AJT*. Features include: article abstracts, events, and free content like The AJT Report, Literature Watch, Reports from the CDC: MMWR, and more. Easily tag select content for convenient reading and share with your friends and colleagues through e-mail, Twitter, Facebook and more! Best of all, this handy



app is free! Get the app from any of these locations: www.a-s-t.org, www.amjtrans.com/app, or text 'AJT' to 46275 from your smart phone.

Audioconference Series

The AST Audioconference Series is made up of pre-recorded webcasts mixed with live Q&A, giving participants topical information on a variety of issues at the forefront of transplant medicine. A special set of Audioconferences just introduced last year provides highlights from the American Transplant Congress, perfect for those who could not attend or who would like a recap. Professionals who are unable to participate in the Audioconferences on their broadcast date can view slides and recorded lectures on the AST website upon the completion of the series.

Conversations in Transplantation (Podcasts)

AST's Conversations in Transplantation podcast series consists of more than 50 "interview shorts" (10-15 minutes) recorded with experts on a variety of topical issues in transplantation. Topics include: advances in transplant research, infectious diseases, transplant pharmacy, pediatric transplantation and issues related to allied health professionals, women's health, and public policy. You can find these podcasts on the AST website or in the iTunes store.

Transplant Nephrology Core Curriculum

This educational product is an electronic review of knowledge deemed essential for the care of kidney transplant recipients based on the ABIM/ nephrology blueprint. The original course was developed in 2007, with two new lectures added in 2009. The course, available for purchase on a USB stick or as a link, contains nine hours of slide

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presentations with accompanying audio and a self-assessment exam. Look for an updated course available in Fall 2011.

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Past Meeting Slide Presentations

Slide presentations from past AST symposia and meetings are free to members on the AST website. These online recordings are ideal for those who were unable to attend great meetings like the Fellows Symposium or the Annual Scientific Exchange.

Ask the Expert

Professionals interested in learning more about transplant immunobiology and clinical management of organ transplant recipients can post their questions on the AST website, where a team of transplant specialists will provide responses.

New & Improved Website

After a thorough review of the previous website and months of research, planning and development, the AST launched a new website in late 2010. The website was redesigned to better meet the needs of members and other transplant professionals. It offers enhanced features such as an updated "My Profile" section, community of practice web pages, delivery of timely information to diverse viewers, and social media feeds. The new interface, simplified navigation, and improved search function enable users to quickly access important information and resources.

AST encourages you to visit the AST website, www.a-s-t.org, to discover the rich and diverse online educational opportunities the Society has to offer.



www.a-s-t.org

Do you "like" us? **f**

We all know the way we communicate is ever-changing, and that means AST has to be ever-adapting. If you didn't already know, you can find AST on Facebook; 500+ transplant professionals already have. For Twitter users, get AST updates by following @AST_info.

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The meeting is manageable again at the AST Annual Scientific Exchange

Ask questions, network and learn in a relaxed atmosphere

Less is MOR

- Interact with clinical investigators and basic scientists of all levels
- Actively participate in roundtable discussions surrounding controversial topics

Abstract Deadline: August 15, 2011

www.ast-ase.org



AST Annual Scientific Exchange



December 1-4, 2011• San Antonio, TX

AST ASE

Perspectives

Past Recipients of the AST Branch Out Grant

The AST Branch Out Grant is a one-year grant designed to support a new collaboration between a transplant researcher who is an AST member and a basic science investigator who is neither an AST member nor a transplant researcher. This grant aims to encourage talented independent investigators (often at junior to mid-career levels) to integrate basic science and transplantation research that will lead to future funding from the NIH, the VA or equivalent agencies.

2006 AST/Astellas Branch Out Grant



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Recipient: Anita S. Chong, PhD Professor, University of Chicago

Collaborator: Chyung-Ru Wang, PhD Associate Professor in Pathology, University of Chicago

Research Title: Impact of infection with *Listeria monocytogenes* on

allograft tolerance

"This grant funding allowed us to pursue our initial studies on Listeria infection, which eventually resulted in R01 funding from the NIH. These studies are revealing to the full impact of bacterial infections and how they can not only prevent the induction of transplantation tolerance, but also abrogate established tolerance. We are very fortunate to have the opportunity to present our studies that emerged from this grant funding in a talk entitled 'Maintenance of Tolerance: Mechanisms that Break Established Transplantation Tolerance' at the ATC 2011 Transplantation in Depth Symposia."

2007 AST Branch Out Grant



Recipient: Olivia M. Martinez, PhD Professor, Dept. of Surgery/ Division of Transplantation, Stanford University School of Medicine

Collaborator: Theo Palmer, PhD Associate Professor of Neurosurgery, Stanford University School of Medicine

Research Title: Innate immunity and the differentiation of neural stem/progenitor cell allografts

"The AST Branch Out Grant made it possible for our group to solidify our collaborations with colleagues in neurobiology and to pursue our studies on neural stem cell transplantation. Through this interaction we have applied our knowledge of transplant immunology to the expanding field of stem cell transplantation in the hope that this will provide new therapeutic options in the future."

2010 AST/Genentech Branch Out Grant



Recipient: Daniel Goldstein, MD Associate Professor, Yale University School of Medicine

Collaborator: Tarek Fahmy, PhD Associate Professor, Dept. of Chemical & Biomedical Engineering, Yale University School of Medicine

Research Title: Nanoparticles: a novel approach to inhibit the innate immune system after transplantation

"This research grant provided me the resources to collaborate with a colleague, Tarek Fahmy, a bioengineer outside of the transplant field, to examine whether nanoparticles that are encapsulated with immune suppressants impact the innate response. I was honored to obtain this grant and I am committed to use the preliminary data in future grant proposals. Acquisition of this grant further confirmed my commitment to the transplant field."

Perspectives

Grant Recipients Funded from the AST Endowment

The AST Endowment Fund was established in 2003 to support promising research in the field of transplantation, provide education for young professionals and fund consensus conferences. Over the past eight years, the AST has funded more than 10 research grants from the Endowment. Some of the past recipients confirm the critical role of AST's Endowment-funded grants:



Amy D. Waterman, PhD

2003 AST Faculty Grant Assistant Professor of Medicine, Washington University School of Medicine

Research Title: The Final Option: Kidney recipients' interest in donorswapping options

"I presented these findings at conferences and eventually published the grant finding in the *American Journal of Transplantation*. I was asked to serve as a content expert about patient decision-making for several transplant centers and a consortium instigating paired donation programs nationwide. The grant allowed me to be a small part of the national dialogue leading to the development of a UNOS National Paired Donation Program."



Anna Valujskikh, PhD 2003 AST Women's & Minority Faculty Grant Associate Staff at the Dept. of Immunology, Lerner Research Institute, Cleveland Clinic

Research Title: CD4 memory T cells and allograft rejection

"This award has assisted me in establishing my own laboratory focused on the study of memory cells in transplant rejection. Shortly after receiving the AST grant, I was funded by the NIH and obtained my first independent faculty position at the Cleveland Clinic. Importantly, the support by the Society demonstrated to my institution that the transplant community believes in my potential as an independent researcher and in the importance of my scientific projects. My research program is developing successfully, and I'm grateful for the AST support at the critical stage of my career."

Support the next generation of transplant professionals by making a contribution to the Endowment Fund today. 100% of your contribution goes directly to the Endowment Fund and every gift makes a difference! To learn more about the AST Endowment Fund, or to make a donation, please visit: http://annualgiving.a-s-t.org.



Keri Csencsits Smith, PhD

2004 AST Basic Science Fellowship Grant Assistant Professor, University of Texas Health Science Center at Houston Medical School, Dept. of Pathology & Laboratory Medicine

Research Title: TGFb gene transfer and chronic allograft rejection

"I am very grateful to the AST Basic

Science Fellowship Grant for providing me with financial support during my postdoctoral fellowship. Thanks to this funding, I was able to continue my research into the contributions of specific T cell subsets to both acute and chronic cardiac allograft rejection. As an independent investigator, I have continued to apply my findings from these studies to new research projects."



Satish N. Nadig, MD, DPhil 2005 AST International Research

2005 AST International Research Fellowship Grant Recipient Administrative Chief Resident, Beth Israel Deaconess Medical Center, Harvard Medical School, Dept. of Surgery

Research Title: The impact of regulatory T cells on transplant arteriosclerosis in the humanized mouse model

"The AST International Fellowship Grant allowed for the opportunity to broaden my horizons abroad while pursuing a doctorate in a world-renowned translational laboratory. For me, this was truly a career- and life-changing experience!"



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Todd V. Brennan, MD, MS 2010 AST Basic Science Faculty Development Grant Recipient Assistant Professor of Surgery, Duke

University Research Title: The innate immune system in the regulation of allospecific

"I would like to thank the AST and all of its members for the recognition of my research with the Basic Science Faculty Development Grant. I am very grateful for the funding which has helped me acquire the supplies and personnel needed to advance my research projects. I hope that my research will make important contributions to the field of transplant immunology and I look forward to presenting my progress to you at upcoming AST meetings."

T Lymphocytes

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Perspectives

The Importance of the AST/ASN Renal Transplant Fellowship Training Accreditation Program

Maria Ajaimy, MD

Transplant Nephrology Fellow 2010-2011 Beth Israel Deaconess Medical Center



Accredited centers under the AST/ASN Renal Transplant Fellowship Training Accreditation Program offer lifelong opportunities for fulfilling work, competitive compensation and career advancement. Accreditation can assist in building skills for a successful career in the American health care industry. It can also help the trainee in the current competitive job market, leading to more employment opportunities,

greater earning potential, and increased job satisfaction.

As more patients become aware of transplantation through the Internet and other media, the demand for transplant nephrologists trained in accredited programs will increase. The supply must be able to meet this demand in order to keep transplantation costs affordable and cost-effective for insurers and self-payers. There is also an increased interest in the field of transplantation medicine, especially as general nephrologists tend to turn away from dealing with transplant patients on a regular basis. The increased morbidity and costs of hemodialysis when compared to transplantation should push the market to supply more transplant nephrologists trained in accredited programs.

It is very challenging for junior transplant nephrologists to think outside the box and see the big picture when dealing with daily transplantation issues. It is this very ability to balance small details with broad-scale planning that keeps the field appealing for patients as consumers, as well as for insurers as investors. In an AST/ASN accredited training program, the program director and mentors ensure that each fellow stays on track and achieves his/her goals and objectives. Training in transplantation nephrology requires specialized knowledge that can best be gained on a daily basis in this type of program.

By the time they are ready to work independently from their mentors, the transplant nephrologists should have built the confidence, skills and credentials necessary to meet the obligations and pressures of this changing area of health care. Without any doubt, transplantation nephrology is complex and multidisciplinary, but when armed with knowledge of what to expect after spending one year in an accredited program, trained transplant nephrologists can take advantage of the potential for career advancement, multidisciplinary work and satisfaction of bettering lives on a regular basis.

Shikha Mehta, MD

Transplant Nephrology Fellow 2010-2011 University of Alabama at Birmingham



When I started looking for opportunities for training in the field of transplant medicine, I did not know much about the AST fellowship accreditation process. During my quest to find a program that would provide me with the knowledge and skill set to start my career in transplantation, I learned more about the accreditation process. My search for a training program began and ended when

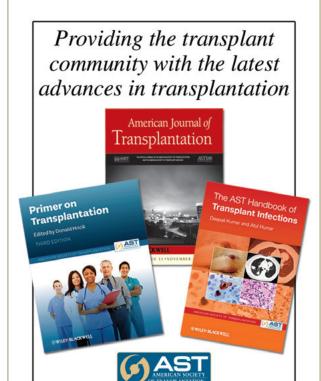
I started a transplant nephrology fellowship at the University of Alabama at Birmingham. Eight months into fellowship, I understood that the accreditation is vitally important for the trainee, as well as the institution.

Relative to other subspecialties, transplant medicine is a young specialty and has seen most of its growth in the past few decades. Like any new field in medicine, training in the early years was not formalized and varied greatly between institutions. As transplantation developed and became more common, new centers emerged and the need for transplant physicians increased. Current physician leaders in the field helped the field grow and reach new heights. They helped develop new techniques and protocols that are now the norm for younger physicians like me.

To keep pace with the growth of our understanding in immunology and clinical care, and to continue to improve upon current practices, it is vital that training includes exposure to all avenues of transplant medicine, including clinical training as well as training in the fundamentals of tissue typing and research. The accreditation process started as an effort to formalize and standardize training to ensure that new trainees are exposed to the depth and breadth of the field in a (brief) 12-month period. The AST has been proactive in making the accreditation widespread to standardize training in the field of transplantation in the United States, as well as internationally. An accredited program provides the trainee with structured training and opportunities to hone their clinical skills, acquire the knowledge and learn the research fundamentals to provide the best clinical care to their patients, and at the same time encourage them to develop a mindset to make advancements in the field in the future. The trainees of today will eventually be the leaders of tomorrow. Accreditation ensures that all trainees learn the skills necessary to succeed in their careers, be it in the academic or community setting, and provide high-quality care to their patients. The AST/ASN accredited programs in transplant nephrology provide this unique opportunity.







Visit the AST website for more information

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Letter from the President-Elect



Dear Colleagues,

It's a great time to be involved in the field of transplantation! Personally, I am both honored and humbled to be succeeding Maryl Johnson as President of AST. I joined our Society in 1988, validating my own transition into transplantation medicine. Since then, I have had the opportunity to watch the Society grow and prosper from several different perspectives, enabling true appreciation of the depth and breadth of service AST offers to our field and our patients. The public looks to us as the premier vehicle promoting

education, research and patient care in transplantation. We should be proud of our young Society.

It is always difficult to anticipate the challenges of the future. Who could have forecasted the Medicaid crisis in Arizona or the opportunities for collaboration with ASTS that Maryl has handled so adroitly? Indeed, it is likely that a significant portion of my time will be devoted to continuing these new initiatives, ensuring that eligibility decisions regarding transplantation are made in the best interests of patients and working in tandem with ASTS as a united voice whenever possible.

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I can envision at least three other areas that will require our attention in 2011-12. First, we must remain vigilant and proactive in our public policy efforts as we address the implications of Federal Health Care Reform for our patients and our practices. In an era of reduced spending, we must strive to ensure optimal funding for transplant-related research and identify new revenue sources for our research-oriented members. There is also newfound optimism that the 112th Congress will witness the passage of long-term immunosuppressant coverage for all Medicare patients.

Second, living donor issues are increasingly important. This topic has been dear to my heart for more than a decade. We are all aware of the potential of optimal utilization of living donors to significantly improve access to transplantation for our patients. To date, lack of consensus has hindered broad application of novel programs. AST, though, has the expertise and commitment to develop consensus among divergent interests regarding the logistics and ethics of paired donation, donor evaluation and long-term follow-up of donors. The Communities of Practice within AST have been very successful in harnessing talent and enthusiasm to address other challenges, and I believe living donor issues may be worthy of a similar approach.

Third, it is my pleasure to report that despite the challenges we've had to face in recent years, our society is on a sounder financial footing than ever before. That said, to continue moving forward, we must develop new approaches to fundraising and development. Gone are the days when we could look solely to our friends in industry to support our programs. We must now look creatively at how best to utilize our resources to ensure a prosperous and meaningful future. Transplantation remains a compelling story to tell; telling it compellingly in the proper context is the key to future growth. This will be the focus of our summer board meeting, and we welcome your thoughts as we chart this new course.

There is so much more going on in and beyond AST than can be summarized here. Again, it is with eager anticipation that I look forward to serving as your President in 2011-12. I challenge each of you to examine how your unique talents can be utilized to advance AST and the field of transplantation.

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Robert S. Gaston, MD President-Elect, AST

www.a-s-t.org

Online Resources For Your Patients

healthy transplant



www.HealthyTransplant.com

Helping patients learn about organ transplant and make informed decisions about their care



www.Healthy-Donor.com Providing prospective donors information about living organ donation



Patient Education Brochures

AST provides online access to patient education brochures that have been recognized by the National Library of Medicine as an authoritative source of patient information on transplantation. Brochures are available in both Spanish and English and address what patients may expect before, during, and after transplants, including their medications.

Visit the AST Website to learn more about our patient education resources.

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The American Society of Transplantation gratefully acknowledges the following companies for their support of the AST's many educational activities in 2010:

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In 2010, the following individuals declined their honoraria payments and/ or gifts. The AST decided to contribute the corresponding amount of the declined honoraria/gifts to the Endowment Fund. AST is appreciative of the generosity of these members. Patricia M. Campbell, MBChB Roslyn B. Mannon, MD Herwig-Ulf Meier-Kriesche, MD Alan H. Wilkinson, MD, FRCP \bigcirc