Health Disparities in Cardio-Metabolic Disease: Addressing the Epidemic

featuring

A Colloquium of State Health Officers
“The Obesity Epidemic in Special Populations: Translating Science to Health Policy and Community Solutions”

PROGRAM GUIDE
October 19 - 21, 2006
Morehouse School of Medicine
Louis W. Sullivan National Center for Primary Care
720 Westview Drive, SW
Atlanta Georgia 30310
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*This RCMI Activity is supported in part by NIH/NCRR/RCMI Grant G12-RR03034*
October 19, 2006

Cardio-metabolic disease is one of the leading causes of death and disability. We welcome you to this opportunity and the discussions around the topic “Health Disparities in Cardio-Metabolic Disease: Addressing the Epidemic”.

The Research Centers in Minority Institutions, Cardiovascular Research Institute and the Centers on Health Disparities at the Morehouse School of Medicine jointly developed this symposium. The symposium will address the increase in health disparity risk factors of this epidemic—hypertension, impaired glucose metabolism, lipid abnormalities and obesity. Each of these risk factors predisposes individuals to the development of myocardial infarction, stroke, and diabetes. This program is designed to provide strategies that address these diseases, their prevention and models that work for academic, clinical, research, and lay and community programs and the end user of this information, the patient.

We welcome your participation and appreciate your attendance.

Best Regards,

[Signatures]

Vincent C. Bond, PhD
Director
Research Centers in Minority Institutions

Gary H. Gibbons, MD
Director
Cardiovascular Research Institute

Sandra A. Harris-Hooker, PhD
Deputy Director
Center of Excellence on Health Disparities
**Educational Objectives**
At the end of this activity, attendees should be able to:

- define the significance of cardio-metabolic disease and its risk factors and the role of ethnic/racial and gender differences in health disparities;
- identify the role of obesity as a key determinant in promoting and reducing cardio-metabolic disorders and obesity-related cardiovascular disease;
- examine the role of genetic-environmental interactions, social, cultural, and biological factors as determinants in the development of cardio-metabolic disease;
- provide practical, evidence-based strategies for the clinical management of cardio-metabolic disorders;
- describe innovative best practice approaches in the prevention and treatment of cardio-metabolic risk factors and the different strategies of addressing it at multiple levels, (e.g. public health policies, clinical trials, community-based interventions);
- discuss the role of pay for performance in changing outcomes for cardio-metabolic disease;
- identify community-based and lay organizations as resources that address cardio-metabolic disease;
- integrate strategies used in successful models of community-based and lay programs that work to reduce health disparities; and
- interpret results from health screenings.

**Program Chairs**
Vincent C. Bond, PhD
Gary H. Gibbons, MD
Sandra A. Harris-Hooker, PhD

**Venues**
The Louis W. Sullivan National Center for Primary Care at the Morehouse School of Medicine
720 Westview Drive, SW
Atlanta, GA 30310-1495

Hilton Atlanta Airport
1031 Virginia Avenue
Atlanta, GA 30354
404.767.9000

**Message Center**
The contact number at the Louis W. Sullivan National Center for Primary Care on the campus of Morehouse School of Medicine is 404.559.6191. Have your office or family members access this number to leave emergency messages.

**Registration Schedule**
Thursday, October 19 ....3:00 PM - 5:00 PM
Friday, October 20 ........... 7:30 AM - 2:00 PM
Hilton Atlanta Airport .......... 6:00 PM - 7:00 PM
Saturday, October 21 ....8:00 AM - 12:30 PM

**Badges**
Identification badges will be provided to all registered participants, speakers, and special guests.

**Speaker Ready - NCPC Room 127**
Thursday, October 19 ....3:00 PM - 5:00 PM
Friday, October 20 ........... 7:00 AM - 2:00 PM
Hilton Atlanta Airport .......... 5:30 PM - 6:30 PM
Saturday, October 21 ....8:00 AM - 11:00 AM

**Session Recording**
Participants are asked to refrain from video or audio taping during sessions.

**Secretariat**
The 1Joshua Group, LLC
www.the1joshuagroup.com
## THURSDAY, OCTOBER 19, 2006

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<td>Greetings – Eve J. Higginbotham, MD; Dean, Morehouse School of Medicine</td>
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<td>Keynote – Paul K. Whelton, MD, MSc; Tulane University School of Medicine</td>
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<td>Keynote – William H. Dietz, MD, PhD; Centers for Disease Control and Prevention</td>
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<td>Clinical Sciences – Kwame Osei, MD; Ohio State University</td>
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<td>Population Sciences – Nicolas Stettler, MD, MSCE; The Children’s Hospital of Philadelphia</td>
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<td>Public Health/Community Health Practice – Adewale Troutman, MD, MPH; Louisville Metro Health Department</td>
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<td>The Ecological Context of Obesity Syndromes – Marilyn A. Winkleby, MPH, PhD; Stanford University</td>
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<td>Determinants of Obesity-Related Syndromes and Complications: Genetic Susceptibility – W. Timothy Garvey, MD; University of Alabama at Birmingham</td>
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<td>12 NOON - 1:30 PM</td>
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<td>General Session III: A Colloquium of State Health Officers - p. 7</td>
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<td>The Obesity Epidemic in Special Populations: Translating Science to Health Policy and Community Solutions</td>
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<td>Chair – David Satcher, MD, PhD; Morehouse School of Medicine</td>
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<td>Calvin B. Johnson, MD, MPH; Commonwealth of Pennsylvania</td>
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<td>Kenneth S. Robinson, MD; Tennessee Department of Health</td>
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<td>Eduardo J. Sanchez, MD, MPH; Texas Department of State Health Services</td>
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<td>Donald E. Williamson, MD; Alabama State Department of Public Health</td>
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<td>6:30 PM - 8:30 PM</td>
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<td>Local Strategies to Eliminate Obesity-Mediated Cardiovascular Health Disparities: What Will Work?</td>
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<td>Chair – Lawrence Y.C. Agodoa, MD; National Institute of Diabetes and Digestive and Kidney Diseases</td>
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<td>Keynote – Richard S. Cooper, MD; Loyola University</td>
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<td>Panel Discussion: Clinical and Community-Based Solution Discovery</td>
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<td>C. Alicia Georges, EdD, RN; City University of New York</td>
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<td>Charlton J. Coles, PhD; Clemson University</td>
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<td>Magon M. Mbadugha-Saunders, MS, RD, LD; Georgia Department of Human Resources</td>
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**SATURDAY, OCTOBER 21, 2006**

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| 9:00 AM-10:30 AM | General Session IV: Therapeutic Strategies for Cardio-Metabolic Syndromes - p. 14  
|                | Treating the High-Risk Patient: Practical, Evidence-Based Approach to Treating the Cardio-Metabolic Syndrome – Kenneth A. Jamerson, MD; University of Michigan at Ann Arbor  
|                | Lipid Management in the Diabetic Patient: An Update – Luther T. Clark, MD; State University of New York, Downstate  
|                | Diabetic Patient: Current and Emerging Options – Kwame Osei, MD; Ohio State University  |
| 9:00 AM-11:00 AM | Workshop I: Medical Services for the Uninsured: Who is Doing What? - p. 13  
|                | Greetings – John E. Maupin, DDS, MBA; President, Morehouse School of Medicine  
|                | Health Disparities – Yvonne G. Hipps, PhD; Morehouse School of Medicine  
|                | Federal Programs – Rhonda K. Hunter; Centers for Medicare & Medicaid Services  
|                | Local Programs – Kim Vanderwalker, LMSW; Atlanta Regional Commission  |
| 10:45 AM-12 NOON | General Session V: Pay for Performance: Implications for Clinical Practices - p. 15  
|                | William A. Alexander, MD; Morehouse School of Medicine  
|                | Marcia L. Delk, MD; Wellstar Health Systems  |
| 11:00 AM-12 Noon | Workshop II: Successful Models of Community-Based Programs - p. 16  
|                | Faith-Based Programs – Reverend Darrell Elligan; Concerned Black Clergy  
|                | MSM Small Grant Programs – Kim Vanderwalker, LMSW; Atlanta Regional Commission  
|                | Reverend Siegfried D. White; Concerned Dads  
|                | School-Based Programs – Kay Umekunne, MS, RD, LD; Morehouse School of Medicine  |
| 11:30 AM-3:00 PM | Health Fair and Screenings - p. 17  |
| 12 NOON-1:30 PM | Lunch, Poster Viewing, and Entertainment (Meal Ticket Required)  
|                | Margie Joseph  
|                | Randy Simmons & Rapture Ministries  
|                | New Mercies Mass Choir directed by Minister Sam Saunders  
|                | Fred Cockfield  |
4:00 PM - 5:30 PM
RECEPTION AND OPENING SESSION
NCPC Atrium

Chair .................................. Vincent C. Bond, PhD

Greetings ......................... Eve J. Higginbotham, MD
Dean, Morehouse School of Medicine

Keynote ......................... Paul K. Whelton, MD, MSc

Internationally recognized epidemiologist, Paul Kieran Whelton, M.D., M.Sc., serves as Senior Vice President for Health Sciences, Tulane University Health Sciences Center; Professor of Medicine and Dean, Tulane University School of Medicine; and Professor of Epidemiology, Tulane University School of Public Health and Tropical Medicine. He began his work with Tulane in January 1997 as Dean of the School of Public Health and Tropical Medicine and advanced to Senior Vice President for Health Sciences in August 1999. He assumed the role of Dean of the School of Medicine in December 2005.

Dr. Whelton came to Tulane after spending 26 years at the Johns Hopkins Medical Institutions in Baltimore, Maryland. At Johns Hopkins, he served as Director of the Welch Center for Prevention, Epidemiology, and Clinical Research; the Outpatient General Clinical Research Center; the PRO-HEALTH Community Research Center; and the Training Program in Cardiovascular Disease Epidemiology and Prevention. Dr. Whelton was professor in both the Johns Hopkins University School of Hygiene and Public Health and the Johns Hopkins University School of Medicine.

A medical school graduate of the National University of Ireland, Dr. Whelton earned a master’s degree in epidemiology from the University of London School of Hygiene and Tropical Medicine. He is an authority on the epidemiology, prevention, and treatment of cardiovascular and renal disease, having published several books and hundreds of articles on these topics. Dr. Whelton has conducted a series of ground-breaking studies on hypertension for the National Heart, Lung, and Blood Institute; the National Institute of Diabetes and Digestive and Kidney Diseases; and the National Institute on Aging. He has served as a consultant to many national and international health agencies and numerous governments in economically developed and developing countries.

Conclusion ...................... Vincent C. Bond, PhD
8:00 AM - 10:15 AM
GENERAL SESSION I*
Cardio-Metabolic Disorders:
Towards Solution Discovery

NCPC Auditorium

Chair ........................................... Gary H. Gibbons, MD
Greetings .......................... David Satcher, MD, PhD
Keynote .................... William H. Dietz, MD, PhD
Clinical Sciences................ Kwame Osei, MD
Population Sciences ..... Nicolas Stettler, MD
Public/Community Health
Practice.......... Adewale Troutman, MD, MPH
Panel Disussion/Q & A
Conclusion ......................... Gary H. Gibbons, MD

*This activity is being video-streamed via the Morehouse School of Medicine web-based interface.
10:35 AM - 11:55 AM  
GENERAL SESSION II*  
Obesity Syndromes:  
Nature, Nurture, and Social Context  
NCPC Auditorium  

Overview &  
Introductions ....................Frank Vinicor, MD  

The Ecological Context of  
Obesity Syndromes  
Marilyn A. Winkleby, PhD  

Determinants of Obesity-Related  
Syndromes and Complications:  
Genetic Susceptibility  
W. Timothy Garvey, MD  

Panel Discussion/Q&A  

Conclusion ....................Frank Vinicor, MD  

*This activity is being video-streamed via the Morehouse School of Medicine web-based interface.
1:30 PM - 4:00 PM
GENERAL SESSION III*
A Colloquium of State Health Officers
The Obesity Epidemic in Special Populations: Translating Science to Health Policy Solutions

NCPC Auditorium

Chair ......................... David Satcher, MD, PhD

Calvin B. Johnson, MD, MPH
Secretary of Health
Commonwealth of Pennsylvania

Kenneth S. Robinson, MD
Commissioner
Tennessee Department of Health

Eduardo J. Sanchez, MD, MPH
Former Commissioner
Texas Department of State Health Services

Donald E. Williamson, MD
State Health Officer
Alabama State Department of Public Health

Closing ...................... David Satcher, MD, PhD

*This activity is being video-streamed via the Morehouse School of Medicine web-based interface.
Calvin B. Johnson, MD, MPH
Secretary of Health
Commonwealth of Pennsylvania

A board-certified pediatrician, Dr. Johnson attended Morehouse College in Atlanta, Georgia, graduating with a degree in chemistry. He earned his medical degree in 1993 from the Johns Hopkins University School of Medicine and a master’s degree in public health from the Johns Hopkins University School of Hygiene and Public Health (now the Bloomberg School of Public Health).

Calvin B. Johnson, MD, MPH, was appointed by Governor Edward G. Rendell as the Commonwealth's 24th Secretary of the Pennsylvania Department of Health on April 22, 2003. He is the senior advisor to Governor Rendell on health matters, identifying priorities and outlining objectives to achieving these goals.

As Secretary of Health, Dr. Johnson directs nearly 1,800 employees in carrying out the Department of Health's mission to promote healthy lifestyles, prevent injury and disease, and assure the safe delivery of quality health care for all of the Commonwealth's 12 million citizens.

During Dr. Johnson’s tenure as Secretary of Health, he has led the department in dealing with a variety of public health issues including:
- The management of the largest single-source Hepatitis A outbreak in U.S. history in 2003;
- The use of nearly $155 million in Tobacco Master Settlement Agreement funds to focus on biomedical, patient-oriented clinical investigations and health services research over the past two years;
- Setting priorities to reduce health disparities among Pennsylvania’s citizens through the creation of innovative tobacco prevention and cessation programs such as the “Love Thy Neighbor” faith based initiative targeting African Americans and the “Mi Promesa” initiative targeting Hispanic-Americans;
- The implementation of a department-wide data-driven performance-based outcomes management initiative to ensure that public health programs are effectively meeting the needs of all Pennsylvanians; and
- Promoting children’s wellness, improving accountability, and recruiting and retaining a highly skilled public health workforce.

At the time of his nomination for Secretary of Health, Dr. Johnson was an assistant professor of pediatrics at Temple University School of Medicine and a practicing pediatrician on the medical staff of Temple University Children's Medical Center in Philadelphia, Pa.
Kenneth S. Robinson, MD
Commissioner
Tennessee Department of Health

The Reverend Kenneth S. Robinson, M.D. is an indefatigable champion of holistic and comprehensive approaches to public health and individual well-being. Dr. Robinson was appointed by Tennessee Governor Phil Bredesen in February, 2003 to be Commissioner of the Department of Health for the State of Tennessee. In this capacity, he serves as the State’s Chief Health Officer. Dr. Robinson oversees the Department’s promotion, protection and improvement of the health of all Tennesseans; through its 3400 employees and budget of $522 Million, the licensure and regulation of health care professionals and health care institutions in the State, inspections and assurances of food and water safety, the accumulation of vital health statistics and health outcome data, health policy planning and development, environmental and laboratory testing, bioterrorism preparedness, and a vast array of prevention, education, outreach, maternal and child health, alcohol and drug abuse, community health, immunization, family planning, communicable disease, and safety net primary care services delivered all across the State.

Rev. Robinson also serves, as he has since 1991, as Pastor and Chief Executive of the progressive St. Andrew AME Church in Memphis, TN. His pastoral leadership involves implementing major programs of community education, alcohol and drug abuse prevention, emergency sustenance, family life enrichment, childcare services, academic skills enhancement, and economic development. Inspired by Pastor Robinson’s theme, “Ministering to Memphis - Spirit, Soul and Body”, the congregation has developed partnerships with three schools, several local foundations, and healthcare providers. To complement congregational ministry at St. Andrew, he founded and is the immediate Past President and CEO of The Works, Inc., an associated, faith-based Community Housing Development Organization (CHDO). The Works is bringing “renaissance” to the church’s neighborhood, through development efforts including the construction or rehabilitation of 30 affordable, single family houses and an 80-unit apartment community, funded in part by $3.6 Million of Federal Low Income Housing Tax Credits. The corporation has also been granted a charter by the Tennessee Department of Education, creating The Circles of Success Learning Academy - a K-5 public charter school which opened in 2003, innovatively targeting children deemed to be at risk of failure in mainstream, traditional classroom settings.

The delivery of health care has, indeed, been integral to Dr. Robinson’s “ministry of healing”. He is a Diplomate of the American Board of Internal Medicine, formerly practicing and teaching General Internal Medicine as a faculty member for a decade at the Vanderbilt University School of Medicine. For 12 years, he served exclusively as an academic physician; most recently – prior to his appointment to the Governor’s Cabinet - as the Assistant Dean for Admissions and Student Affairs in the College of Medicine, at the University of Tennessee, Memphis. In that role, he provided leadership to the medical school’s commitment to investing in the health of the African-American community, and to increasing the number of African-American physicians trained in Tennessee. During his tenure at the university, the matriculation rate for underrepresented minority students more than quadrupled; elevating the University of Tennessee, College of Medicine to the pinnacle of success in such endeavors among its peer medical schools, and providing for the diversity and cultural competence requisite for the nation’s future health professionals.

With his unique bi-professional background, Dr. Robinson has served as a citizen advisor on minority health issues to the previous Tennessee Commissioner of Health, as former Vice-Chairman of the TN Department of Health’s Minority Advisory Council. For six years, he served as the Chairman of the Department’s Black Health Care Task Force, providing supervisory guidance for funded health initiatives targeting at-risk youth in the state’s African-American communities. Among many volunteer commitments with health-related and social service entities, he still actively participates on multiple, national and state bodies which share his calling to ‘heal the land’. Given his experience in developing and implementing prototypical, community church-based, prevention programs - building upon public/private partnerships and support - Dr. Robinson has been widely sought across the country for presentations and consultations on program management, policy formulation, and partnership development.
Eduardo J. Sanchez, MD, MPH
Former Commissioner
Texas Department of State Health Services

“One of the challenges facing anyone in the field of public health is trying to overcome the misperception that public health is medical care for poor people. It’s not. Public health is a population-based approach to health that invests resources strategically to have a broad impact on the people of a community, a state, or a nation. Life expectancy in the United States increased from 47 years in 1900 to 77 years in 2000, yet few people recognize that 25 of the 30 years of longer life are attributable to public health measures such as clean water, improved sanitation, spraying for mosquitoes, and childhood vaccination programs. Public health programs, which receive only 3 percent of all health-care spending, have proven a wise investment.” - Dr. Eduardo Sanchez

EDUARDO J. SANCHEZ, M.D., M.P.H., is former commissioner of the Texas Department of State Health Services (DSHS). As the first commissioner and chief health officer for the State of Texas (2001-2006), Dr. Sanchez oversaw programs that address prevention and treatment of mental illness and substance abuse, disease prevention and bioterrorism preparedness, family and community health services, environmental and consumer safety, and regulatory services.

The Texas Department of State Health Services combines the former Texas Department of Health, the Texas Commission on Alcohol and Drug Abuse, the Texas Health Care Information Council, and the mental health component of the Texas Department of Mental Health and Mental Retardation into a department of more than 11,500 employees with an annual budget of approximately $2.3 billion.

Hurricanes Katrina and Rita presented enormous challenges to DSHS employees, who staffed emergency preparedness and response activities 24 hours a day for weeks in the aftermath of the storms. More than 250,000 Hurricane Katrina evacuees arrived in Texas needing food, shelter, clothing, and medical care. In the midst of ramped-up efforts to meet these needs, DSHS joined with other state and local government agencies to help manage the evacuation of 2.5 million residents from a 17-county region along the Gulf coast of Texas. Dr. Sanchez considers this sustained and collective effort to be one of the most outstanding chapters in the more than 100 years of Texas public health service.

The American Academy of Family Physicians presented Dr. Sanchez with the 2005 Public Health Award for his contributions to public health in Texas and beyond. The commissioner also received the Louis B. Russell Memorial Award in 2004, from the American Heart Association for outstanding service to minority populations.

Dr. Sanchez became commissioner of health on Nov. 5, 2001. He is a board-certified family practice physician, actively practicing in Austin from 1992 to 2001. Dr. Sanchez also served as health authority and chief medical officer for the Austin-Travis County Health and Human Services Department from 1994 to 1998.
Donald E. Williamson, MD
State Health Officer
Alabama State Department of Public Health

Dr. Donald E. Williamson was appointed State Health Officer of the Alabama Department of Public Health in 1992 after serving as its Director, Bureau of Preventive Health Services, from 1988 to 1992 and prior to that as its Director, Division of Disease Control, from 1986 to 1988. Prior to joining the Alabama Department of Public Health, Dr. Williamson served as State Tuberculosis Control Officer at the Mississippi State Department of Health.

Dr. Williamson has been the recipient of a number of awards; most recently he received the 2000 Arthur T. McCormack Award from the Association of State and Territorial Health Officials for dedication and excellence in public health, the 1999 Theodore R. Ervin Award from the Public Health Foundation, and the 1999 Child Health Advocate Award from the American Academy of Pediatrics. He was also the recipient of the 1997 D.G. Gill Award from the Alabama Public Health Association for outstanding contribution to public health in Alabama and the 1998 Internist of the Year Award from the Alabama Society of Internal Medicine.

On a national level, Dr. Williamson served on the Executive Committee of the Association of State and Territorial Health Officials. He was President of the Association of State and Territorial Health Officials from 1997 to 1998. Among others, he served until 2004 as a member of the National Vaccine Advisory Committee, and has also served as a member of the Board of Directors from 1996 to 1999 of the Public Health Foundation and as a member of the Steering Committee on Access for the Uninsured of the National Academy for State Health Policy since 1998. He serves on numerous boards and commissions at the state level.

Dr. Williamson received his medical degree, cum laude, from the University of Mississippi, School of Medicine 1979. He completed a residency in internal medicine at the University of Virginia Hospital in 1982 and is board certified in that specialty.
6:30 PM - 8:30 PM
DINNER PANEL
Local Strategies to Obesity-Mediated Cardiovascular Health Disparities: What Will Work?

Hilton Atlanta Airport - Grand Salons BCD

Chair .................... Lawrence Y.C. Agodoa, MD

Keynote ........................ Richard S. Cooper, MD

Richard S. Cooper, MD serves as Professor and Chair of Preventive Medicine and Epidemiology at Loyola University, Chicago Stritch School of Medicine. Dr. Cooper is a physician epidemiologist with an interest in cardiovascular disease. Dr. Cooper has experience with patient registries, community surveys, and genetic epidemiology.

Clinical and Community-Based Solution Discovery - Panel Discussion

Charlton J. Coles, PhD
C. Alicia Georges, EdD, RN
Magon Mbadugha-Saunders, MS, RD, LD

Q&A

Closing .................... Lawrence Y.C. Agodoa, MD
9:00 AM - 9:30 AM
COMMUNITY FORUM
Opening Session

NCPC Room 207

Chair..........................William A. Alexander, MD

Greetings............ John E. Maupin, DDS, MBA
President, Morehouse School of Medicine

MSM Mini-Grant Recipient..... Rev. Larry Hill

9:30 AM - 11:00 AM
COMMUNITY FORUM
Workshop I
Medical Services for the Uninsured:
Who is Doing What?

NCPC Room 207

Chair..........................Yvonne G. Hipps, PhD

Health Disparities.......Yvonne G. Hipps, PhD

Federal Programs ..............Rhonda K. Hunter

State Programs ....Kim Vanderwalker, LMSW

Q&A

Closing .........................Yvonne G. Hipps, PhD
9:00 AM - 10:30 AM
GENERAL SESSION IV
Therapeutic Strategies for Cardio-Metabolic Syndromes

NCPC Auditorium

Chair ...................... Priscilla E. Igho-Pemu, MD

Treating the High-Risk Patient: Practical, Evidence-Based Approach to Treating the Cardio-Metabolic Syndrome
Kenneth A. Jamerson, MD

Lipid Management in the Diabetic Patient: An Update
Luther T. Clark, MD

Optimizing Glycemic Control and Reducing Target Organ Damage in the Diabetic Patient:
Current and Emerging Options
Kwame Osei, MD

Panel Discussion/Q&A

Closing ................. Priscilla E. Igho-Pemu, MD
10:45 AM - 12 Noon
GENERAL SESSION V
Pay for Performance: Implications for Clinical Practices
NCPC Auditorium

Chair..........................William A. Alexander, MD

Presenters

William A. Alexander, MD
Morehouse School of Medicine

Marcia L. Delk, MD
WellStar Health System, Inc.

Panel Discussion/Q&A

Closing Remarks ............Vincent C. Bond, PhD
Gary H. Gibbons, MD
Sandra A. Harris-Hooker, PhD
11:00 AM - 12:00 Noon
COMMUNITY FORUM
Workshop II
Successful Models of
Community-Based Programs
NCPC Room 207

Chair ......................... Gail G. McCray, MA, CHES

Panel Discussion

Rev. Darrell D. Elligan
Rev. Siegfried D. White
Kay Umeakunne, MS, RD, LD

Closing ....................... Gail G. McCray, MA, CHES
11:30 AM - 3:00 PM
HEALTH SCREENINGS

NCPC 1st Floor Exam/Procedure Rooms

Blood Pressure

Body Mass Index

Cholesterol

Eye Exams

Glucose (Blood Sugar)

HIV Testing

Don’t forget...you can receive FREE personal care products when you submit your completed screening form!!
Kenneth A. Jamerson, MD - p. 14
Department of Internal Medicine
University of Michigan-Ann Arbor
Ann Arbor, Michigan

Calvin B. Johnson, MD, MPH - p. 7, 8
Pennsylvania Department of Health
Harrisburg, Pennsylvania

John E. Maupin, DDS, MBA - p. 13
Office of the President
Morehouse School of Medicine
Atlanta, Georgia

Magon M. Mbadugha-Saunders, MS, RD, LD - p. 12
Chronic Disease Prevention and Health
Georgia Department of Human Resources
Atlanta, Georgia

Gail G. McCray, CHES - p. 16
Community Health/Preventive Medicine
Morehouse School of Medicine
Atlanta, Georgia

Kwame Osei, MD - p. 5, 14
College of Medicine and Public Health
Ohio State University
Columbus, Ohio

Rev. Kenneth S. Robinson, MD - p. 7, 9
Tennessee Department of Health
Nashville, Tennessee

Eduardo J. Sanchez, MD, MPH - p. 7, 10
Texas Department of State Health Services
Austin, Texas

David Satcher, MD, PhD - p. 5, 7
Center of Excellence on Health Disparities
Morehouse School of Medicine
Atlanta, Georgia

Nicolas Stettler, MD - p. 5
Pediatric Epidemiology
Children's Hospital of Philadelphia
Philadelphia, Pennsylvania

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Research Centers in Minority Institutions

Research Centers in Minority Institutions (RCMI) assist institutions in strengthening their research environment by improving and expanding their human and physical resources for conducting biomedical and behavioral research. These centers not only foster environments that are conducive to excellence in basic, clinical, and behavioral research, but they establish a critical mass of scientists that more closely reflects the growing ethnic and cultural diversity of the U.S. population.

The Division of Research Infrastructure (DRI) of the National Center for Research Resources (NCRR) provides RCMI grants to expand our nation’s research capacity in colleges and universities that (1) have a 50 percent or greater enrollment of students who are underrepresented in biomedical sciences, and (2) award doctoral degrees in the health professions or health-related sciences. Underrepresented students are African Americans, Hispanics, Native Americans, Alaskan Natives, Native Hawaiians, and Pacific Islanders.

The RCMI Program provides for: core administrative staff; pilot projects; faculty development, enrichment, and expansion; acquisition of state-of-the-art instrumentation; enhancement of grants management and research development activities; improvement of biostatistical and computer resources; development of new technologies; initiation and expansion of research disciplines; and renovation of laboratories and animal facilities.

RCMI grants are limited to institutions within the United States and its territories. All RCMLs share common concerns about minority health issues; however, they differ from one another in several aspects. For example, of the 18 institutions that currently host RCMLs, 8 are graduate schools, 7 are medical schools, 2 are schools of pharmacy, and 1 is a school of veterinary medicine. Moreover, several are state-supported institutions, while some are private; a few are relatively new, while others have long-standing research programs in the health sciences.
The Morehouse School of Medicine Cardiovascular Research Institute (CVRI) was established in July 1999 as a Center of Research Excellence under the direction of Dr. Gary H. Gibbons. The CVRI is funded in part by a grant from the NIH National Center for Minority Health and Health Disparities and the NIH Heart, Lung and Blood Institute program to develop cardiovascular research centers at Historically Black Colleges and Universities. The Institute is a multi-investigator, multi-disciplinary organization that transcends traditional academic departmental structures to focus on advancing cardiovascular research and education.

The Cardiovascular Research Institute Mission is to:

- Advance cardiovascular medicine by developing an internationally recognized center of excellence for research in cardiovascular science;
- Create a cutting-edge research environment that fosters innovation and a synergistic interchange across traditional departmental and disciplinary boundaries;
- Improve the health outcomes of individuals with cardiovascular disease by establishing links from molecule-to-man-to-community. The Institute strives to bridge the basic science disciplines of molecular biology, genetics and physiology with the disciplines of clinical investigation, epidemiology and community-based interventions;
- Play a leadership role in generating the knowledge and innovative approaches necessary to ameliorate the problem of ethnic disparities in the burden of cardiovascular disease; and
- Serve as leaders, role models and mentors in nurturing the development of the next generation of leaders in biomedical research with a particular focus on enhancing the ethnic and gender diversity of the community of research scientists.
The Morehouse School of Medicine’s Center of Excellence on Health Disparities was formed in 2002 with funding from the National Center on Minority Health Disparities. Under the leadership of Dr. David Satcher, Director and former United States Surgeon General, the Center seeks to respond to MSM’s mission of recruiting and training minority and other students as physicians, biomedical scientists, and public health practitioners who are committed to research and the primary healthcare needs of the underserved.

Center Purpose
Our vision is to be recognized as the leading national resource for the reduction and ultimate elimination of health disparities

Our mission is to develop transferable models for the elimination of health disparities while maintaining our shared values of integrity, respect for community and trustworthiness.

The Goals of the Center of Excellence on Health Disparities are:
- to educate, motivate and mobilize the MSM community, its academic partners and the surrounding community(ies) toward activities focused on the elimination of disparities in health among different racial, ethnic and socio-economic groups;
- to build the infrastructure within the MSM, its academic partners and its community partners to eliminate disparities in health;
- to develop, expand and conduct multi-disciplinary research to better define the nature, magnitude and distribution of disparities, their determinants and interventions that work to prevent and ameliorate them; and
- to evaluate strategies/programs for eliminating disparities in health in selected areas and with selected populations/communities.

RESEARCH COMPONENT CORES
- Cardiovascular Health & Stroke Prevention: Concentrating on surveillance, environmental determinants, access to care, lifestyle choices, and gene/environment interactions as they related to health disparities and cardiovascular disease.
- Cancer: Conducting cancer research that addresses racial and ethnic disparities in incidence and mortality, with a special focus on smoking and tobacco.
- Diabetes: Developing an extensive team of research scientists, physicians, and public health leaders to explore diabetes.
- HIV/AIDS: Examining in detail the clinical complications related to HIV/AIDS in association with cultural- and gender-specific issues such as behavior, access to care and specific therapies.
- Maternal Child Health: Researching the disturbing disparities and high impact of low-birth weight and asthma.
- Mental Health: Improving public awareness of mental health issues and developing and implementing depression screening programs.

ADMINISTRATIVE CORE
Focusing on the management, coordination and integration of center procurement of financial resources and nurturing of critical partnerships

TRAINING RESOURCE CORE
Increasing the pool of African-American faculty with core skills needed to participate in research and writing for medical literature

COMMUNITY OUTREACH & INFORMATION DISSEMINATION CORE
Designing community research and service activities, while assuring in the dissemination of health-related information

SHARE RESOURCE CORES
- Biostatistical and Data Management: Providing technical support and consultation in the areas of data analysis, database administration, and study design.
- Basic Science Research: Providing genetic and protein analysis of biological samples to determine the root cause of disease as it relates to health disparities.
- Community Practitioner Network: Developing a community practitioner network consortium, clinical practice registries and clinical data repositories for the purpose of enhancing research capacity.
- Community Partnership Development: Fostering partnerships, creating advisory consumer participant groups, and facilitating the development of culturally appropriate materials and interventions.

For More Information visit http://www.msm.edu/EXPORT
Changing diabetes

Changing diabetes is about leadership; about making a difference to the world of diabetes today and tomorrow.

Distilled from our history, our vision and our brand promise, and all that this means to us, changing diabetes will help demonstrate and portray Novo Nordisk’s leadership to all of our stakeholders.

Changing diabetes takes its point of origin in people with diabetes themselves – people who need help to live their lives free of diabetes-related complications.

Changing diabetes starts by recognizing that the status quo is not good enough. It positions us as a partner and catalyst for change, as part of our mission to find ways of improving and changing the way diabetes is managed – and ultimately defeated. In a clear, cohesive, and proactive way, changing diabetes allows us to communicate all the things we do to lead the fight against diabetes.

Changing diabetes is also a way of portraying the individuals who make up Novo Nordisk. It is rooted in the belief that change and progress start with people who are passionate about making a difference; and Novo Nordisk is the place where they can realize their full potential.

For more information visit http://www.novonordisk-us.com
Celebrating a century of better care, Piedmont Hospital is a 500-bed acute tertiary care facility offering all major medical, surgical and diagnostic services. Located on 26 acres in the north Atlanta community of Buckhead, Piedmont is a private, not-for-profit organization with 3,700 employees and a medical staff of more than 900 physicians. Piedmont is a recipient of the 2006 Distinguished Hospital Award for Patient Safety according to HealthGrades (a leading healthcare ratings company), as well as one of the nation’s Most Wired hospitals in the 2005 and 2004 100 Most Wired Survey and Benchmarking Study. Named one of the nation’s 100 Top Hospitals in 2005 and 2002, Piedmont Hospital is a member of Piedmont Healthcare (PHC), a not-for-profit organization and one of the nation’s 100 Best Performing Integrated Healthcare Networks (Top 100 IHNs). PHC also includes Piedmont Fayette Hospital, a 100-bed community hospital in Fayetteville, one of the nation’s 100 Top Hospitals® for the past three years, and one of the nation’s Most Wired hospitals; Piedmont Mountainside Hospital, a 35-bed community hospital in Jasper; the Piedmont Hospital Foundation; the Piedmont Physicians Group, with more than 70 primary care physicians in a network of 19 offices throughout metro Atlanta; and Piedmont Clinic, a 492-member physician network. For more information, visit www.piedmonthospital.org.
Thank You!!

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