



# 25 Years

Charles R. Rinaldo PhD Principal Investigator, Pitt Men's Study

25 years is a traditional milestone. It is the "silver anniversary" in many cultures. Now, however, our purpose is to pay special tribute to the determination and dedication of the Pitt Men's Study volunteers, investigators, staff and students who have invested their



time, energy and lives in many cases to our struggle against the AIDS epidemic. We wish to take this opportunity to acknowledge publically the important role that the Study has played in the War on AIDS, both locally and nationally.

We did not know when we embarked on this journey in 1983 that we were at war, and that we would be working on essentially the same public health and medical issues in AIDS 25 years later. We also did not know that this Study would be our life's work, and the first of many AIDS-related studies at Pitt. Indeed, from the beginning, the Pitt Men's Study has been viewed from two overlapping but differing perspectives.

From the standpoint of the National Institutes of Health (NIH) and the academic research community, the Pitt Men's Study, along with companion studies at Johns Hopkins, Northwestern and UCLA that formed the Multicenter AIDS Cohort Study, were viewed as a potentially powerful engine for the long-term development of data on the natural history of AIDS. Over the past 25 years the Pitt Men's Study and the MACS have been in the forefront of many aspects of AIDS research, supporting work that has led to over 1,700 scientific publications.

From the standpoint of the local community in Pittsburgh and the men who volunteered to participate in the Study, it was a focal point for regional activities in an epic battle that had the potential to devastate both that community and those very individuals. As a basic research scientist for over 30 years, however, I have never lost sight of the obligation of my research to the public, and in particular the vital role human participants play in that research. The effort and success that the great minds in science fighting this epidemic have accomplished are directly linked to the essential raw material that these individuals selflessly provide. To them we are forever indebted.

The War on AIDS continues. Speaking for all of my colleagues and staff in the Pitt Men's Study, we pause to reflect on the past and to re-dedicate ourselves to meeting the challenges that remain ahead.



*Pittsburgh's Out* cover from November 1983



Pitt Men's Study co-investigators Larry Kingsley, Phalguni Gupta, and principal investigator Charles Rinaldo.



Doctors in Los Angeles report rare types of pneumonia, cancer and other unusual illnesses in a group of young gay men. The Centers for Disease Control (CDC) use the name Acquired Immune Deficiency Syndrome (AIDS).



1983 | Multicenter AIDS Cohort Study (MACS) funded.

# Disco Bunnies Only -- Not

Anthony J. Silvestre, PhD Co-Investigator, Pitt Men's Study



My first job out of graduate school was as an administrator of an LGBT mental health center in Philadelphia. I remember sitting at our front desk one summer morning when a guy walked in off the street. He asked me what our Center did. After I explained our work, he said that he was glad we existed because gay people were crazy, self-centered, liars, untrustworthy, and cruel to each other. His point of view was not unique. Even the media back then (1978) would make casual references to the alleged self-centeredness of gay people and they would site our refusal to have kids and our alleged self-absorption and focus on fashion and partying to justify their point of view.

I knew that those judgments were not correct or, at least, no more accurate for us as for non-LGBT people but, of course, there was no way to prove it. It wasn't long after that guy walked into our Center when he and many others were proved wrong. Unfortunately, it took AIDS to show that their fallacy of their beliefs.

Anyone who has lived through the epidemic can tell stories about the selfless behavior of legions of LGBT people who worked hard to care for the sick and to advocate for change. In Pittsburgh, I was humbled time and time again as I saw ordinary people, straight and gay, come forward to work tirelessly in the face of the epidemic.

Even in the earliest days when many Pittsburghers didn't think that the epidemic would hit here, our community leaders and bar owners banded together to educate the community while hosts of men volunteered for the Pitt Men's Study. As people with AIDS began to come back to Pittsburgh to be with their families, people in town began to organize services. Despite common fears that this new disease might be easily caught, the late and great Dr. Bill Cohen organized a support group for people with the disease at Persad. Reverend Howard Cherry, Rev. Louis Kavar, Rev. Roberta Dunn, and Father Lynn Edwards visited hospital rooms to provide comfort to those who were sick and often isolated by hospital personnel and their own families. Community leaders like Randy Forrester, Jim Huggins, and Sharon Sutton campaigned hard to educate the community about this new disease. Sharon Mulac, Jim Flynn, Karen Evanchuk and Sr. Marguerite Kropinak from Anawim visited people in their homes and helped them bathe and eat. When necessary they helped bury them.

More than fifty people joined the Pittsburgh AIDS Task Force at its first public meeting held at the Graduate School of Public Health. The generous Herb Beatty held the first fundraiser for the Task Force at his home in Shadyside at a time people were afraid to be identified with the disease. And not all of these heroes were LGBT people; the ever-gracious Cyndee Klemanski wrote a letter to the *Post-Gazette* chastising a foolish columnist who attacked people with AIDS and warned about contaminated salad bars. She and Dr. Bill Brandon then began organizing therapy groups for people with the disease.

I could give many other examples and I apologize now to all of

An early meeting of the Community Advisory Board.

those whom I haven't mentioned. But I know that they won't mind because they stepped forward without any expectation of being rewarded or recognized. I don't know what motivated each of those pioneers but as I remember those all night vigils when they would stay by the sick beds of strangers to offer them comfort as they died, I have to think that their motivations were rooted in deep compassion and steadfast courage. We should redouble our efforts to support all of the valuable community projects going on today in honor of their work and their spirit.

	National Cancer Institute fi is named the human imm	nds that a retrovirus causes AIDS. Virus unodeficiency virus (HIV).	Rock Hudson announces that h d ies later in the year.	e has AIDS,	1.5 million cases reported worldwide.
1984		1	985		
	Pitt Men's Study (PMS) b	pegins recruitment.	PMS begins HIV antibody results.	rtesting. Volunte	ers invited to learn

# 25th Anniversary Events

"Once we win this war on AIDS, and we will win this war, it is your historic legacy that will live on," said Pitt Men's Study principal investigator Charles R. Rinaldo to a room of over two hundred past and present Study volunteers. They were gathered to commemorate the 25th anniversary of the Pitt Men's Study, part of the Multicenter AIDS Cohort Study (MACS).

The event, held on April 4, 2009 at the Rodef Shalom Congregation in Pittsburgh, focused on honoring those who had volunteered for the study, some for the full twenty-five years. Those "lifers" were given a special commemoration by Dr. Rinaldo, who praised them as "really extraordinary to have been so loyal and engaged over such a long time in the midst of adversity."

The evening included speaker William Buchanan, clinic coordinator of the Pitt Men's Study, who said to the attendees: "Without you this study is nothing. The Pitt Men's Study is not the researchers, nor the clinicians, nor the statisticians, nor the data managers, nor the laboratory staff. No, the Pitt Men's Study is you, each and every unique and wonderful you." (Read the full text of Bill's speech on page 6).

David W. Lyter, a physician and HIV specialist in Fort Lauderdale, Florida, spoke about his experiences as a young medical student in Pittsburgh during the early days of the epidemic, and his role as a co-founder of the Pitt Men's Study. Special note was made of the departure of physician assistant Marcy Holloway, who after seven years of working for the Study is leaving to pursue a career as an officer in the Air Force.

Last to speak was Branden Mikal Dudek, co-founder of Staying Positive, a Pittsburgh social group for those living with HIV. Branden spoke about his personal experiences with HIV, offering a reminder of the serious health risks posed by HIV even with today's highly effective antiretroviral therapy.

Music at the event was provided by piano player David DeBaun, and the Brazilian Jazz ensemble led by Lilly Abreu. All in Good Taste Productions and Big Jim's Catering provided food.



Research assistants Nathaniel Soltesz and Brian Golgan.



Clinic coordinator Bill Buchanan. Photo: John Colombo



Community Advisory Board member Buzz Pusateri. Photo: John Colombo



Physician assistant Marcy Holloway. Photo: John Colombo



Co-investigator James Becker and PMS co-founder David Lyter.

First panel o Quilt is crea	of AIDS Memorial ated.		Reagan first men- ord AIDS in public.	AZ	Γ used in human testing.		oved for use by the Food Administration (FDA).	Pianist and entertainer Liberace dies of AIDS.
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	Standards of HI	V prognosis esta	blished. MACS scier	tists be	gin to develop	PM	IS/MACS identifies lir	nk between
:	standard progno	stic markers of	immune suppression	during I	HIV infection.	sex	ual behaviors and HIV tr	ansmission.

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# 25th Anniversary - Bill's Speech

<sup>66</sup> In the early 1980s a new, puzzling, and deadly illness led a young gay doctor to approach a young straight microbiologist at Pitt and convince him that something needed to be done. They enlisted the help of the local gay establishment and started doing research without so much as a staff or a budget.



When the National Institutes of Health announced a grant for five research centers across the country, they applied, and soon Pittsburgh joined San Francisco, Los Angeles, Chicago, and Baltimore to form the Multicenter AIDS Cohort Study. The doctor and the microbiologist then hired a staff and enrolled over 1,000 men, many of whom are in this room.

Those researchers and those men braved fear, confusion, mistrust, discrimination, and an uncaring and even hostile government in order to make a difference and save lives. We are forever in your debt. Well done.

The causative agent, a virus, was discovered and soon an antibody test was developed. When the Pitt Men's Study began testing the blood it had collected, nearly one in four of those first recruits were infected at the time they joined, a startling statistic for what was thought to be a "low incidence" area.

Back then, the HIV drugs we had were ineffective in the long term, and while we could prevent or treat the many and bizarre illnesses that manifested in those with AIDS, we ultimately couldn't keep up with the continuous assaults on increasingly frail bodies, and we lost people. The death toll skyrocketed – in the 1990s we were losing about five study volunteers every month, and the rate continued to rise with no end in sight.

Yet hopeless as it seemed, men continued to come in, give blood and other samples, and bare their lives for nothing more than the hope – with no guarantee - that it might one day do some good. I watched people come to the clinic so sick they were barely able to walk, but they were determined not to go down without a fight. And those either not yet ill or not infected did not waiver in their commitment in spite of the deepening gloom. We are forever in your debt. Well done.

By the late 90s, we finally had treatments that made the first real impact on the survival of those with HIV. Some thought that our work was done, yet you still kept coming in. And thank goodness you did because it turned out that the fight was far from over – there were, and sadly still are, so many hurdles to overcome. And more of you joined, and ultimately nearly 4,000 of you had participated in Pittsburgh, some from great distances, some in the

face of burn out, some despite increasingly busy schedules and family obligations or ill health or age. We are forever in your debt. Well done.

There is still so much more to learn, much of it pertinent to HIV disease; but now more than ever, so much more of it pertinent to anyone - breakthroughs in immunology that may well help us cure illnesses such as cancer; and a greater understanding of numerous cardiovascular, renal, pulmonary, and metabolic conditions, just to name a few.



Continued next nade

You help us investigate these. You help us save and enrich lives around the globe. We need your help to reach out to our

children and instill in them the pride, self respect, and knowledge to take care of themselves and avoid that virus that has caused us so much grief. You will help us find ways to stop HIV from disproportionately affecting the

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World AIDS Day on December 1 is de- clared by the World Heath Organization.	ACT UP protests the slow pace of drug approval at FDA headquarters.	6.1 million cases reported worldwide.
988	198	9
	MACS scientists document differing	survival times for HIV-infected men.

# 25th Anniversary - MACS Event



On May 12 an event observing the 25th anniversary of the Multicenter AIDS Cohort Study (MACS) was held in Washington D.C. Study volunteers joined researchers and activists to commemorate the accomplishments of this important and historic research study.

Speakers included Anthony

S. Fauci, M.D., Director of the National Institute of Allergy and Infectious Diseases who observed, "If you look at the advances in HIV sciences since the very beginning, it's breathtaking. And virtually each of these is informed by the studies done by the MACS."

Christopher Bates, Director of the Department of Health and Human Services Office of HIV/AIDS Policy, turned the discussion from the science to the men who have committed themselves to be MACS volunteers: "The real power in this program is that it empowered men to take control of their lives and to see beyond themselves."

Internationally renowned HIV activist Gregg Gonsalves recalled approaching Dr. Fauci in the 1980s about men who were living with HIV without progressing to AIDS. He soon received a MACS analysis of this phenomenon. "In the dark of that night, in the dark of those terrible days, I was filled with hope that perhaps not all of us would die, and perhaps this is a way out of this terrible catastrophe."

"We are living longer and better because of the information and the findings that have come out of the MACS," continued Shannon Hader, Senior Deputy Director, HIV/ AIDS Administration, DC Department of Health, who credited MACS with giving her hope and guidance in creating a response to HIV that will prove relevant in 2010 and beyond.

Representatives from all four MACS sites spoke, including Pitt Men's Study clinic coordinator Bill Buchanan who recalled his early experiences as a MACS volunteer: "We got very little in return for our participation except for the feeling that we were contributing to a greater good. Altruism was, and still is, the backbone of the MACS." Danny K. from the Chicago MACS site, gave a more personal perspective: "I stand here tonight because of magnificent science, a whole lot of luck, and the need to make a difference." In conclusion, Bill observed that the study volunteers, "are the true heroes of the MACS and of the era of HIV disease, and we are forever grateful to them."

# **Bill's Speech, con't** African-American community as it now does – we cannot abandon our brothers and sisters regardless of race, gender, gender identity, or sexual preference. We have much to do – and YOU are an integral part of this effort.

Without you this study is nothing. The Pitt Men's Study is not the researchers, nor the clinicians, nor the statisticians, nor the data managers, nor the laboratory staff. No, the Pitt Men's Study is YOU, each and every unique and wonderful you. YOU have made the progress, YOU have saved and enriched lives, YOU have made the difference, YOU are the heroes of the era of HIV disease. Never sell yourself short, never think that you don't contribute – without each and every last one of YOU none of this would have been possible.

My dream is to retire to San Francisco someday. I'd like to think that I will live to see AIDS cured, but I am not sure that is going to happen in the next three decades or so. But I know with your continued efforts, you will get us ever closer to that goal, and one day, it will be achieved. And as I sit on the beach listening to the waves crash on the sand, and as I watch the sun slowly sink below the horizon, and as I feel that brisk Pacific breeze brush my cheeks, I will think back and remember – not the struggle, not the anguish, not the frustration – no, I will think back and remember each and every one of your wonderful and beautiful faces, and I will give thanks that I had the unparalleled privilege to get to know and work with YOU.

Until then, let's continue to work together for our sake, for the sake of our loved ones, and for the sake of future generations who count on us to try to leave the world a little better than we found it. God bless each and every one of you, and thank you. Well done.

Ryan White d ies at the age of 18.	The Ryan White Act is passed by Congress to pro- vide federal funds for AIDS care and treatment.			NBA basketball star Earvin "Magic" Johnson announces that he is HIV positive.		
1990			199	<b>)</b> 1		
MACS investigators show that the Hepatitis B virus is trans- mitted almost 9 times more efficiently than HIV in gay men.		· · ·				lity-control standard adopted by the NIH .

# 25th Anniversary Tributes

The MACS is generally thought of as a study that focuses on the natural history of HIV among gay men. And that is certainly an apt description: the MACS cohort has been the source of hundreds of scientific papers on HIV epidemiology among American gay men. However, that said, less recognized has been the contributions of studies like the MACS to understanding more about health in general among gay men. It is easy to forget that before studies like the MACS were fielded, we knew next to nothing about the epidemiology of substance use, tobacco use, violence, victimization, depression or life course/aging issues among American gay men. Data sets like the MACS have been crucial to efforts to advocate for gay men's health and have been essential in the development of the vision of a broader gay men's health movement. Based on data from the MACS and other studies, health advocates for the LGBT community are now waging successful fights to have measures of same sex behavior, same sex attraction and gay identity included in health studies of the American people. These studies have documented many important health disparities between LGBT populations and the American population as a whole. These very rigorous studies will in turn be used to fight for communitybased services, clinical services and community-based prevention programs that will work to raise levels of health in our communities. Thus, while the MACS has made crucial contributions in the fight against AIDS among gay men, it has also contributed to our understandings of even broader health concerns among LGBT populations in very important ways.

### Ron Stall, PhD MPH

Professor and Chair Department of Behavioral and Community Health Sciences University of Pittsburgh

I was hired to work at the Pitt Men's Study in 1994 as a technician at the Pittsburgh clinic and soon learned how to interview participants, organize community outreach events, make appointments, and draw blood, thanks to the training and expertise of all the staff. Although I worked in a bunch of different settings, this was my first professional job where I met the most wonderful staff who became my extended family. It truly was the best experience in my life professionally, and working for PMS prepared me for a future in public health. It was also a really great way to be connected to the gay community in Pittsburgh. Seeing men come into the study day in and day out, providing much of their time to help fight the disease or to find a glimmer of hope by donating blood samples, offering up their personal information – it was

and still is a true research project where everyone is working towards that same light at the end of the tunnel, no more deaths to HIV, and that gave me something to be proud of each day. Well, I know now from my experience in the field that we have not gotten to that end. However, so much progress has been made by the likes of the physicians, researchers, clinicians, support and laboratory staff, Community Advisory Board members, partner organizations, and the list goes on...all working towards that end. There is no study of its kind and no group of more dedicated staff and volunteers working towards helping those living with HIV/AIDS. Thanks for all the hard work and dedication of all involved in MACS and for the unbelievable amount of HIV research the study has garnered. I truly appreciate being part of this history.

## Matthew Moyer MPH

Research Specialist from 1994-2004

Since its inception twenty-five years ago, the Multicenter AIDS Cohort Study (MACS) has made enormous contributions to our understanding of HIV/AIDS. MACS investigators have published more than 1000 articles covering a broad spectrum of HIV/AIDS research. Pivotal findings from the MACS have helped inform the optimal care of HIV-infected individuals, as well as public health practice and policy. The MACS continues to be a unique resource as we face new challenges, such as the rising incidence of HIV in young men who have sex with men and the long-term effects of HIV infection and treatment on an aging population.

### Anthony S. Fauci, MD

Director of the National Institute of Allergy and Infectious Diseases (NIAID)

Congratulations to the Pitt Men's Study on it's 25th anniversary from all of us at the Los Angeles Men's Study. I personally and my colleagues at UCLA have enjoyed working with you all towards control of HIV/AIDS. Together we have made very significant contributions to our understanding of the pathogenesis of AIDS, the response of the human system to HIV and the effectiveness and long-term effects of treatment. This has been an exciting 25 years for all of us. We look forward to continue working with you and the men of the Pitt Men's Study and the other centers towards stopping this epidemic. It has been an exciting and rewarding collaboration!

Roger Detels, MD, MS Principal Investigator Los Angeles MACS



## **Kerry Stoner**

I remember doing a focus group with a group of African American men at the Pitt Men's Study. It was part of a project to evaluate the work of PMS. Without breaking anyone's confidentiality, I remember the sense of empowerment that these guys felt as a result of their interactions with PMS staff. Their sense of contribution, of self worthiness, of potential. It was really quite moving. **Mark S. Friedman, Ph.D.** 

Assistant Professor Graduate School of Public Health Behavioral and Community Health Sciences

25 years! In my career the MACS has changed from being a study I read about as a leader in HIV epidemiology when I was a student, then it was a study where I knew the investigators when I was at Johns Hopkins, and then lastly I came to the Division of AIDS and was lucky enough to work with the MACS as a funding source of the research. First and foremost the MACS has been a fantastic study with ground breaking research in so many ways: The first to fully describe the epidemiology of HIV and AIDS among men at risk.; The first to study so many elements of the epidemic from risk behavior to disease progression and the response to anti-retrovirals to the safety of pet ownership. What has characterized the MACS over the years has been the incredible generosity of the participants to continue to be seen twice a year for ever longer visits. This generosity has meant that the study has been able to transform itself as the epidemic has moved from unknown disease, to known disease, to a long term chronic disease. Each time the area of interest has shifted the MACS and its participants have adapted to keep answering the most important questions of the day. Today the MACS is a key part of the Division of AIDS portfolio of research on the impact of anti-retroviral therapy on men who have been infected for many years and who have been treated for many years. There is no other study like the MACS. The repository of specimens, the dedication of the participants and the long term commitment of the investigators has made it truly unique. Congratulations on being an incredible research study for 25 years. I trust that the MACS will continue to inform us as we tackle the challenges of long-term HIV infection and the guest to find a vaccine and a cure for this infection.

### **Carlie Williams PhD**

Chief, Epidemiology Division of AIDS, Basic Science Program National Institutes of Allergy and Infectious Diseases National Institutes of Health 1953 - 1993



Kerry Stoner was the third of five children and the first son of Marge and Dick Stoner, born in rural Alverton, Westmoreland County in 1951. He graduated from Washington and Jefferson College as an English teacher. In addition to teaching, he worked as a vocational counselor and on the family farm.

He moved to Pittsburgh in the early 1980's and managed a

local gay night club. He soon heard about the Pitt Men's Study (PMS) and pursued employment in the Study as a health educator. Kerry began helping bar owners and researchers communicate with each other about AIDS. He was selected to serve on the Community Advisory Board (CAB) of the Pitt Men's Study in 1984.

The CAB, a vital part of PMS, was set up to advocate for individuals who had volunteered to participate in the study. Given the sudden need for support services for those affected by AIDS, the CAB's role quickly grew beyond their original mission. Kerry and others working with the study began receiving requests for information, referrals and complaints of discrimination from those living with HIV/AIDS, their families, and friends. As a result, the CAB created a separate organization to provide specialized support services and information in the unfolding AIDS crisis.

When the CAB suggested the creation of a Coordinating Committee for the new organization, Kerry volunteered to spearhead the Committee, which included several CAB members. The community organized a series of public meetings in early 1985, which resulted in the creation of the Pittsburgh AIDS Task Force (PATF). Kerry was chosen for the volunteer position of executive director. The number of PATF volunteers and programs grew quickly in response to the increasing number of persons requiring services. When PATF received funding to hire staff and provide continuity for its programs, Kerry became the organization's first full-time executive director. In his inspirational address at the PMS World AIDS Day Service on December 4, 1991, he said: "Our actions have forever altered what was, what is, and what will be. And

#### Continued on page 10



# A Talk with Carol Perfetti



Carol Perfetti has been working for the Pitt Men's Study (as data manager) since the spring of 1984, longer than any other staff member. She holds a master's degree in information science. Though few of our clients have met her, she's been behind the scenes all the while, handling the data gathered from clients during their visits.

Photo: John Colombo

### How did you find out about the job?

I heard about it from Larry Kingsley [co-principal investigator for the Pitt Men's Study]. At that time I was working at the Graduate School of Public Health on a study of blood pressure in children. Funding was running out, and I had no idea where I was going to work next. Larry used to smoke in my office because he had a non-smoking office, and one day he mentioned that a data manager was needed for a new study that was starting up. And here I am, twenty-five years later.

### What have you gotten out of it?

It's been very educational. I came into it not knowing anything about gay culture. And if you've seen the questionnaires from the very beginning, the sexual practices section was really extensive. I was going to Tony [Silvestre, co-investigator] and saying, "What is this? Golden showers?" Tony, bless his heart, would explain all these things to me.

I've met some terrific people over the years. Ric Witt was one of them. A lot of people didn't like him, cause he was a feisty little son of a gun. But a very good nurse. I can remember him getting ready to go to some dress-up occasion, and he'd gone to the thrift shop and got several frilly dresses and was trying them on for us. "What do you think about this one?" And there's skinny little Ric with these big biceps in these frilly dresses.

### Has the job changed over the years?

Things have changed a lot. At the beginning you'd see several death reports coming in every month, and then to watch HAART therapy come in around the mid-nineties and to watch that just stop...now we hear about guys dying and it's as likely to be about something non-AIDS related as something AIDS related. I may not have known the guys, but I knew there was a guy behind this report that I was looking at, and I remember just feeling so bad that so many young guys were dying.

The few times when we've had the big celebrations, that's been my chance to see the guys, and to look around and think, man, these guys have been coming in, giving their blood and answering these questions for years and years and years. That's impressive. Numbers can get old. When you see the faces, it makes it real. It did at the twenty-fifth anniversary for me. It made me feel like twenty-five years have been worthwhile.

## Kerry Stoner, con't

remember that the good never dies. AIDS is a tragedy. The challenge is how we will live our lives in spite of it."

The community suffered a great loss when Kerry died on June 2, 1993 at age 39. PMS, PATF and an untold number of AIDS-related organizations throughout Pennsylvania have benefited greatly from Kerry's vision, hard work and leadership. The development of a comprehensive continuum of services in our region would not have become a reality without him. Kerry's abilities as a communicator and motivator of people inspired volunteers, staff and persons living with HIV to attain their highest potential and make their dreams a reality. Pittsburgh City Council declared March 31, 1992 as "Kerry Stoner Day" to honor him and his achievements.



	Effective and of bighty active activety ind	ED A an average the usual local test to			
Olympic gold medal diver Greg Louganis announces that he is living with HIV.	Effectiveness of highly active antiretroviral therapy (HAART) becomes known.	FDA approves the viral load test to measure level of HIV in the body.			
1996		199			
MACS investigators show that failure of T-cell hemostasis precedes AIDS.		PMS investigators find relationship between HIV viral load and progression to AIDS. Viral load becomes standard measure for HIV prognosis and initiation of antiviral drug therapy.			

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# Farewell, Marcy!

Marcy Holloway served as physician assistant at the Pitt Men's Study from October of 2001 until June of 2009, and in that time she gained the trust and admiration of our clients and of her fellow staff members. "Ask Marcy" was a common response to many questions that would come up in the clinic, and clients came to rely on her no-nonsense expertise and friendly nature. "Can Marcy draw my blood?" was another thing we heard a lot of!

Marcy was integral in helping to expand our cohort during recruitment from 2001-2003, and in organizing the satellite clinics in Mon Yough and Johnstown. Her duties were many, but Marcy's strong work ethic was second to none.

That drive should serve her well in her new endeavor - she will be an officer in the U.S. Air Force, most likely treating Air Force personnel and their families on base in her new home in Las Vegas. Hopefully she'll make it back to Pittsburgh from time to time to whip us in shape (and we also hope she'll be wearing her uniform!).



We are currently interviewing people to fill the position that Marcy vacated, but she will not really be replaced. We all love Marcy and we wish her the best of the best!







25 million cases reported worldwide.

U.S. AIDS-related deaths decrease by more than 40%, largely due to HAART.

African American leaders declare "state of emergency" about HIV and African Americans.

Pittsburgh MACS identifies semen as major vehical for viral transmission.

1998

The effectiveness of triple drug therapies is confirmed by the MACS.

# **Clinic Happenings**

## The "Stall Study"



Some of our clients may remember recently filling out a long questionnaire that asked questions about, among other things, child abuse and sexual development. The man behind that survey is Ronald D. Stall, professor and chair at the Graduate School of Public Health at Pitt. We recently asked Ron a few questions about his research.

### What are you trying to determine from these questionnaires?

There is now a great deal of evidence to show that gay men suffer from higher rates of a number of psychosocial and infectious disease epidemics than do heterosexual men. However, no one has a good explanation for why this is true. The standard explanation in the field is that

homophobia harms the health of gay men somehow. Our research group at the University of Pittsburgh has proposed a different theory. We pointed out that if homophobia is pervasive, then it affects everyone, including young boys. There are lots of data to show that children and adolescents who experience a lot of violence as youth have poorer health as adults. We want to see if the relationship between violence/marginalization in youth and poorer health as an adult is also true for gay men.

### What are some of the gay men's health issues you are looking at?

We're looking at depression, substance use and abuse, violence victimization and the ways that these may intertwine to raise levels of HIV risk and so HIV infection itself.

### How might those health issues raise HIV risk?

Our research group has conducted a series of analyses of data on gay men to show that there are a set of psychosocial epidemics (namely, depression, violence and substance abuse) that occur at greater rates among gay men than among heterosexual men. We've also been able to show that these epidemics appear to interact with each other and amplify each other's negative effects. In other words, if men are depressed, they are more likely to be substance abusers; if men are depressed and substance abusers, they are more likely to suffer from violence victimization. What's worse, the negative interactions between these epidemics appear to drive sexual risk for gay men. That is, the greater number of psychosocial epidemics that men have, the more likely they are to be sexually risky and even infected with HIV. A major point of this study is to study how it is that these psychosocial epidemics interact with each other over time and drive HIV risk. The MACS is the perfect study to look into this question.

## Goodbye Sharon...



In 2008 the Pitt Men's Study saw the departure of our long-time medical director Dr. Sharon Riddler. Sharon started at the PMS in 1997, making her the longest-running medical director we've ever had.

Sharon is an assistant professor of medicine in the Division of Infectious

Diseases at Pitt as well as a research assistant professor in the Department of Infectious Diseases and Microbiology at the Graduate School of Public Health. Some of our clients know Sharon as a physician at the Pittsburgh AIDS Center for Treatment across the street from us. Sharon will continue to offer treatment at PACT. We will all miss Sharon and thank her for all the great work she's done over the years for us!

## ...Hello Ross



Taking over for Sharon Riddler's position as medical director of the Pitt Men's Study is Dr. Ross Cranston.

Dr. Cranston is an assistant professor in the Division of Infectious Disease. He recently created the Anal Dysplasia Clinic at the Pittsburgh AIDS Center for Treatment. He began his

studies at the University of Edinburgh before moving to London, where he completed a fellowship in HIV and Sexually Transmitted Infection. He moved to the U.S. to conduct doctoral research at the University of California, San Francisco and then spent five years working at the UCLA Center for AIDS Research and Education in Los Angeles, where he established and ran the UCLA Anal Dysplasia Clinic.

29.4 million c	ases reported worldwide.	President Clinton signs AIDS initi to increased funding for the globa		rnational AIDS Conference in South eases awareness of the global pandemic.
1999	MACS research shows decr and non-hodgkins lympho		<b>2000</b> Natural history of HIV v described by MACS resea	

# **Clinic Happenings**

## Current Research at the Pitt Men's Study Aging and Frailty

Over the past year, you may recall one of the physician assistants asking you to "squeeze squeeze," or to "walk at your normal pace" past a marked spot on the floor. Believe it or not there is a method to our madness! Now more than ever, older HIV-infected persons comprise a large part of the HIV-infected population. There has been recent concern that HIV may modify the normal aging process, thus putting one at risk for becoming frail at a younger than expected age. Some studies show similarities in body composition and functions between older adults and HIV-infected individuals. Although there is not one easily-defined mechanism to diagnose one as being frail, literature describes frailty as including at least three of the five following components: "physical shrinking" (unintentional weight loss), "weakness" (grip strength), "exhaustion" (self reported), "slowness" (time to walk 15 feet) and "low physical activity level." All of these components are measured at some point in your Pitt Men's Study visit, thus helping us define the aging process in those infected with HIV.

### **Kidney Disease**

Your kidneys are important organs that serve as filtration devices. In about one day your kidneys process large amounts of blood and water and converts them to urine. Tiny structures in your kidneys, known as nephrons, work to assist in the filtering process. Most types of kidney disease damage the nephrons, which causes the kidney to decrease or completely lose its filtering capability. This destruction can occur quickly, but often the damage is silent and slow, taking years or even decades before it is noticed.

Kidney disease, both acute and chronic, has always been considered as a possible complication of HIV infection. In fact some studies show that kidney function testing is abnormal in up to 30% of HIV-infected patients, yet only recently has it been a primary focus of HIV research. In the HIV-negative population the two most common causes of kidney disease are uncontrolled diabetes and uncontrolled high blood pressure, although there are many other types of illnesses and conditions that can cause kidney damage. However, the exact cause of kidney disease in the HIV-infected population is still not completely understood. Researchers know that kidney disease is dependant on many factors including antiretroviral use and the HIV (immune) complex. They are also aware of the fact that there are many risk factors associated with HIV that may make one more likely

to develop kidney disease (such as diabetes or Hepatits C infection). Kidney abnormalities can be detected through protein and creatinine levels, which are assessed in both blood tests and in urine tests. Here at the Pitt Men's Study we use both tests to test your kidney functions. In addition to testing your blood and urine for your kidney function we are furthering our research via new cutting-edge methodology, assessing the rate at which your kidneys filter waste products at two time points approximately 3 years apart. The specific aim of the study is to get a better understanding of kidney disease and the effect HIV and its treatment have on kidney function.

## **Upcoming Research**

### Anal Cancer

It is now well established that men who have sex with men (MSM), and particularly HIV-positive MSM, are at greatly increased risk of developing anal cancer when compared to the general population. Unfortunately none of the benefits seen with the introduction of combined antiretroviral therapy (CART) have impacted this figure and paradoxically by increasing life expectancy may actually allow time for anal cancer to develop.

As the Pitt Men's Study enters its next grant cycle, investigators - including those from Pittsburgh - have worked to address the issue of anal cancer development in both the PMS and MACS-wide cohort of MSM. The Study has established itself as a unique source in the HIV epidemic to address research issues that demand long term follow up in both HIV-positive and HIV-negative men. Because anal cancer likely develops in a stepwise fashion with increasingly abnormal cell types over a period of time, the Study could potentially provide answers to questions such as; what is the length of time to develop a pre-cancerous lesion? What is the effect of HIV viral load is on progression of anal lesions? Is there a way in which to predict who will progress? And very importantly, what do the Study participants think of both the procedure and the test?

This research will be rolled out soon to all MACS sites. Although the specifics of what will be required or offered at each visit has yet to be decided, there will likely be one anal swab administered at each 6 monthly visit that will be tested for both abnormal anal cells and HPV. Any participant with abnormal anal cells will be referred via their primary care physician for further assessment. We will provide more information when it becomes available.

Several major drug manufacturers ag lower med ication prices in developin	5	20 years since first d AIDS case.	HIV lead ing cause of death w among persons 15 to 59 years o	f of all adults livin S worldwide are v	J .
2001			2002		
Prevalence of body changes (lipodystrophy) documented by MACS researchers in HIV-positive men receiving a range of treatments.				h indicates that es prominent in H	

## **Client Memories**

I was a young gay guy who was certain that we would never really have to worry about the gay epidemic that was hitting the eastern coast and the west coast. For some silly reason I felt that we were "safe" here. That this thing, like the 1918 Influenza Epidemic, would pass as a sad page from history. I joined the PMS and went every 6 months for many years, I didn't get my results for 3 years, I was frightened that I may have "it" and since there was nothing in those days to really address it medically, I decided to not find out my results until later. Then I got them, when I realized I needed to know to protect my sex partners from infection. The Pitt Men's Study helped me identify myself in a more community sense, not just another gay guy who went to bars. It made me aware of this horrible disease, and I went on to join Cry Out/Act Up and went to the Gay March on Washington. In 1991 I went to work at the Pittsburgh AIDS Task Force and was a case manager for 8 years. During that time I watched 160 of my own clients die, mostly gay men, some as young as 20. So now that I have been at the Pittsburgh AIDS Task Force for almost 18 years, working in prevention, I am grateful that places like my agency and the PMS are here to serve our community.

A l have been part of this Study since the mid-80s, and I feel as though it is like coming home to visit my family. I now drive from DC to here twice a year, and I prefer to come here than visit my real family. That should tell you something. This is a great study and I really enjoy all the people that I have met here and got to know over the years. I hope to see all of them twice a year for years to come. Thanks for all you do.

- Nick, client

- Floyd, client

#### - Alan, client

I am so grateful, and thankful that you found me, and invited me to come and participate in the different study groups at PMS. I remember in the beginning being fearful that exposing myself to more HIV/AIDS involvements would only some how speed up the process by which I would expire. It has been the complete opposite, however. It's been my involvement with you that I think has extended my stay. You guys have been there for me when I didn't think there was anyone else. Growing up in church, and really worrying about what they would say or how they might react to me when they discovered that not only am I gay, but that I also have the virus that only God could have sent to kill off gay people. I was horrifically frightened. Too frightened to think about it, much less come to the clinic and talk about it. Thank you!!

About 25 years ago I was introduced to the volunteer program here at the Pitt Men's Study by a wonderful guy who was a new recruiter for the study. His name was John. Being an undergraduate student here at Pitt, I was a little nervous about joining the study and volunteering information. John made me feel quite comfortable with the situation and guaranteed me that everything would be fine. How right he was. I'm very proud to be a part of the study and even prouder to have called John my friend. - Randy, client

I have been a part of this study since the early '80s. I originally joined as I had read articles about this new "epidemic" and wanted to know about it. I wanted to educate myself and give myself the peace of mind that I was not infecting anyone. - Kevin, client

I saw Marcy a day or two after my diagnosis and she said to me, "You don't know what to do, so I'm making a decision for you. Come back tomorrow and I'll walk you across the street to PACT." I came back and she literally took my hand and walked me across the street. That was five years ago.

- David, client

In 1983 or 1984, I really don't remember the exact date because my memory, like my hair, is fading quicker than I would like to remember, I read a New York Times article about a gay disease that was being called GRID (Gay Related Immune Deficiency Syndrome). The article described sexually and drug addicted "deviants" as those most susceptible, and even though I didn't see myself that way, I was alarmed. A short time later, I heard that seminars were being taught at Pitt to discuss what we know now as "Safe Sex." I decided to go to the seminar and that single decision, when I was 19 years old, saved my life. There were two men I remember clearly: Tony Silvestre and Kerry Stoner. They were so cute and it was hard to concentrate on what they were saying. I had a huge crush on Kerry and Tony had the biggest curliest hair I had ever seen. I wanted to be like them: committed, passionate and caring. Gay role models in the early 1980's were hard to come by, but I happened upon two. I don't remember much about the room in the Iroquois building, but I do remember the presentation. They pulled out condoms, lube and a HUGE dildo. To be honest, it was a little intimidating and I might say misleading in my sexual experiences. It was the first time I had seen a dildo but happily I can say it was not my last. They demonstrated how to put a condom on and any "science" that was known about the disease. After class I asked Kerry if my then boyfriend and I should start using condoms even though we'd not used them up to that point. Kerry said, "Yes, since the cause is still unknown, start wearing condoms tonight." I have been using them ever since.

It astonishes me that I have been wearing condoms for twenty-five years. I wish I could write something pithy here, something like, if you were to lay out all the condoms I have used in my lifetime end-to-end, they would stretch to Iowa and back, but I couldn't even guess how many condoms I have used, or men for that matter. When I look back at my life and think that I have staved off the ravages of HIV and have remained negative when so many of my friends and acquaintances are dead, it isn't pride that fills my head, it is gratitude. What a wonderful group of men that came before me and my generation and helped so many survive. Those guys gave up their time and lucrative careers to help me and countless others stay healthy. Men like Tony Silvestre, Kerry Stoner and Charles Rinaldo. How could I possibly find words to thank them for teaching me how to live over the past 25 years? I remember when I was a HIV Prevention Specialist, teaching people about HIV was like screaming into a cave; I rarely knew if anyone heard me. Well, I am shouting back now to Tony, and Kerry and all those that came before me. I heard you and I am so grateful you were there.

### - Mike, CAB member

WHO announces "3 by 5" init 3 mill ion people in poor co	· · · · · · · · · · · · · · · · · · ·	FDA approves a sal iva-based	HIV test.	More than 20 millior have died from AIDS si	
2003		2004			
The MACS documents the impact o	f HIV infection and HAART on changes	MACS researchers show that	t persistant GB	virus C infection prolongs	
in cholesterol levels that could infl	uence development of heart disease	survival in HIV-infected me	n		

14

I remember those early fearful years, years full of uncertainty and doom, marked by countless losses of friends and loved ones. The time was 1987. I was diagnosed the previous year and had given myself two, maybe three years to live. I felt lonely, frightened and ostracized by a relatively unknown disease. HIV then was synonymous with "terminal" and "hopeless." My hidden secret lived within me, shrouded by shame, guilt and hopelessness, reminding me each day of my mortality. One day I heard of the Pitt Men's Study and made an appointment. The Men's Study made me feel so welcome and provided a source of hope. The staff, so caring and non-judgmental, made guite an impression. I remember one day I visited a Pittsburgh hospital for a blood draw. After the secretary interviewed me for my health history and insurance information, she promptly disinfected my seat once vacated. I don't need to tell you how I felt at that moment. After finishing school, I moved to San Francisco. I was given information by the PMS that I could continue as a volunteer via the "LA Men's Study," a sister base. After moving to SF, I was fortunate enough to enter a Combivir study, which I believed saved my life. The Men's Study has provided hope and invaluable research data to arm ourselves against this terrible disease, whereas, many others have turned their backs on us based on moral and self-righteous judgments founded upon hatred and ignorance. The years since then have been bittersweet, whereas. I have maintained reasonably stable health but have bid final farewells to many loved ones affected by HIV. Now at 42, I continue to maintain hope for a cure against HIV. I extend a heartfelt thank you and "God Bless" for all your support in our efforts together. - a client

## **Client Memories**

I immersed myself in my work to escape relationships and facing the truth about my diagnosis. When I found out in 1996 that my CD count was 20 and my viral load 60,000, I found that my doctor had no idea how to help me. I didn't know what to do. Finally, after several hours, I decided to call you and the PMS to make an appointment. I had avoided coming for many years as part of denial. You saved my life the day I came to see you after so long an absence. I was welcomed and reassured that I would survive, even though I thought the end was near. Thank God for you and for all of the volunteers who gave themselves through the years so that people like me might benefit from current treatments.

### - a client

Oh God, where do I begin, after a quarter of a century Bill, Bridget, Marcy, Brian, Kristin and names too numerous to mention or remember have been such an important and positive inspiration in my life. I thank you from my whole heart and wish for all time the best possibilities for every one of you forever.

### - Wayne, client

Only a few months older than me, he changed the overwhelming perception of AIDS and brought new attention to the epidemic in the early '80s. I needed to be thrown in the PMS pool. Hollywood talent scout Henry Wilson had given us Troy, Tab, and Guy; but Rock Hudson was the first high-profile celebrity to die of AIDS on October 2nd, 1985; and that directed me to the Pitt Men's Study.

### - a client

In 1982 I was the Chair of the Central Pennsylvania Gay Alliance Health Committee located in Harrisburg, PA. Hepatitis B vaccination was recently developed and available so I was working with a group of physicians doing outreach to the gay male community to educate and help them acquire the new vaccination. During this work I became aware of an alleged connection between the development of this vaccine and the new, not well understood, Gay Related Immune Deficiency (GRID). The question most frequently being asked was, "Could these injections be causing the spread of this mysterious disease?"

In the spring of 1985 these efforts led to the development of the South Central AIDS Assistance Network (SCAAN) which met in my living room for its first two years. SCAAN was the third such community-based AIDS service organization in the state following Philadelphia and Pittsburgh. The Pittsburgh AIDS Task Force was spawned from the efforts of the newly developed Pitt Men's Study community advisory board.

In 1986, along with Tony Silvestre of Pittsburgh and Nick Ifft of Philadelphia, we created and I coined the Pennsylvania Coalition of AIDS Service Organizations (PCASO). I secured a location, facilitated monthly meetings of statewide community-based AIDS service organizations and worked with the state health department on a statewide conference. In addition PCASO affiliated with and was represented at meetings of the National AIDS Network and AIDS Action Council, both in Washington, DC.

Upon moving back to my home town of Pittsburgh in 1990 I joined the Pitt Men's Study. One of the questions asked was, "How many persons have you known who have died of AIDS?" An important question as the closer the disease is to one the more likely they are to modify their behavior. I truly did not know how to answer such a question; however, some months later I found my hand written notebook of case discussions in my living room from 1985-87. I astounded me to think that in that time frame in rural south central PA we had worked with over 100 folks that succumbed to AIDS. This was in a range from a new born to a 70 year-old man; most of whom I knew on a personal basis.

I have a female friend who talks of getting together with a long-term group of her female friends and going to dinner on a regular basis for the past 20 years. It was revealing for me to think that most of my friends of 20 years ago are simply no longer here. When I go to the Study I have observed a framed poster on the wall for the 1984 Ringling Brothers circus production at Madison Square Garden as a fund raiser for the Gay Men's Health Crisis. I and four others drove from Harrisburg to that extravaganza, but I am the only survivor.

### - Roger, client

FDA begins approving generic grams to provide more cost-e	5. 5	About 1 in 5 people who need HIV and middle-income countries are i	<u> </u>	· · ·	vices reach less than sk of contracting HIV.
2005	·	2006			
ACS investigators highlight ir lopment of diabetes among H		Pittsburgh MACS investigators ident pattern of body fat changes in HIV infe	<i>.</i> .		5 investigators iden- or for the KS virus.

# **Client Memories**

I feel priviledged to live in a city that has been continually funded to do AIDS research. I have received wonderful patient care and thousands of dollars worth of blood work for donating my time [to the PMS]. I remember many kind faces including Ric Witt. Congratulations to all who have worked for and participated in the study. A vivid memory was the day I received a letter from President Bill Clinton thanking me for 10 or 15 years of study participation. I still have that letter.

#### - Doug, client

I've been going to the Pitt Men's Study since it first began. My best friend and I signed up and enjoyed going to Pittsburgh just to see what was happening in the big city. We both lived about two hours away in small town America. I remember going to a few different locations for the tests, before going to where they are given now. After about 3 years my friend moved to Virginia and he dropped out of the study I had a few other friends who went for awhile but they all dropped out also. Twenty two years ago I met my partner and he began coming with me to my appointments. I told him he should sign up and he did so now we go together. The staff has changed as time moved on but everyone there was always very friendly. Thank you to all who are involved with this great study. We enjoy our visits twice a year to the big city, but as Dorothy said there's no place like home.

I've just been grateful for the Pitt Men's Study; I was recommended to come here by a lady friend of mine who was concerned after a friend of ours passed away. I'm so grateful to the staff who are professional and kind and caring. It isn't easy living as an HIV-positive person and dealing with the other challenges!

P.S. - I've been positive 24 years. Thanks for the help; it feels good making a cause to finding out a cure and why gay men make the decisions we make.

#### - a client

Sometimes when I feel that I'm really not making a viable and significant contribution to AIDS research, an article appears in our news letter telling of a recent development or advancement in the study that was achieved here at the Pitt Men's Study. This information, when combined with successes elsewhere and published in the news media, dispels my doubts and reaffirms for me the importance of all volunteers, regardless of their HIV status; and it doesn't matter if they are part of the PMS or another study group any where else in the world.

#### - Kenneth, client

I started coming to the PMS in 1985 when my doctor was afraid to treat me because I was gay. He suggested that I go to the PMS for further treatment. I was negative on my first visit to the PMS but found out that I was positive after my second visit and blood draw in March 1986. I was so glad that I had the kind people at PMS inform me of being HIV positive. They told me that I would be OK and that they were here to help me. They gave me hope and even suggested getting involved with PTEU where I was in the famous 0019 Study for AZT. I was also in many other studies at PTEU, hoping that I could help in the discovery of a cure for AIDS, as well as finding treatments for the side effects that so many HIV+ people were getting and dying from.

I remained healthy until 1992 when I came down with KS. My T-cells were dropping steadily and now I had full blown AIDS. I had been on AZT, since the 0019 study made it available (I was originally on the very high dose in the study and I think that helped keep me healthy for so long). Now my life and health was going to change and I looked like I was going to die within a year. These were the years where one or two patients with AIDS were dying every week. By September 1993, after a year of chemotherapy, I was too ill to work and I was told to make arrangements for my funeral.

I still made my 6 month visits to PMS (never missing one – even though I was very weak and sick) where I was treated with love and compassion by some of the greatest people that I was blessed to have treating me. They were not afraid of touching me, hugging me, giving me hope to hang on. My T-cells fell to five in 1994 and in April CMV took my right eye. Luckily I had great health care and great doctors to treat me. PMS were the ones that directed me to the right doctors when something went wrong. When the KS was covering my face they told me that radiation treatments would successfully remove the KS. The treatments worked. I bounced around zero T-cells for two years and finally the miracle drug D4T arrived in limited quantities. I was near death and had to be carried into Sam Golden's office—but after 2 weeks on D4T, I was able to walk again. I became a famous member in one of Sam's case studies presented in Japan at an AIDS conference.

PMS worked with my doctors and with those 6 month visit reports. The PMS staff encouraged me not to give up. Neuropathy in my feet made walking difficult and it seemed only the people at PMS had suggestions on what to do to help. 3TC came along and finally Crixivan and the "triples." My quality of life was now improving and the staff at PMS were still there as my cheerleaders to help me to keep on fighting. They gave me direction and guidance that kept me alive and gave me hope.

My theme song is "I Will Survive." Thank you to the staff and doctors of the PMS, my friends, for encouraging me to fight, and to not miss a dose of my medicine no matter how bad the side effects. Thank you for all the hugs, smiles and encouraging words. You all made a difference and are the reason that I am a person "LIVING with HIV" today. I have never missed a 6 month check up and even though I am healthy for a "long-time survivor," I still need to those encouraging words from the great friends that I have me over the years at the PMS.

#### **Richard**, client

	that male circumcision should be con- nprehensive HIV prevention package.		33 million cases reported worldwide.	~
07		2008		2009
	restigators identify DC-SIGN r infection by KS virus.		r risk of hardening of coronary artery nen than previously understood.	25 YEARS OF THE PITT MEN'S STUDY.

## Remembering Ric Witt, 1951-1995

### By Bill Buchanan

Richard C. Witt, CRNP, was the first clinician to be hired by the Pitt Men's Study (PMS) when our first clinic opened in 1984 in the Medical Arts Building on Fifth Avenue in Oakland. Born and raised in Michigan, Ric came to Pittsburgh for nursing school and after graduating was, among other things, a life flight nurse (where he met fellow nurse practitioner Paula Sommerville, another early PMS clinician).

Ric was a hardworking and dedicated member of our staff. Among his responsibilities was informing volunteers of their HIV results, and his compassion and patience was appreciated by the men who learned their results from him. He took this task seriously and spent whatever time



it took to counsel someone carefully and completely. Ric was an excellent nurse practitioner and a crack phlebotomist, and his medical knowledge and instinct were second to none. He was a stickler for protocol and woe to the person who deviated from it. He was a patient teacher, yet he did not suffer fools gladly.



Back in the days before effective HIV therapy, Ric's deep affection for those who had fallen ill or died was apparent. Yet as much as such bad news could affect him, he would take a moment to collect himself and then continue with his job; he was sympathetic without being overly sentimental, and he channeled these emotions into his dedication to the research and most importantly to all the PMS volunteers who counted on him. He would always take time to answer questions from and hold the hands of those who were concerned or scared or just overwhelmed by the HIV/ AIDS pandemic. Ric was the consummate professional.

But there was another side to Ric. He was an avid gardener who would bring gorgeous bouquets to clinic, and his garden at home was simply stunning. He was a member of the bass section of the Renaissance City Choir and enjoyed performing. He also bowled and played softball in the local gay leagues. Ric was a fixture in the local community, and he impacted people positively both

professionally and socially. Ric is the one member of staff that volunteers from his era routinely mention in their visits, even to this day. He truly

cared about people and the mission of this study, and it shows in how fondly he is remembered (and sorely missed) by volunteers and PMS staff alike. His is an example to which we can all aspire.

I was there the day Ric was stricken with his final illness in our clinic on Forbes Avenue. The last I saw him was as the paramedics wheeled him into the elevator to take him to Presbyterian Hospital. I walked out with him and told him he was in good hands and to get better and get back to us. He died just a short time later. But his spirit never left, and it resides here with us and guides us as we continue the work to which he gave so much. Ric enriched all those whose lives he touched, and I am grateful to have known him.

Tony Silvestre remembers his memorial service when "despite two feet of snow, Heinz Chapel was totally full. I still get chills when I remember asking everyone who ever was helped by his medical care to raise their hands and the entire group did so. That was some testament to him."



