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In this newsletter:

- **Update on the 92nd Annual Meeting and Award Recipients** by S. John Swanson, MD & Tim Gibbs, MPH
- **Khanversation** from DPHA Advisory Council Co-Chair & DJPH Editor in Chief, Omar A. Khan, MD, MHS
- **Women's Rights are Human Rights** by Kate W. Smith, MD, MPH, Program Chair Academy/DPHA
- **Latest Synopsis of the Delaware Journal of Public Health- Behavioral Health and Trauma-Informed Care**
- **Monkeypox in Europe and North America** by Steve Eppes, MD

Academy/DPHA Annual Meeting

Annual Meeting Re-Cap and the Months Ahead

Whether in-person at the Dupont Country Club (115 people), or online via Zoom (19 people) the 92nd Annual Meeting of the Academy/DPHA was a unique and successful event. The meeting opened with a reception and the Joyful Noise Choir, and focused on the needs and challenges of the I/DD community.

Board President Dr. John Swanson gave opening remarks and presented the President's Award to Verna Wilkins Hensley. Mr. Tim Gibbs presented the Executive Director's Recognition to A-Team Delaware.



A consistent message from the award recipients and Dr. Swanson was that individuals with intellectual and developmental disabilities exist on a spectrum of need, and must not be treated with a one-size-fits-all human services response any more than one type of glasses and prescription would be correct for all people with vision challenges.

The room and flower arrangements were all yellow and blue in solidarity with Ukraine, a point that executive director, Tim Gibbs explained to



the audience:

“War is a public health disaster anywhere it occurs, and a worse disaster the longer it continues.”

Just two days after the mass casualty shooting in Texas, both Dr. Swanson and keynote speaker Senator Sarah McBride drove the point home that meaningful gun reform is essential. Fortunately, Delaware has much more comprehensive and sensible laws than many other states, and we thank the wisdom of the Delaware legislature and past governors.

Keynote Speaker State Senator Sarah McBride was welcomed with a standing ovation and closed with one as well. From her personal story of growth and thriving to her comprehensive review of recent, current, and planned legislation, the audience left much more knowledgeable than when they arrived. (Pics and video here).

Senator McBride made a point of thanking the Academy/DPHA and its Executive Director for their partnership and support of the Family Medical Leave Act.



The Academy/DPHA would like to thank ChristianaCare, Highmark, Nemours Children's Hospital, the Public Health Management Corporation / Pennsylvania Public Health Association, Quality Insights, and We Work for Health for their support of this event.



The summer, be on the lookout for the first **State of Delaware's Healthcare Workforce** report from the Academy/DPHA. This report is a final deliverable for our partnership with the Delaware Health Care Commission, and a first report for the new Delaware Health Force initiative funded by the State of Delaware with Federal ARPA funding.

Timothy E. Gibbs, MPH

Executive Director, Delaware Academy of Medicine/Delaware Public Health Association
and

Khanversations - June 2022



Omar A. Khan, MD, MPH

The road less traveled

Regular readers know I usually write about healthcare through the lens of analogous interests, such as driving, or cars. About their intersection, so to speak. It's never just about the destination; it's more about the

journey, which is why cars are an apt analogy. Personally, I believe the *company* matters more than either the journey or destination: it's all about the one(s) you're with. Whether teamwork or partnership, the ones on our side matter- we keep each other strong and resilient.

Who's our co-pilot has never been more important in the pandemic. As we get stressed and stretched in all directions, it pays to have good company, the right attitude, and an eye firmly fixed on the future one wants to create.

In a time of ongoing crisis, how then do we handle forks in the road, even with the right company? How do we make choices about the right thing to do- when the choices seem difficult, even scary? Robert Frost, whose home state of Vermont I once lived in, wrote about this in The Road Not Taken:

*Two roads diverged in a yellow wood,
And sorry I could not travel both
And be one traveler, long I stood
And looked down one as far as I could*

We all find ourselves at crossroads from time to time. When considering which direction to go in, especially when confronted with new challenges, such as a pandemic, or another natural disaster, or even when faced with a new opportunity. Knowing we *desire* to do one thing, but perhaps inertia prevents us, or existing momentum towards a path better trodden- the path of history, of decades of sameness- perhaps that propels us down the same road as before. We come across a new turn on a familiar, the Road of the Same - but do we take it, or keep re-treading familiar paths? Do we improve, innovate, adapt, or do we follow the road of sameness to the same underwhelming reality as always?

Safety was slow to innovate in auto racing, which used to be an even more dangerous sport than it is now. A few top drivers and their collaborators - like Sir Jackie Stewart, Dr. Robert Hubbard, Jim Downing, Niki Lauda, and others- advocated for improved safety through innovations like softer car barriers and neck restraints for drivers. Did this stifle innovation? Far from it. This added to the driver's ability to do more difficult things- to keep going fast, to race, to win- but with a measure of security. Psychological safety and

physical safety.

Any fan of auto racing or healthcare will tell us that ‘easy’ is not necessarily ‘right’. ‘Nice’ might be the easy option, but if a driver, engineer, and pit crew aren’t crystal clear with each other about the conditions of the car, the track, and the driver, that race is lost. Nice might avoid temporary conflict, but the right thing to do creates lasting peace through transparency and conversations.

So it is with life in healthcare. We must take risks but with the appropriate safety nets, psychological and otherwise, that allow us and those by our side to be their most authentic and high-performing selves. The best among us have staying power, have constancy, have consistency - but also an insistence on living one’s truth, and on transparency. Being from the area, I get comfortable with certain places and of course, roads. Rte 52 heads more-or-less north out of the city of Wilmington (or leads to it from PA; you choose), and hosts many convenient locations and landmarks. When I talk about Delaware being representative of the country in so many ways and being the best of all worlds, colleagues sometimes tease that “all roads lead to Delaware, and clearly one of those roads is 52”. Delaware is indeed full of amazing roads and each road, in every county, has a story. Mine just happens to be here. My roads are full of meeting places, new conversations, plans hatched, of ideas dreamed up. Ideas, the best of which, excite the imagination and maybe even further the public’s health, to move towards a better and more just society. So I never question the power of chance meetings, spontaneous texts, of dreams dreamt, on roads and in roadside cafes. Of sitting in comfort but making difficult decisions, to move us towards a better place. Hope is not a plan; a *plan* is a plan. But they are both necessary to create lasting strategies.

*I shall be telling this with a sigh
Somewhere ages and ages hence:
Two roads diverged in a wood, and I—
I took the one less traveled by,
And that has made all the difference.*

That’s how The Road Not Taken ends, but where roads less traveled begin. All big ideas start somewhere: let’s get there with the right company, with bravery of purpose, and as always, in interesting cars.

Drive On!

Omar Khan MD MHS FAAFP

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Women's Rights are Human Rights

Kate. W. Smith, MD, MPH

Many of the discussions and arguments about the Roe v. Wade and the right to a safe abortion in the United States are far beyond the scope of expertise of the Delaware Academy of Medicine/Delaware Public Health Association. However, we do wish to reiterate the public health facts within this debate.

Since the Supreme Court ruling in 1973, people in the United States have had access to safe and legal medically and surgically induced abortions. Over 850,000 abortions are reported each year, with a complication rate of 0.3% requiring hospitalization, and a death rate of 0.0007% ([source](#)). This is a safe medical procedure. The American Public Health Association defines access to the full range of reproductive health services a fundamental right, and is integral to health and well-being ([source](#)).



Nearly one in four people in the United States will have an abortion by the age of 45. This number is declining - potentially due to contraceptive use - but the abortion rate among individuals of lower socioeconomic status remains the highest of all groups examined ([source](#)).

Unsafe abortion is a leading - preventable - cause of death and morbidity around the world. This is consistent with data from the United States before 1973. Unsafe abortions can lead to social and financial burdens, mental health issues, and a plethora of morbidities including incomplete abortions, hemorrhages, infections, uterine perforation, damage to the genitalia and internal organs, and death ([source](#)). Further, access to safe medical and/or surgical abortion does not fall equally in all social strata; individuals with less access to care or lack of transportation to a health care provider will be the ones who suffer most from an abortion ban.

The reasons for abortion are varied and complex, ranging from unwanted pregnancy, to lethal mutations of a fetus, to saving the life of the birth parent. Of all abortions, 91% happen in the first trimester. Virtually without exception, late-term abortions are due to health issues (in the birth parent and/or the fetus), and lead to devastation over the loss of a child who was very much wanted ([source](#)).

Roe v. Wade was codified into Delaware law in 2017 ([source](#)), asserting that the protections will remain in this state, even if the case is overturned federally. This year, Representative Debra Heffernan sponsored HB 320, which allows physician assistants and advanced practice nurses in Delaware to prescribe medication for the termination of pregnancy. The bill was signed on April 28 ([source](#)).

When a mother, father, birth parent, or family – possibly in consultation with a medical expert – determines that pregnancy should not continue, a way to terminate it will be found. Making abortions illegal will not stop them from happening; it will only stop safe abortions from happening.

Roe v. Wade was based on a constitutional right to privacy. Other aspects of this right - LGBTQ+ marriage, contraception, interracial marriage – are at risk. As the State's Academy of Medicine and Public Health Association, we express our concerns about the immediate impact of this potential Supreme Court action, and about the farther-reaching implications.

Kate Smith, MD, MPH
Program Manager, Delaware Academy of Medicine / Delaware Public Health Association

widespread rashes and instead develop only a few lesions. As such, many people may not suspect they have the disease, and it may be more difficult for medical professionals to identify. When the disease is suspected, it can be confirmed or ruled out by testing skin lesions using the very sensitive PCR test. There is no antiviral therapy for monkeypox, though public health officials believe that the smallpox vaccine, vaccinia immune globulin, and the antiviral cidofovir could be used for outbreak control in the event of more widespread disease.

In order to protect oneself against monkeypox, many of the same principles for guarding against transmission of the COVID virus can be employed. Staying away from ill persons, avoiding travel to high-risk places, hand hygiene and masking may reduce the risk of monkeypox. It is also important not to touch or handle wild mammals which could be infected. In healthcare settings, personal protective equipment (PPE) when caring for a suspected case should include gowns, gloves, eye protection, and N95 masks. On June 6, CDC elevated monkeypox travel precautions to alert level 2 ([Monkeypox in Multiple Countries - Alert - Level 2, Practice Enhanced Precautions - Travel Health Notices | Travelers' Health | CDC](#)).

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