

Peds COVID vaccine is 'our path toward normalcy'

By LESLIE CANTU

cantul@musc.edu

Across South Carolina and the nation, parents of elementary school kids can now choose to have their children vaccinated against COVID-19.

With so many competing voices out there and rampant misinformation, it's a choice that can feel scary for some. But for at least one mom, it's an option that couldn't come soon enough.

"We've been waiting for a year for this," said Allison Eckard, M.D., director of the Division of Pediatric Infectious Diseases in the MUSC College of Medicine and mother of two young children. "This is our path toward normalcy."

The Centers for Disease Control and Prevention approved the Pfizer BioNTech COVID vaccine for children age 5 to 11 after an all-day session on Tuesday. MUSC Health will begin offering the children's vaccine on Thursday.

Eckard realizes she has a perspective that most don't. She's seen children admitted to the intensive care unit at MUSC Shawn Jenkins Children's Hospital because of COVID or MIS-C, a rare condition that sometimes follows

See **VACCINE** on page 9

Historic: U.S. first lady Jill Biden visits Hollings



Photo by Marquel Coaxum

Dr. Raymond N. DuBois leads U.S. first lady Jill Biden on a tour of Hollings research labs during her visit to promote breast cancer awareness.

Staff Report

In one of the most touching moments during a visit to MUSC Hollings Cancer Center on Oct. 25 U.S. first lady Jill Biden, who holds a doctorate in education, knelt beside a breast cancer survivor and thanked her for her heartfelt plea to urge women, particularly minorities, to get their mammograms.

"We have to continue getting the word out and creating awareness," Biden said. "If they catch breast cancer early, in stage one or maybe stage two, they have a good

chance of survival, and that is what we are aiming for."

The plea came after LaToya Wilson told Biden how she was diagnosed with stage three breast cancer at age 37, just 11 months after having her youngest son. Wilson, who now battles stage four metastatic breast cancer, said she remains optimistic and thankful for the ongoing care she receives at Hollings and the opportunity to participate in a clinical trial.

"My driving force in beating this disease is my sons and my faith," Wilson

said. "Battling cancer is hard, but I'm still here. As long as I have breath in my lungs, I'll keep fighting."

During her cancer journey, Wilson, now 46, has used her Facebook page to share updates with hundreds of followers. Wilson wants to raise awareness about breast cancer in Black women, as they are more likely to die from the disease than are white women.

Biden was moved by Wilson's optimism and desire to persevere and

See **VISIT** on page 7

2 Winter spike?
Expert weighs in.

6 Pandemic journey
Photojournalist nurse
shares his insight.

4 Digital Transformation
5 Meet Akin Olatosi, M.D.
10 Well-Being

Factors in our favor as we face possibility of winter COVID surge

BY HELEN ADAMS
adamshel@musc.edu

It's hard to think about the possibility of another winter COVID surge when our numbers are falling like they are. Cases in the Tri-county area dropped another 16% for the week ending Oct. 27. But we need to be prepared, said Michael Sweat, Ph.D., the leader of the MUSC COVID tracking team.

"Watching what's happening in Europe has got me concerned. Very high growth

rates are happening throughout a large part of Europe. The U.K. in the past few weeks went up 21%, Ireland 50%, the Netherlands up 115%, Denmark up 111%," Sweat said.

Those are places with high vaccination rates that saw cases plunge, just like ours are doing right now. But cases in much of Europe recently began to rise again. The World Health Organization blamed uneven vaccination rates. Other issues may include mask fatigue, large indoor gatherings and waning immunity from vaccines.



Sweat

Will the same thing happen here? Maybe, but we have three key factors in our favor, Sweat said.

"One of them is vaccination. We are slowly getting more people vaccinated. Soon, younger children are going to be eligible for vaccinations, so that again could help put the brakes on transmission."

But Sweat noted parental resistance could affect that. "I've seen surveys that suggest that a lot of parents want to wait and see before deciding whether to get their child vaccinated."

Right now, about 55% of people eligible to get the vaccine in South Carolina, 12 and older, are fully vaccinated. That percentage is slowing ticking up. Some people also qualify for booster shots, which could reduce their risk of getting a breakthrough infection.

"The second factor that could help us this winter is natural immunity," Sweat said. "We just had a big wave of COVID. Over 45% of all of our cases happened in the past seven months. And many of them happened in the past couple of months. That will slow things down."

Sweat said that while just 16% of people in the Tri-county area have tested positive for COVID and were entered into the statewide statistics since the start of the pandemic, the number is likely much higher – and so is the level of natural immunity.



Photo Provided

Bruce Dales has logged over 5,400 miles cycling since he was diagnosed with stage 4 adenoid cystic carcinoma in 2016.

Cancer survivor finds support while staying physically active

BY JOSH BIRCH
birchj@musc.edu

Summerville resident Bruce Dales travels to the Francis Marion National Forest, mounts his bicycle and prepares for a weekly Sunday ride with the Charleston Beer Riders, a group of cycling fanatics who have become more like family than friends to Dales. After being diagnosed with stage 4 adenoid cystic carcinoma in 2016, Dales turned to running and cycling groups to become more active, be held accountable and get involved – What he didn't know at the time was just how important the support he got from friends would be in his cancer journey.

"I can't control what happens in the future. I have no way of knowing if that cancer is coming back," Dales said. "What I can control is what I do now. I can try and remain healthy and active in the event I have to battle cancer again someday."

Prior to 2016, Dales described himself as a healthy guy who only went to the doctor for an annual physical. However, early in 2016, Dales noticed a lump on the roof of his mouth that wouldn't go away. At the advice of his dentist, Dales saw an oral surgeon in August 2016. A biopsy was ordered,

and pathology results eventually found that the mass was cancerous.

Dales was referred by his dentists to Terry Day, M.D., an oncologist at MUSC Hollings Cancer Center who specializes in head and neck cancer. In September 2016, Dales had the mass in his mouth surgically removed, followed by more than a month of radiation with Anand Sharma, M.D., a Hollings radiation oncologist.

Throughout the course of treatment, and since it has ended, Dales has remained committed to living an active lifestyle. "I had a 6-year-old daughter at the time I was diagnosed with cancer," he said. "It was important for me to show her that even when you get dealt a bad hand, it doesn't mean life has to stop. Having a positive attitude, living a normal life and being active helps so much in my opinion."

Keeping active is something Dales, who works as a project manager for Blackbaud, does a lot. When he isn't cheering on the Philadelphia Eagles, Boston Red Sox or Clemson Tigers, chances are Dales is on a bike or running. Since completing treatment, Dales has run seven half-marathons, five ultramarathons, two Spartan races and three metric century rides.

See **CYCLIST** on page 9



Editorial Office

MUSC Office of Public Affairs
& Media Relations, 135 Cannon
Street, Suite 403C, Charleston, S.C.,
29425

843-792-4107
Fax: 843-792-6723

Editor: Cindy Abole
catalyst@musc.edu

The MUSC Catalyst News is published bimonthly. Paid advertisements, which do not represent an endorsement by MUSC or the state of South Carolina, are handled by Island Publications Inc., Moultrie News, 134 Columbus St., Charleston, S.C., 843-958-7480, 958-7384, 958-7488 or 937-7489. E-mail: advertising@moultrienews.com.

MUSC HCC to launch new state-of-the-art mobile health unit

By JOSH BIRCH

birchj@musc.edu

Saving lives with convenience in mind – that’s what organizers of the new MUSC Hollings Cancer Center’s mobile health unit hope to do. The unit, which will launch in November, will travel to rural and underserved communities and offer breast and cervical cancer screenings using state-of-the-art technology.

“This mobile health unit targets patients who may otherwise not have access to this type of health care, either for financial reasons or lack of transportation,” said Cindie Thrower, a mammographer at Hollings who will help with mammograms on the mobile health unit. “By going to these patients, versus having them come to us here in Charleston, it opens the door to critical health care access that could wind up saving lives.”

Thrower is excited to offer this service to communities across the state, adding that the new unit has 3D tomosynthesis mammography equipment. “By using 3D imaging, the camera is taking images in slices at different angles,” she said. “This allows the doctors to examine each layer of the breast more and see areas of concern better than with the traditional 2D mammogram machines.”

The upgraded machine is a game-changer, said Tonya Perkins, R.N., a Hollings nurse practitioner who also will help to staff the new mobile unit. Perkins said 3D imaging is especially important for women at high risk of breast cancer and women who have dense breast tissue, which can make detecting breast cancer early on more difficult.

“When we talk to patients about dense breast tissue, we explain to them that dense breasts are a white background. If you have calcifications that are white and tumors that are white, then it is harder

to see everything because of the white background. Fattier breast tissue is dark, so tumors and calcifications are easier to see,” Perkins said.

This mobile health unit carries on the longstanding tradition of the former Hollings’ mobile health unit, which first launched 23 years ago. From 2015 to October 2019, the unit helped to provide mammograms and pap smears to more than 7,000 women across 31 counties in South Carolina and diagnose 53 women with breast cancer. Of the women screened, 80% reported they wouldn’t have sought a breast or cervical cancer screening had it not been for the mobile health unit coming to where they live or work.

This effort continues a well-established partnership with South Carolina’s Best Chance Network, which provides breast and cervical cancer screenings at no cost for women who qualify. In addition, the new mobile health unit will partner with Healthy Me – Healthy SC, a collaborative effort between MUSC and Clemson to reach underserved areas and end health disparities in South Carolina. Between the two entities, all 46 counties in South Carolina will be served.

The mission to detect cancer early and save lives is important to Perkins, whose mother battled ovarian cancer and whose father died of mesothelioma. “This is personal and important for me to help people get their screenings, based on my own family history of disease and cancer.”

J. David Sudduth, executive director of Healthy Me – Healthy SC, said the mobile unit will aid in their mission to serve rural and underserved communities across the state. “This new Hollings Cancer Center mobile unit will allow us to combine the latest technology with outstanding clinical care to fight cancer right where people live and work,” Sudduth said.

Ensuring that the mobile unit reaches



Photo by Marquel Coaxum

U.S. first lady Jill Biden stopped for a photo in front of the new mobile health unit with (left to right) Dr. David J. Cole, Dr. Ned Sharpless, Dr. Rebecca Leddy, Dr. Craig Lockhart, Dr. Raymond N. DuBois, Dr. Marvella Ford, Bria Sanders, Darlene Gaffney and Alicia Commodore.

those communities is important to David Bush. The upcoming launch will mark Bush’s fifth year driving the mobile health unit, which, he said, has been one of the most rewarding periods of his life.

“I get to interact with patients and feel like I’m helping someone who might not otherwise have access to health care,” Bush said.

The former professional truck driver moved to Charleston from Baltimore decades ago. He, like Perkins, said the mobile health unit is a personal mission and one of the reasons he’s excited to get back out on the road. Bush lost his 49-year-old mother to lymphoma when he was only 23 years old.

“There wasn’t any real early detection back then,” he said. “She had an earache, went to her doctor, and they found the cancer. And six months later she was gone. The doctors back then said, ‘If only we found it earlier.’ Now I get to play a part in potentially helping someone detect a cancer early, and that’s really rewarding.”

With Bush behind the wheel and Perkins and Thrower providing access to critical screenings to patients, the

Hollings mobile health unit team hopes to use the new technology onboard to improve the care services they provided in the former unit for two decades. Thrower said she is excited about the opportunities this state-of-the-art unit provides for patients.

“My hope is that people take advantage of the mobile health unit and become annual patients so that we can catch any changes in their breasts as early as possible and help them to have the best outcome as possible.”

Appointments are required for patients of the mobile health unit. To schedule the unit, you must have a minimum of 20 confirmed patients. Those interested in booking the mobile health unit should call 843-792-0878 or send an email to hccoutreachservices@musc.edu.

Healthy Me – Healthy SC provides funding for operations, which comes from MUSC’s Health Innovation dollars from the South Carolina General Assembly. The new mobile health unit was purchased for nearly \$1 million by MUSC, MUSC Health and Hollings Cancer Center.

‘Digital Transformation - Pushing the Envelope’

BY DAVID J. COLE, M.D., FACS

MUSC President

In the world of high-performance flying (think space shuttles and F-16s), the phrase “pushing the envelope” is commonly used. The expression comes originally from mathematics and engineering, in which an envelope is a boundary, but was popularized by test pilots (especially those depicted in Tom Wolfe’s book “The Right Stuff”). In aircraft design and testing, the technical meaning of “envelope” is the whole set of limitations governing safe operation of the aircraft. The simplest common meaning of “pushing the envelope” is to push the boundaries of what is possible.

The purpose of a test pilot is to take a new aircraft to the limits of performance and, if possible, beyond – i.e., pushing the envelope. To be successful, and survive, test pilots must understand capabilities and limits of the airplane, their individual talents and the local environment.

WHY WOULD ANYONE DO THIS?

Because that is how you change the world.

It is the innovators who question boundaries – they imagine, develop and deploy new technologies that actually change the envelope and then define new boundaries and challenges to consider. On Dec. 17, 1903, Wilbur and Orville Wright made four brief flights at Kitty Hawk with their first powered aircraft – the first successful airplane. One lifetime, and many test flights later, humans landed on the moon.

What does this have to do with MUSC? Like a high-performance aircraft, our purpose is not merely to “fly the aircraft.” As an academic health system, we are expected to redefine the boundaries of health care. Literally, “changing what’s possible.” This dimension is what, in my opinion, sets us apart and likely what provides the purpose and fuel for our students, staff, faculty and health care providers.

So, what is my purpose in drawing these flight analogies? (Aside from getting a chance to show some cool pictures of jets in flight). I believe there are some relevant parallels for us to consider:

❑ Basic flying means that you must be moving forward (certainly not backward).

❑ Functioning at a high-performance level means that you must live at, near and sometimes beyond the edge of the envelope.

❑ Pushing the envelope comes with risk and if pushed too hard could lead to structural (or personnel) failure.

❑ Introducing new technologies and approaches can enable safe and sometimes breathtaking advances that change the boundaries of the envelope and therefore



what is possible.

❑ Pushing the envelope safely and successfully is a team sport – from the conception, testing and implementation of new ideas and possibilities.

In two previous blog posts, Life Beyond COVID-19 and Tyrannosaurus MUSC Rex?, I shared some thoughts related to how MUSC must evolve to meet growing demands across our tripartite mission. Unsustainable costs and massive student debt, poor specialty care access, inequitable delivery, redundancy, hyper competition, lack of transparency – they all require more than one-off solutions. It’s why the term transformation is so apropos; we can’t do things the way we’ve always done them anymore. That world where we created those processes, standards and culture no longer exists, and if we are being honest with ourselves, it’s the difference in trying to continue to fly our Kitty Hawk Flyer when what we need is an F-22 Raptor.

The envelope is elastic, constantly changing. There is a pretty big difference between the capabilities and envelopes of a Kitty Hawk Flyer and an F-22, but both aircrafts pushed the boundaries of what was possible in response to the demands of the time and the technology available to make it happen.

One major tool within our grasp that can help us to push the envelope is digital technology.

A recent webinar led by George Westerman, DBA, principal research scientist for Workforce Learning in MIT’s Abdul Latif Jameel World Education Lab, provides an excellent snapshot of the difference between fast-tracked technology solutions and actual transformation.

“Digital transformation is less of a digital problem than it is a transformation problem,” Westerman said. “It’s a leadership problem for envisioning and driving change.

He goes on to challenge certain old-world assumptions about digital transformation as an incremental

technology aid, with some very specific examples of how industries, including health care (e.g. COVID-19 and the explosion of telehealth adoption nationwide by providers and to some extent, payors), have flipped the script on those assumptions. Of note, much of what he explains is related to how best to transform culture and therefore, business. To me, this also aligns very nicely with what we seek to transform in our patients’ experiences and our daily work lives at MUSC. The move to integrate, consolidate and automate tedious, ineffective and outdated technologies with the new OurDay system for operations and human resources (coming to you in 2022-2023) is a specific, relevant example.

Key takeaways for today? We must pursue new ways of doing business, and that is going to take pushing the envelope across our clinical, operational, research and academic scopes of work. Now here’s the really cool part ... right now, with content experts and stakeholders from across the enterprise, we’re creating a strategic roadmap that defines how we’re going to achieve this transformation. Some of the components include how it will be governed at the enterprise level, how we are going to prioritize what changes happen and when, how we allocate resources to get this important work done and how we are going to align the myriad examples of excellent work already happening in siloes around MUSC. We’re going to address pain points and innovate in ways we haven’t even thought of yet; If we can do this successfully, I predict that history will embrace our institution as a pioneer in positively transforming health care for our state and nation. The second key takeaway is that we need to pay attention to and support our teams and each other to make sure that we are in a safe zone and have the resilience to function safely at a high-performance level (more on that in my next blog).

Read the President’s blog, “Cut to the Chase,” at <https://web.musc.edu/about/leadership/president/the-chase>

MEET AKIN



Akin Olatosi, M.D.

Department; Years at MUSC *Department of Medicine-Infectious Diseases, MUSC Health Kershaw Medical Center; 4 years*

How are you changing what's possible at MUSC

I look forward to change while fostering an environment ready to deliver quality health care services.

Last book read

"Liar's Poker" by Michael Lewis

Hobbies or interests

Soccer

Three people (alive or dead) you'd invite to a dinner party:

Martin Luther King Jr., Nelson Mandela and Pele

Favorite restaurant

Solstice in Columbia

Favorite place in the world

Cape Town, South Africa

Favorite Quote

*"People only see what they are prepared to see."
— Ralph Waldo Emerson*

All New MUSC Brand Boutique

The new and improved MUSC Brand Boutique is the one-stop shop for everything MUSC branded. This easy-to-use online store is opened to all MUSC students, staff and the public for personal or gift orders and offers a wide variety of merchandise and apparel with the MUSC, MUSC Health, MUSC Children's Health and MUSC Shawn Jenkins Hospital brands. You can select items for yourself, family, friends or teammates. Faculty, students and staff can also purchase branded white coats and scrubs.

Shop today at MUSC Brand Boutique:
muscbrandboutique.com

1-844-SC-HOPES

Mental Health & Addictions Support for Challenging Times

Mental Health Support You are not alone. Our team is available to help provide resources, and connect you to treatment options.	Addictions Help Remember you may have a drug or alcohol problem. Our addiction experts will assist you in finding the best path forward.	Healthcare Workers Our clinical team offers specialized support for those providing direct care services for COVID-19 patients.	24/7 Availability Our specialized team of mental health and addiction counselors are available day or night. Call us anytime.
---	--	---	---

CALL US TODAY AT 1-844-SC-HOPES (1-844-724-6737)

The COVID-19 pandemic has had a tremendous impact on all of us in South Carolina, and we are here to help! The South Carolina Department of Mental Health (SCDMH) and the South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS) have teamed up to offer a 24/7 support line to address the challenges we face in today's world.

Please call and speak with one of our experienced helping professionals today - they will offer guidance, support, and resources to help.

(Note: SC-HOPES is not a crisis line. If you are experiencing an emergency, please call SCDMH's crisis line at 833-344-2274.)

DMH South Carolina Department of Mental Health | Deaf & Hard of Hearing: 1-803-329-3329 | DAODAS South Carolina Department of Alcohol and Other Drug Abuse Services

The MUSC family is invited to the annual

MUSC VETERANS DAY VIRTUAL CEREMONY

Wednesday, November 10, 2021
3:00 - 4:00 p.m. | [Microsoft Teams](#)

Ceremony Host | Tom Crawford, Ph.D.
Navy veteran, MUSC Health System Chief Operating Officer

Featured Speaker | Matt Redding
Army veteran, Deputy Director, Individual Assistance
FEMA Office of Response and Recovery

Thank you Veterans for your service!

MUSC veterans and family members of veterans are asked to share military photos for the ceremony slideshow. Join the community and upload photos to the [MUSC Veterans, Family and Friends Teams Channel](#).

Veterans who would like their name included in the program should self-identify as a veteran by Nov. 2 to Human Resources or via MyRecords (if available). Check your MUSC inbox for details and more information.

TIS THE SEASON ...

ANGEL TREE Lighting

You're Invited...

Date: Wednesday, November 10, 2021
Time: 5:30 pm
Location: MUSC Shawn Jenkins Children's Hospital & Pearl Tourville Women's Pavilion (garden facing Calhoun Street)

For social distance measures, watch live here:
<https://fb.me/e/1UyDf4t7f>

*To adopt an Angel, contact Melissa Kubu at fullerme@musc.edu

MUSC Health
Medical University of South Carolina
Changing What's Possible

A raw portrait of a hospital

BY BRYCE DONOVAN

donovanb@musc.edu

As a photojournalist for more than 20 years, Alan Hawes saw life up close. NFL playoff games from the sidelines. Bruce Springsteen from the front row. Standing on the deck of a barge as the Civil War submarine the H.L. Hunley was lifted from the bottom of the Atlantic Ocean.

But through all these exhilarating experiences, what stuck with him the most – what left a tack-sharp image in his mind, long after the photo was snapped and published – were the smaller, more intimate moments.

“One of my life goals was to make an impact on the world through my career. And for a long time, I felt like I was doing that with photojournalism,” Hawes says. But one day, after a particularly emotional assignment at a hospital, he began to doubt his convictions.

“I saw these life-changing things happening in front of me,” the Chicago native explains, before briefly pausing to take a small step back in thought. “As a photographer, you’re an observer – and it’s an important job, being that messenger – but seeing those people work, the way they cared for the patients, the difference they could make, I felt like it was time to be a participant.”

And just like that, Hawes enrolled in a human physiology night course. It was really hard – and humbling for a father of two who was experiencing a bit of professional uncertainty – but he managed to get an A.

“I know this sounds weird, but I felt like I had a gift for understanding how the human body works,” he says. That led to another class. And another. “Then I was in it,” he says, with a wry smile. For almost two years, he continued to work as a newspaper photographer during the day and take nursing classes at night.

Eventually, his side passion became his central one.

DEVELOPING A TALENT

When Hawes was 12 years old, his father gave him a camera – a real one, one of those really nice SLRs with a big fancy lens – as a middle school graduation present. It wasn’t completely out of the blue. This was the same kid who used to always save up his money to buy film for the family’s Polaroid.

Once he had his hands on a legitimate camera, he was in business. And so he began to learn all the little nuances of exposure, shutter speed, aperture. That curiosity led him to serve as a photographer for his



Photos by Alan Hawes

A team of nurses, patient care technicians and a respiratory therapist prepares to turn over a COVID patient who has been on his stomach for 24 hours. This technique, known as “proning,” helps a patient’s lungs to oxygenate better.



After completing a phone call to a patient’s wife, telling her she needs to come to the hospital because her husband is dying, MICU nurse Andrea Crain cries at the nurse’s station as patient care technician Kelly Burchette comforts her. “Everybody is dying, and it just makes me so sad,” she said.

high school yearbook. Over the next several years, he developed a deep passion for the craft. During one assignment, he met a firefighter who introduced him to the art of listening to a police scanner. It was the window into the community, he told Hawes. That’s where the good stuff was, he said.

“I immediately bought one of my own, thinking if I had a scanner and a camera, I could take pictures of what was going on and then sell them to the local paper,” Hawes says. And, as simple as that, it worked.

After a while, the Chicago Sun-Times and the

Associated Press would buy just about anything he shot. His reputation landed him a full-time job with a newspaper in Greenville and ultimately with the Post and Courier in Charleston.

His camera became a part of him – like an appendage.

Over the next two decades, Hawes would carry that appendage with him to document emotionally charged and poignant moments. The confederate flag coming down from the S.C. Statehouse. A man whose

See PHOTO on page 10

VISIT *Continued from Page One*

help others during difficult times. “LaToya, you and I have something in common. I want to use my platform, too, and that’s why I’m here today,” Biden said.

Biden’s tour marked a historic moment in Hollings’ history, as it was the first White House visit to the center. Also in attendance were MUSC President David J. Cole, M.D., FACS; Hollings director Raymond N. DuBois, M.D., Ph.D.; Marvella E. Ford, Ph.D., Hollings Associate Director of Population Sciences and Cancer Disparities; and Ned Sharpless, M.D., director of the National Cancer Institute.

Afterward, DuBois said the visit was an honor. “This visit has meant so much to us here at MUSC Hollings Cancer Center,” he said. “We were very proud to showcase the innovative community outreach and engagement programs that we offer and our translational research efforts that are advancing cancer care.”

Cole, who also is a surgical oncologist, told Biden that Hollings Cancer Center is the crown jewel for MUSC and the state. “Hollings is able to address cancer disparities as one of 71 NCI-designated cancer centers in the nation, provide excellent quality of care and conduct cancer research that can be translated into better treatment for our patients. As a cancer provider, you can see what a difference that makes in your patients’ eyes.”

He said the visit showed just how far MUSC and Hollings have come since the cancer center was formally established in 1993.

“I believe that the first lady’s visit is a visual and physical statement of what we have become — an institution of impact and purpose,” Cole said. “For her to come here and be a part of that and share a moment is incredibly significant.”

During the tour, Biden also met with Ford to learn about Hollings’ initiatives to reach underserved and rural areas in South Carolina. The mission is personal for Ford.

Ford, a two-time survivor of breast cancer, said the opportunity to share her work and experience with the first lady was an honor. “Our motto is ‘Early detection saves lives.’ The first

lady reiterated that by stressing how important it is to diagnose cancer early on,” Ford said. “Her visit really helped to reinforce our message and encouraged us to broaden our statewide efforts to help to reduce cancer disparities and improve health equity outcomes.”

As South Carolina’s only NCI-designated cancer center, Hollings’ mission is to reduce the burden of cancer for all South Carolinians. That includes bringing lifesaving education, research and screenings to rural areas.

Biden heard about Hollings’ MOVENUP cancer education program, which delivers information through a train the trainer approach to community partners, who in turn deliver the information to people in their communities.

Darlene Gaffney, a cancer survivor and participant in the MOVENUP program, told Biden how impactful the initiative has been for the Black community. “I can take my story as a cancer survivor and share it with the community,” Gaffney explained. “This program saves lives by improving education, awareness and screenings, but it also shows communities of color and other minorities that we care, that we see them and that we value their lives.”

As part of the tour, Biden met with Nancy Klauber-DeMore, M.D., a breast cancer oncologist and Hollings researcher, and Ingrid Bonilla, a fourth-year MUSC medical student and breast cancer researcher. Klauber-DeMore’s research identified a protein, SFRP2, that aids in cancer cells hijacking the development of new blood vessels, known as angiogenesis, to fuel their own growth. Klauber-DeMore explained to Biden how this research could lead to a means of cutting off fuel to cancer cells, which in turn would stunt the tumor’s growth.

“I was so honored to have the opportunity to explain the research that we are doing at Hollings Cancer Center to develop a new therapy for breast cancer with our drug IVT-8086. I found Dr. Biden to be caring, compassionate and very knowledgeable,” Klauber-DeMore said. “Her passion for promoting cancer awareness and research was evident as a result of the personal losses that she has experienced, and I



Photo Provided

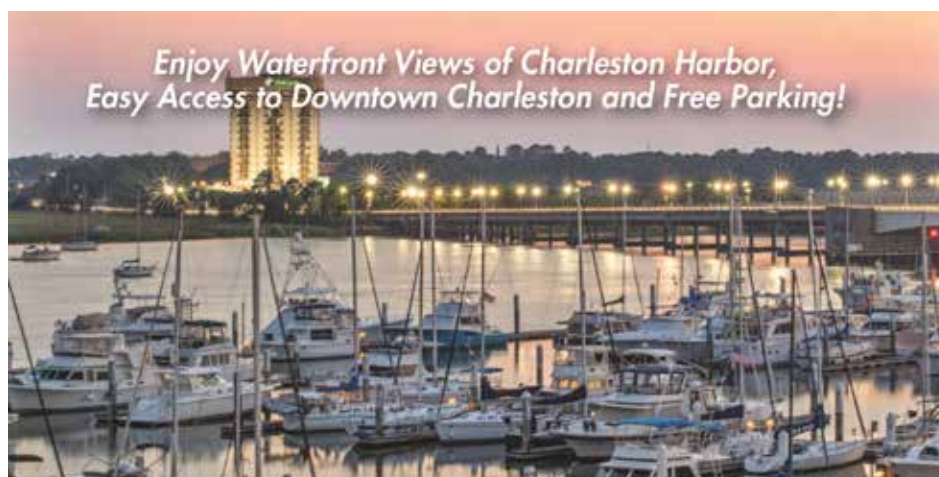
U.S. first lady Jill Biden greets LaToya Wilson, a breast cancer survivor, after Wilson shared details about her battle with cancer.

applaud her for her efforts.”

At the last stop, Biden toured the new Hollings mobile health unit, which will officially launch soon and offer mammograms and pap smears to women

in 31 South Carolina counties. The new mobile health unit carries on the longstanding tradition of the Hollings

See VISIT on page 11



Looking for a great staycation location with wonderful views, an amazing restaurant and bar? We have a great meeting space venue and Happy Hour deals right around the corner from MUSC!



Our beautiful Charleston, SC hotel is conveniently located off Savannah Highway (Hwy 17) and overlooks the Ashley River. Our location is perfect for guests looking for lodging near Charleston’s best attractions and is close to MUSC. Charleston is known for its amazing history, restaurants, and shops. We offer free shuttle service to the historic Downtown Charleston area for your comfort and convenience.



Justin Claiborne Sr. • Sales Manager
301 Savannah Hwy, Charleston, SC 29407 • 843-460-1442 (Direct Line)
<https://www.ihg.com/holidayinn/hotels/us/en/charleston/chsr/hoteldetail>

LISTEN UP!

The MUSC Catalyst News is the **BEST** and **MOST EFFECTIVE** way to reach students, faculty, staff, patients, AND patient visitors in the MUSC community!



Promote your message in the Catalyst News today!

The MUSC Catalyst News is an award-winning newspaper, delivered bi-monthly (every two weeks.) The Catalyst News was recognized in 2008 as **best newspaper-newsletter by the SC-PRSA**. The Catalyst News serves an **audience of more than 17,000** MUSC students, faculty, researchers, hospital patients, their families and patient visitors.

MUSC is among the top three employers in the Tri-county area.

The Catalyst News is available (readable) in a PDF online version, which means that each advertisers' message is also promoted electronically.

<https://web.musc.edu/about/news-center>



Contact us today!

843-958-7489 • advertising@moultrienews.com

Island Publications, Inc.'s acceptance of an advertisement(s) for publication in the MUSC Catalyst is conditioned upon MUSC's acceptance of said advertisement(s).

VACCINE *Continued from Page One*

a COVID infection, and she's seen how sick they can get. Last week, an unvaccinated teenaged patient died.

"That's the perspective that we as pediatricians have, as we get to see the whole spectrum of the pandemic from kids who do fine to kids who don't. Not everybody in the community has that perspective," she said.

And although death is the marker most often used in public discussion to gauge the seriousness of COVID, it's not the only outcome that should be considered, Eckard said. Hospitalization, lingering symptoms and missed school are all serious negative effects. Long-term effects from COVID-19 are also possible but currently unknown.

The vaccine, on the other hand, has been shown to be safe and effective. The side effects most likely to be reported in the 5- to 11-year-old trial group are injection site pain, fatigue and headache. Myocarditis, the side effect that seems to concern parents the most, was not reported in that group. When it does occur, it's more likely among males in late adolescence or early adulthood, Eckard said, but even then, it is usually mild and gets better quickly. She expects this side effect to be even more rare in the younger age group.

And, she noted, it's important to remember that COVID itself can also cause complications like myocarditis, which occurs more commonly and tends to be much more severe. Earlier in the pandemic, when kids were home and masking and social distancing were more stringently observed, it was easier to avoid COVID. Now, with Delta circulating and community transmission rated as "substantial" by the CDC, it's more of a matter of "when" rather than "if" the unvaccinated will get COVID, she said.

"I think 'wait and see' is not the right approach because as you wait, there's a good chance your child will get infected," Eckard said. "I think it's not a good gamble."

None of the children admitted to MUSC Shawn Jenkins Children's Hospital because of COVID, from the beginning of the pandemic to now, were fully vaccinated, she pointed out.

Serious COVID remains relatively rare in the 5 to 11 age group, she said. But children that age are just as susceptible to COVID and just as likely to transmit it as adults – something that wasn't clear at the beginning of the pandemic, when children were kept close to home.

And CDC data shows that 32% of children age 5 to 11 who were hospitalized for COVID-19 had no underlying or preexisting conditions.

"I've said from the beginning, you've got to have a healthy respect for this virus," Eckard said. "There's so much we don't know about it. This is not a common cold. This is not even influenza. This is different. This is something we have never seen before. We don't know a lot about it; it's very serious, and it has the potential for long-term effects."

Eckard encouraged parents who have questions to speak with their child's pediatrician. And she reminded parents that another spike in cases is expected around the holidays, which are now just weeks away. To celebrate safely with family members of all ages, it's best to vaccinate everyone who is eligible, she said.

PREPARATION FOR ROLLOUT

To prepare for the pediatric vaccine rollout, all providers tasked with giving vaccines, whether they typically see adults or children, must complete an online training, said Ali Worthy, director of administrative operations for the pandemic response team at MUSC Health. Providers who usually care for adults will then receive further in-person oversight and training from clinicians with pediatric experience.

The pediatric vaccine is exactly the same as what is given to teens and adults with one significant difference – children will receive 10 micrograms, compared with 30 micrograms for teens and adults. The needle itself will be smaller for children, and there will be more doses per vial for the children's version.

The most visible change will be packaging – the vials with the vaccine for children will have an orange cap to differentiate them from the adult vials. The current vials for adults have a purple cap.

However, just like adults, children

MUSC Children's Health COVID-19 pediatric vaccine schedule

□ Beginning Thursday, Nov. 4:

- 180 Lockwood Blvd., 7 a.m. to 7 p.m. Monday through Friday and 7 a.m. to 4 p.m. Saturdays.

- ART Pharmacy, 9 a.m. to 4 p.m. Monday through Friday.

- SJCH Pharmacy, 8:30 a.m. to 4:30 p.m. Monday through Friday.

- Rutledge Tower Pharmacy, 8 a.m. to 5 p.m. Mondays, Tuesdays, Thursdays and Fridays, and 7:30 a.m. to 7:30 p.m. Wednesdays, Saturdays and Sundays.

□ Beginning Friday, Nov. 5:

- Summey Medical Pavilion tents: 3–8 p.m. Monday through Friday and 7 a.m. to 4 p.m. Saturdays.

□ Beginning Monday, Nov. 8:

- Charleston International Airport: 3–8 p.m. Mondays, Tuesdays and Thursdays.

will get two doses, scheduled three weeks apart. People are considered fully vaccinated two weeks after the second dose. Some children with certain immune system conditions may require a third dose.

Worthy said that MUSC Health is staggering its opening of vaccine clinics, beginning with the former DMV site at 180 Lockwood Blvd., on the peninsula. It will then open vaccine clinics at MUSC Children's Health R. Keith Summey Medical Pavilion and Charleston International Airport. The three pharmacies on the peninsular Charleston MUSC campus will also have

the vaccine.

As those sites get underway, MUSC Health will begin offering the vaccine at its four pediatrics practices in North Charleston and Moncks Corner. It is also working with the Charleston County School District to offer after-school clinics throughout the district.

Parents are encouraged to make appointments at this time. As of Wednesday, MUSC Health had ordered almost 4,000 doses for the Charleston Division, some of which will be shared with the Midlands Division; 900 for the Florence Division and 600 for the Lancaster Division.

CYCLIST *Continued from Page Two*

In total, Dales has logged over 3,200 miles running and 5,400 miles cycling since 2016. He said he doesn't compete in the events expecting to win – he uses every turn of the wheel and every mile as proof that there is life after a cancer diagnosis. He hopes to encourage other patients, convincing them that a cancer diagnosis doesn't have to define their futures.

"When you get the news you have cancer, you really have two choices – sit around feeling sorry for yourself and not try and enjoy what you have, or you can make a conscious effort to do things differently and do it with purpose."

Today, Dales reflects on the countless times he had friends and family join him for runs and rides for one reason – to support him, even if they weren't avid cyclists or runners themselves. He said he is grateful for his wife, Tanya, who was

his rock throughout the whole journey, and for his team at Hollings, which diagnosed and treated his cancer and gave him invaluable time to make more memories with family and friends.

"It's undeniable that Hollings is one of the best cancer centers you can go to," he said. "I can't tell you how much it meant for me to be able to be treated in my hometown without having to drive hundreds or thousands of miles."

Dales plans to show his support and gratitude for his team at Hollings on Nov. 6 when he tackles the 100-mile route during the upcoming LOWVELO 2021, an annual event that raises money for lifesaving cancer research at Hollings. Giving back is nothing new for Dales, who has become involved in numerous cancer organizations, including Livestrong at the Summerville YMCA and the Ulman Foundation, and by donating to St. Jude and MUSC Shawn

See **CYCLIST** on page 11

Balancing physical, mental health during the holidays

It all started last weekend with Halloween and continues through the first of the year ... the Holidays! Advertised as a joyous, celebratory and giddy time of year, these next couple of months can also leave many of us feeling physically and emotionally drained. Finding and practicing some simple strategies to balance the hustle and bustle may help us enjoy the specialness of this season.

MODERATION

Moderation means the avoidance of excess or extremes. Simply put: don't over-do it. There are so many facets of our day-to-day lives where we can practice moderation and get out of the "all-or-none" thinking. Take some time to reflect on some aspects of your life where you can practice more moderation – especially during this season.

Being moderate with your food intake means eating enough to satisfy your body's cravings and nutritional needs,

but not overindulging – at least not often. A special occasion indulgence (thinking Mom's homemade seasonal apple crisp) can still be in the spirit of moderation. Allowing yourself to enjoy food shouldn't leave you feeling guilty.

MINDFULNESS

Practicing mindfulness – being present and aware of your body's thoughts and feelings – can be an extremely helpful tool for reducing stress. One of the best ways to practice mindfulness is to meditate. There are so many ways to meditate to promote a feeling of calmness and stability. You may want to try several to find out what works best for you. It could be simply walking outside and taking several deep "elevator" style breaths or turning off the lights and listening to a relaxing melody. Keeping a meditation practice as part of your healthful routine is best but having a strategy in your back pocket for more immediate use is good too.

Mindful eating encourages us to slow down as we enjoy the special-occasion foods and social events during the holidays. Turn your meal time into an experience: take time to absorb the atmosphere of your social setting – the decorations, the table arrangement, the company you're surrounded by. Then practice the same with your food – notice the arrangement on your plate, the colors, the smells. And as you start to take small bites, enjoy the smells, textures and flavors of the different foods. You might find yourself more satisfied with less food as you take this mindful eating journey.

MOVEMENT

Go outdoors – it's Charleston's best time of year! Studies suggest that outdoor movement has additional mental health benefits, beyond physical benefits, like stress relief and increased concentration.

MUSC Health & Well-Being

By Susan L. Johnson, Ph.D.,
MUSC Office of Health Promotion



Plan movement into your daily routine. As little as 10 minutes is beneficial, but also plan to step outdoors if you need an immediate stress relief. Grab a co-worker or family member to provide support and camaraderie.

Take your holiday gatherings outdoors. Plan a family kickball game after eating or create an outdoor scavenger hunt. Walk around Colonial Lake with your co-workers and enjoy a picnic style meal together for your holiday event.

Happy holidays from the Office of Health Promotion! Join MUSC's Imagine U Well-Being platform by visiting www.musc.edu/iu.

PHOTO *Continued from Page Six*

motorcycle careened over the side of the James Island connector left covered in so much plough mud, you could only see the whites of his eyes. Two Citadel football players sitting inside an ice freezer, the kind you see in front of gas stations, doing whatever it took to escape the blazing summer heat.

He snapped tens of thousands of images over the years; a surprisingly high number of them were so good that they won regional and national press awards, some gaining international accolades. Those images would appear in newspapers across the country and giant magazines like Sports Illustrated, and they would earn him the reputation as one of the best photographers in the business. But ultimately, all of that wasn't enough for Hawes. And as difficult as it was to leave behind a career he loved, he was convinced his calling was elsewhere.

FINDING A HIGHER RESOLUTION

In 2011, Hawes accepted his first job as a registered nurse at Summerville

Medical Center. Two years later, he came to MUSC Health and has been here since. During his eight-plus years at the teaching hospital, he has worked in critical care, on the rapid response team (they are first on the scene in the hospital when there is concern for a deteriorating patient) and most recently, with some of the most serious COVID-positive patients in the hospital's medical intensive care unit (MICU).

"Once I made it to the ICU, I knew I was in the right place," he says. And when the world changed forever in March of 2020, not so surprisingly, Hawes was one of the first to jump into action in the COVID unit.

"I knew I was going into the belly of the beast in that unit, but that's what I like to do," he says. Just like all those years ago when he'd carefully keep an ear to the police scanner, looking for the action and then heading toward the trouble when most people would be headed in the opposite direction, he leaned into the heat and didn't back off.

"It was super exciting but terrifying. But that was where the news was. I will

always have that news bug in me. To experience up close what the rest of the world doesn't normally get to. I had a front-row seat."

Only this time, it was with a terrifying and largely unknown virus, not Tom Petty or the Green Bay Packers.

DEPTH OF FIELD

Somewhere along the line, Hawes had the idea to marry his two passions. After talking with hospital leadership, he got the green light to bring his camera into the units, something that is particularly tricky in the new world of patient privacy laws. But with the right permissions and everybody on board, it was something that could be carefully navigated.

Hawes wanted people to see what he and his colleagues saw on a daily basis. He wanted them to see the compassion. The struggle. The reality.

"Honestly, as I was walking toward the building on the first day in the COVID unit, I knew how good a story this would be to cover as a photographer," he says. Pride in his team coupled with frustration surrounding all the vaccine-

related misinformation were the main reasons he wanted to do it. What "it" was, he wasn't sure at the time, but he knew that through photographs – something not even the best writers can compete with when the pictures are really good – there was an opportunity to tell a powerful visual story. One that lets the general public peek inside a place that rarely pulls back the sliding blue drapes – and for good reason. After all, there is no more private, intimate or vulnerable environment than inside a hospital.

For the next several weeks, whether he was on the schedule or not, Hawes would grab his camera and head into the hospital. At first, he explains, his colleagues were a bit leery of him. But he wasn't just a guy with a camera. He was one of them. Slowly, they began to let down their guards, and eventually, they forgot he was even there.

What he witnessed was humanity at its absolute best ... and worst.

A man dying slowly from COVID. Another with seemingly the same fate

See **PHOTO** on page 11

VISIT *Continued from Page Seven*

mobile health program, which first launched 23 years ago. The new unit features mammograms performed with 3D tomosynthesis technology that will offer added benefits and more detailed imaging, especially for women with dense breast tissue and those at a higher risk of developing breast cancer.

NCI's Sharpless said the new mobile health unit will serve a critical role in reaching underserved communities that

had cancer screenings disrupted because of the COVID-19 pandemic. Sharpless applauded Hollings' efforts to combat health disparities and push what is possible with cancer care.

"I'm so excited that we got to show the first lady all the wonderful things we are doing here at MUSC Hollings Cancer Center," Sharpless said. "It is exciting to see Hollings' community outreach and its ways of taking the care in the cancer center and disseminating it throughout the state to reach the pockets of underserved communities."

PHOTO *Continued from Page Ten*

who miraculously made a turn for the better. A woman with the illness giving a pep talk to three other COVID-positive patients, passionately declaring how they were going to beat this. And along the way, there were a few smiles. And a lot of tears.

"I am really proud of my team, and I wanted people to see how hard they work, how much they care," Hawes says. "But truly, I just wanted people to know that the people in here, these ones that are really sick, a lot of them are just regular people who weren't vaccinated. And they're dying because of it."

During his time on the COVID unit, Hawes has seen miracles, families estranged over vaccine disagreements, laughter, tears. But the hardest thing he and his colleagues have had to do is facilitate a goodbye with no loved ones in the room – something no one should ever have to experience.

"You're standing there, holding an iPad so a dying patient's family can say goodbye. And the patient isn't even conscious," he says. "As a nurse, it's such a helpless feeling. You need to be there, but on some level, you feel like you shouldn't – their family should be the ones there. But this virus robs us of so many things. It's heartbreaking. Hardest thing I've ever had to do in my career. I wouldn't wish it on anybody."

Which is why he wanted to show the world his photos. Because it matters. What will become of them – an installation in a local art gallery possibly – he's not sure. But what he does know is that this was an opportunity to use all the skills available to him.

"I will never stop seeing the world as a photographer," Hawes says. "That guy is still in there, but these days, my heart is on the other side of the camera."

And though he might not admit it, it proves that through both of his careers, he is able to impact the world.

PARENTS *Continued from Page One*

including long-term problems, hospitalization and in rare cases, death – far outweigh the potential risks for most people.

Mack said the myocarditis cases she sees aren't from vaccination but from MIS-C and COVID. "We are routinely caring for children in our ICUs unvaccinated against COVID-19 with COVID-associated myocarditis. This is a very real, immediate risk."

"Kids aren't at risk of getting really sick with COVID."

"That has changed with Delta," Mack said.

Delta, the highly infectious variant, helped the coronavirus spread more easily. More kids got sick, leading to more children ending up in the hospital. At the MUSC Shawn Jenkins Children's Hospital, some young COVID patients got so sick they had to go on a last-resort form of life support called extracorporeal membrane oxygenation, or ECMO.

"We are currently in the midst of a MIS-C surge, which predictably follows our COVID surges by one to two months," Mack said.

While South Carolina's COVID numbers have come way down from our recent peak in what one scientist called part of a two-month cycle, there's worry that we'll see another surge of COVID

cases this winter.

"Children are having bad reactions to the vaccine."

"That certainly is something that we monitor. All recipients should be observed for a period of time. But we've seen zero of that leading to hospitalizations the entire course of the pandemic," Mack said. "At the end of the day, in the ICU, we're seeing kids with COVID and kids with MIS-C, not kids who are vaccinated."

In the more than 3,000 5- to 11-year-old children in the vaccine trials, none had anaphylaxis or myocarditis. The most common reactions were pain at the injection site, fatigue and headache.

The CDC is monitoring VAERS for reports of serious problems following vaccination but calls them rare. Mack said minor, short-term reactions are what parents should prepare for. "Having site pain is very common with an injection. You can also have a fever, fatigue, things like that for a brief time."

Her big worry is that parents' reluctance will mean too few children get vaccinated, leaving them at risk of getting COVID. "A lot of people assume that there will be quick uptake in 5- to 11-year-olds. I anticipate it will be even less than what we currently have in the older kids. We're still sitting at 30% of our 12- to 19-year-olds who are fully vaccinated against COVID in this state."

CYCLIST *Continued from Page Nine*

Jenkins Children's Hospital. He admits the upcoming LOWVELO ride will be extra special.

"I'm not riding for me. I'm riding for my kids and my grandkids. It's crazy that we still don't have a cure for cancer after all these years. This is just a way for me to play a part in finding that cure."

Dales doesn't know what to expect during LOWVELO, but he does know one thing – his friends and family will be right beside him to show their support as they've done throughout the entire journey. With that support, Dales hopes to aid in Hollings' mission to find a cure one day for cancer.

"I'm excited to get out on my bike and ride beside other riders for a cause much

greater than ourselves," Dales said. "Cancer touches just about everyone either directly or indirectly. That's one thing I've really learned since my diagnosis, and I hope to be able to share my story and hear other riders' stories during the six plus hours we will be on the bike."

Volunteers needed for 2021 LOWVELO Nov. 6 bike fundraiser event

Volunteers are still needed in various capacities for the LOWVELO Bike Ride fundraising event on Saturday, Nov. 6.

For information, contact Dustin LeBlanc, M.D. at leblancd@musc.edu.

Conversation Café:

Wednesday, November 10th
1pm-2pm

Join us and SCDHEC for an informational and interactive meeting to learn more about food waste and how to reduce this both on and off campus!

Register at:
tinyurl.com/scdhecfodwaste

DON'T WASTE FOOD SC

PREVENT • DONATE • COMPOST

MUSC Health
Medical University of South Carolina



**The only thing you'll maintain
is your independence.**

SOMERBY 
MOUNT PLEASANT

**Spacious, maintenance-free homes.
A welcoming community.
True independence.**



The Villas at Somerby Mt. Pleasant combine them all - and then some - into a style of retirement living that makes you feel truly alive.



**A few of these highly sought-after Villas
are now available at special prices.**

Contact us today before this rare opportunity passes by.

Visit SomerbySeniorLiving.com/MoultrieNews to learn more, or call (866) 671-9454 to schedule a tour.

INDEPENDENT LIVING | ASSISTED LIVING | MEMORY CARE  