



BUSM Welcomes President Brown

BU President Robert Brown, PhD, kicked off a weeklong inaugural celebration in April 2006 with a visit to the Medical Campus that included an open meeting and reception for the Medical Campus community.

At the meeting, Dean Antman welcomed Brown and presented him with a white coat, symbolizing the time-honored gesture of welcoming new students into the medical profession.

During his presentation, Brown shared his vision for BU and the Medical Campus. He noted that the life sciences are changing at a faster pace than ever before, and the continuing challenge will be translating scientific advances into clinical applications. "I believe that Boston University is a great private research institution engaged in the city and the world. The Medical Campus is key to this," said Brown.

On April 27, Dr. Brown was inaugurated as the 10th president of Boston University. Academics from more than 90 colleges and universities joined University officers, trustees, and honorary trustees, the board of overseers, and thousands of students, faculty, staff, and alumni at the ceremony, where Brown pledged to do everything he could to earn the trust that had been placed in him. "I truly believe that universities are places where dreams come true, where having an imagination is paramount, and where hard work and intelligence are all that matter to excel in education and research," he said. *

There's a Doctor in the House

The house call—old fashioned, out of date? "Transformational," that's how Alan Kronhaus, MD '72, describes the practice he founded, Doctors Making Housecalls.

While Americans have high-quality and expensive institutional acute and long-term care systems, the infrastructure for providing quality medical care in the home is very limited. However, there is a cadre of physicians and other health care providers who see not only the medical benefits of home care, but the economic necessity of it.

Alan Kronhaus, along with his physician wife, Shohreh Taavoni, started Doctors Making Housecalls in 2002 in North Carolina. "My wife came up with the idea of a practice dedicated to house calls," says Kronhaus. "She was looking for ways to help people with poor access to care, and felt house calls could make a big difference for people with physical, mental, or logistical limitations like a lack of transportation, as well as people who were simply unwilling to waste time waiting in a doctor's office."

A group of board-certified physicians, Doctors Making Housecalls provides care in a patient's home or office, and can handle complex medical issues as well as routine care. The practice has grown to include six physicians who take care of patients from age 5 to 105. They operate seven days a week, 12 hours a day and see patients the same day or next day, virtually eliminating wait time for patients.

Much of the growth in home care is driven by the aging population. According to the American Academy of Home Care Physicians (AAHCP) there are more than 34 million elderly Americans, and this number will double by 2020. During that time two million of the elderly will be chronically homebound due to functional impairment.

"In the beginning we didn't fully appreciate how valuable our service would be for frail, elderly patients with complex medical problems," notes Kronhaus. He now estimates that 80 percent of their patients are elders. "While house calls may cost payers more per service than an office visit, house calls can prevent unnecessary and vastly more expensive ER visits and hospitalizations," says



Alan Kronhaus, MD '72, and his wife, Shohreh Taavoni, MD

Kronhaus. "Our charge of \$85 can save a \$3,000 ER admission."

When making house calls, the doctors bring their trademark black bag and can arrange for in-home imaging studies, including plain films, sonograms, Doppler studies, and echocardiograms (EKGs), as well as any blood work the patient needs. According to Kronhaus anything that can be done in a doctor's office can be done in the home, and he points out that the practice has no financial interest in the ancillary services.

"By providing comprehensive, ongoing care in the home, at the patient's convenience, our physicians develop a relationship with patients that truly represents a return to medicine the way it used to be—and should be—practiced," says Kronhaus. "The difference between house calls then and now is that we bring the same level of service and sophistication to the home that physicians typically provide in the office."

Advocates argue that the home setting provides a favorable environment for evaluation because physicians are better able to interact and communicate with patients, family members, and other caregivers. "We believe stronger bonds develop as a result of the physician seeing patients in their home, and patients are more inclined to communicate when they're relaxed," says Kronhaus. "Our doctors know they have the flexibility to spend time with patients, and they have the opportunity to gain much more insight."

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There's a Doctor in the House (cont.)

The physicians who have joined the practice appreciate the flexible hours and the level of patient contact. One remarked how pleased she is to be out of the "assembly line" of her former practice. "Our patients are thankful for what they say really makes a difference in the quality of their lives," says Kronhaus. He believes that the practice of home health care will grow and can potentially transform health care by making the entire delivery system much more "user-friendly" for providers as well as for patients.

Kronhaus was interested in medicine as far back as he can remember, but his involvement in the business end of it occurred by happenstance. As the founder of KRON Medical, a company that provided temporary medical staffing to hospitals and physician practices, he started the practice of *locum tenens*—physician substitutes in hospitals and medical practices—which is now a fixture of the national medical scene.

When asked about his BUSM education, Kronhaus remembers how the Six-Year Medical Program was key. "It saved two years of my life, which made me more inclined to explore different interests and job roles. I didn't feel so driven to settle down and build a practice, and that made all the difference."



Alan Kronhaus
as a BUSM student

Kronhaus says that his community medicine rotation was also a major influence. "Such a rotation was innovative and forward thinking, and so were my mentors. They supported my idea to go out West and work on an Indian reservation for my community medicine rotation, which was not exactly the usual thing to do back in the early '70s." As a result, he fell in love with the West and the mountains, and with rural America. His first job after residency was working as a solo physician in a small rural community. His experiences in rural America motivated him to find creative ways of providing care to underserved populations, and that eventually led him to the idea of an organized, nationwide *locum tenens* service. "I always wanted to do something valuable, to make a contribution," Kronhaus says. ✪

Dr. John McCahan Medical Education Day Honors Long-Time Dean



Barry Manuel, MD '58, Dean Karen Antman, MD, John McCahan, MD, and Aram Chobanian, MD, gather at the Medical Education Day in honor of Dr. McCahan's retirement.

As associate dean for academic affairs, John McCahan, MD, dedicated more than 30 years to ensuring that the thousands of students who attended BUSM during this time received the highest-quality medical education. It was only fitting, then, that upon his retirement a day dedicated to him would be all about medical education. "No finer tribute to an intellectual legacy could acknowledge the School's debt to Dr. McCahan than by assembling here on this occasion to explore the future of medical education," said Dean Antman. The program will be held annually.

Organized by the Alumni Association and the Medical Education Committee, the program included a keynote address by Dr. Elizabeth Armstrong, director of education programs at Harvard Medical School, workshops ranging from Web-based learning to team-based learning to transforming education into scholarship, as well as a poster session on innovations and research in medical education. "The McCahan Medical Education Day represents the great respect and gratitude we have for John McCahan and his leadership," said Dr. Sharon Levine, chair of the organizing committee and director of the Geriatrics Section of the Department of Medicine. "We honor his contributions to BUSM and medical education, as well as his deep regard for the students we train."



John McCahan, MD, discusses treatment options with one of his patients.

On hand to pay tribute to Dr. McCahan were many faculty, staff, alumni, and members of his family. Honored, Dr. McCahan said, "There was a wonderful energy to the day. It was remarkable for the variety of research efforts that were displayed and the interest that both faculty and students manifest in education. The talent evident in the presentations was very impressive." ✪