



Editor: Henny van Dijk

[www.uthro.org](http://www.uthro.org)

August, 2020

## Message from the President

I hope this finds you and your family healthy and doing well during this challenging time in our lives. The UTHRO Executive Committee is looking forward to the future with high hopes of returning to our normal status of offering outings, in-house events, and meaningful program for our members.

To do so, the Executive Committee must begin now to plan for the future. As this is an election year for officers and new appointments for committees and Member-At-Large representatives we are asking active members to consider serving on the Executive Committee in some capacity. The time commitment is minimal and the rewards are great. The Executive Committee meets once a month for about an hour to discuss activities, events, etc. The term is for two years beginning January 1, 2021. A Member-At-Large position is a fully voting member of the Executive Committee and a great position to begin as an Executive Committee member. However, you are most welcome to stand for one of the elected positions of President, Vice President, Treasurer, or Secretary if you choose.

Please take a moment to consider my request and call (281-239-7980) or email ([kbradley77469@gmail.com](mailto:kbradley77469@gmail.com)) me with any questions or suggestions you might have. With Regards,

Kathy Bradley, President, UTHRO

## The 2020/2021 Retiree Benefits

This year there will not be an in-person Benefits meeting due to the Corona virus pandemic and so UTSys send out this email and for those who do not have email a regular mailed kit by July 15, making you aware of the new Benefits going into effect on September 1. But as in previous years if you need to make changes you will have to do that between July 15 and July 31, so when you get this newsletter you'll have about 6 days if you haven't done it. **The good news is no changes in premiums for medical, dental, vision or life insurance plans**, so if you are fine with the current benefits you can rest easy and do nothing. There are some enhancements so read the info send to you by either email or mail carefully so you can take full advantage of the offerings. Jennifer Figueroa emailed —"this is the first time in this new benefit platform website and will look different for our retirees. Ms. Amburgey is the benefits rep for retirees but there is also Ms. Stephanie Jones and myself that can answer any of your questions if Lorrie is not available."

Jennifer.Figueroa@uth.tmc.edu or call 713-500-3856

## Endowment Update...

Oh no! The coronavirus has even gotten to the UTHRO Endowment! Not really, but it has put a damper on our plans and activities for this year's award from the UTHRO Endowment for Healthy Aging. As you remember, last year we gave a \$2,000 seed grant from generated interest to Dr. Gabriel Fries for his research on aging related to dementia. His proposal, and that of two others, was presented to about 40 UTHRO members at a Lunch and Learn, and the members voted on the one project to fund. The Endowment now stands at about \$73,000, and the interest available this year is over \$4,000. It was our intention to follow last year's plan by seeking proposals from young investigators, through the Consortium on Aging, in the area of education, patient care or research in geriatrics, present the top proposals to the membership for vote at a meeting, and give two grants of \$2,000 each. Plans for any gathering of the membership have been put on hold by the pandemic, and the Executive Committee did not want to go forward with any awards without the vote of the members. They felt also that trying to do this project by email was too cumbersome and uncertain. By next year, the Endowment should have accrued around \$8,000 in available interest, and hopefully we can get back to some in person meetings. Thus, the Executive Committee voted to hold seed grant awards until next year when we could give some significant funds. However, the UTHealth Office of Development did advise that we needed to show some activity in the fund this year, so part of the Executive Committee vote was for spending \$1,000 for a project recommended by our partner, the Consortium on Aging. Through them, we received six requests to assist in small projects. The Executive Committee is in the process of reviewing those requests and will choose one to fund. Meanwhile, we want to keep the Endowment alive and well and growing. Members will be receiving a letter in October asking again for your donation to the UTHRO Endowment for Healthy Aging. Acknowledging that this is a difficult year for everyone in many ways, we are asking that you consider making a donation to our very successful project. As we have always said, any amount is significant and appreciated. Through the Endowment, our organization is contributing to valuable insight into geriatric research, education and patient care. Stay safe!!!

Peggy O'Neill

### *In this Issue*

Page 1 The UTHRO Endowment Update; Benefits  
Page 2 Interesting Facts; A Quiet Garden  
Page 3 Covid-19 from 2 sources  
Page 4 ...and now for something completely different!

## Interesting Facts about TMC

*More Texas Medical Center street name origins – Bertner Avenue and Lamar Fleming Avenue. Bertner Ave. runs through the heart of the TMC and now extends across Holcombe all the way out to the South Campus. Lamar Fleming Ave. is a short street that runs along the side of TIRR and Ben Taub Hospital from Moursund St. to Cambridge St.*

Ernst William Bertner was a physician and hospital administrator, born in Colorado City, Texas in 1889 to a German immigrant family. After attending school, he returned home to open a drugstore, but after a year, enrolled in the U.T. School of Pharmacy in Galveston, and once there decided to study medicine instead of pharmacy. While studying post graduate medicine in New York, he met Jesse Jones, a prominent Texas businessman and politician. Jones offered Bertner a position as house physician in his new hotel in Houston which he accepted. He moved to Houston, opened a practice and lived at the Rice Hotel most of his life. He served in the army during World War I. He became interested in the treatment of cancer while studying at Johns Hopkins University and after returning to practice in Houston, he became chief of staff at Hermann Hospital and also at Jefferson Davis Hospital. He was influential in state and local medicine, serving as president of many local and state societies and serving on the faculty at Baylor College of Medicine. In 1942 when the M.D. Anderson Foundation and The University of Texas agreed to open the M.D. Anderson Hospital for Cancer Research in Houston and the Foundation deeded the property to UT, Bertner was appointed as acting director of the hospital. He served for four years and donated his salary to the new hospital. He saw this hospital as the first step toward development of a major medical center. In 1946, the Anderson Foundation established the Texas Medical Center as an entity, and Bertner served as the first president. He devoted his time thereafter to the development of the TMC. Though Bertner spent much of his professional life in a fight against cancer, he died of the disease in Houston in 1950.

Lamar Fleming was a merchant and civic leader from Georgia who left school at Harvard to join Anderson, Clayton and Company (do you see a theme here?). He became their representative in Holland and Germany, then in England. He moved to Texas in 1924 and continued with Anderson, Clayton until his retirement, serving as its president and chairman of the board. He was responsible for expanding the company from strictly cotton business to food products as well. He was also involved in civic activities, serving on the governing boards of the University of Houston, Rice University, the Kinkaid School, Texas Children's Hospital, and Baylor University Medical Foundation. He served President Eisenhower on the Commission on Foreign Economic Policy and was on the board of directors of the Federal Reserve Bank of Dallas. He was married and had four children. Fleming died in Houston in 1964.

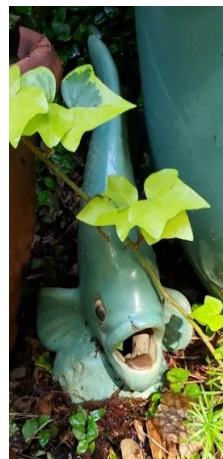


Peggy O'Neill

## Garden Faces...



Shelter-in-place is *de rigueur* in this COVID-19 era, and if you're like me you're missing the sunny, smiling faces of your friends – and maybe even the frowning, gloomy ones by now. Over the years my husband, Randy Tibbits, and I have collected quite a clan of Garden Faces, and I'm developing a new appreciation for them as I stroll, till, clip and crawl through the garden during these long stay-at-home weeks. They may be no substitute for in-the-flesh friendly faces (except maybe in the case of one or two – no names mentioned), and their conversation is somewhat limited, but in times like these we can't afford to be too picky!



With thanks to  
Rick Bebermeyer



## Covid 19 Behavior by Vox

## Virusses 101—Dormant Danger

## Lowest Risk

HOME ALONE  
OR WITH  
HOUSEMATES

- Stay home as much as possible.
- Try to allow only people you live with into your home.
- Wash your hands.
- If you're sick, stay home and isolate from housemates.

## Moderate Risk

OUTDOOR  
ACTIVITIES

- Wash your hands and don't touch your face.
- Stay at least 6 feet from people you don't live with.
- Wear a mask.
- Avoid shared surfaces, like swings or benches.

## Higher Risk

OUTDOOR  
GATHERINGS

- Wash your hands and don't touch your face.
- Stay at least 6 feet from people you don't live with.
- Wear a mask.
- Don't share food, toys, and other items, and avoid shared surfaces.
- Participate in events like these infrequently.

## Highest Risk

INDOOR  
GATHERINGS

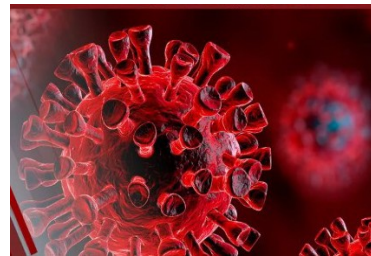
- Wash your hands and don't touch your face.
- Stay at least 6 feet from people you don't live with.
- Wear a mask.
- Don't share food, toys, and other items, and avoid shared surfaces.
- Open windows for better ventilation.

**Chicken pox** is a virus. Lots of people have had it, and probably don't think about it much once the initial illness has passed. But it stays in your body and lives there forever, and maybe when you're older, you have debilitatingly painful outbreaks of shingles. You don't just get over this virus in a few weeks, never to have another health effect. We know this because it's been around for years, and has been studied medically for years.

**Herpes** is also a virus. And once someone has it, it stays in your body and lives there forever, and anytime they get a little run down or stressed-out they're going to have an outbreak. Maybe every time you have a big event coming up you're going to get a cold sore. For the rest of your life. You don't just get over it in a few weeks. We know this because it's been around for years, and been studied medically for years.

**HIV** is a virus. It attacks the immune system, and makes the carrier far more vulnerable to other illnesses. It has a list of symptoms and negative health impacts that goes on and on. It was decades before viable treatments were developed that allowed people to live with a reasonable quality of life. Once you have it, it lives in your body forever and there is no cure. Over time, that takes a toll on the body, putting people living with HIV at greater risk for health conditions such as cardiovascular disease, kidney disease, diabetes, bone disease, liver disease, cognitive disorders, and some types of cancer. We know this because it has been around for years, and had been studied medically for years.

Now with **COVID-19**, we have a novel virus that spreads rapidly and easily. The full spectrum of symptoms and health effects is only just beginning to be catalogued, much less understood. This disease has not been around for years. It has basically been 6 months. No one knows yet the long-term health effects, or how it may present itself years down



the road for people who have been exposed. We literally \*do not know\* what we do not know.

For those in our society who suggest that people being cautious are cowards, for people who refuse to take even the simplest of precautions to protect themselves and those around them, I want to ask, without hyperbole and in all sincerity:

How dare you?

The more things we can all do to mitigate our risk of exposure, the better off we all are, in my opinion. Not only does it flatten the curve and allow health care providers to maintain levels of service that aren't immediately and catastrophically overwhelmed; it also reduces unnecessary suffering and deaths, and buys time for the scientific community to study the virus in order to come to a more full understanding of the breadth of its impacts in both the short and long term.

**But: this is what you can do**—wear a mask, keep your distance, wash your hands frequently, and reduce social contact as much as you can in our age bracket—it could be life saving. I reject the notion that it's "just a virus" and we'll all get it eventually. What a careless, lazy, heartless stance.

Protect yourself, protect your family and friends, be a good person and protect those you don't know. We all have a right to feel safe.

Put on a mask and stay at least 6 ft away!

# UTHRO

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*To update your address or phone number  
please contact us at 281-655-1983*

## And Now For Something Completely Different... *After 66 Years the End of an Era*

*Demolition of the old Dental Branch building (by MD Anderson)  
has begun. Lots of memories for those of you  
who spent time there.*



The aerial from 1953 shows the start of the building that



would be known as the Dental Branch and which stood at that spot for 66 years. The move from Blodgett to the Medical Center for the non-research programs graduated a large number of dentists and hygienists over those years.



The wonderful entrance to the building shown to the left was photographed around 1995 for one of the myriad of brochures of the Health Science Center and its richness of buildings and educational scope.

### UTHRO OFFICERS 2020

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