

# Alumnus Profile

## 10 Questions with . . . Steven A. Katz, MD '84

In 1988, months following the birth of their second son, Seth, Steven Katz, MD '84, and his wife, Sharon, noticed he wasn't developing like his older brother. His movements were jerky. He was growing at a slower pace. He wasn't making noises.

Two years of appointments with pediatricians and neurologists followed and finally led to a diagnosis when Seth was 3 years old. A genetic test revealed he had Angelman syndrome.

Named after a British pediatrician who first described it in 1965, Angelman syndrome is a neurogenetic disorder characterized by developmental delay, lack of speech, seizures, walking and balance disorders, frequent smiling and a happy demeanor.

Katz, an emergency medicine physician for EmCare, a national staffing agency, saw two ways he could react to the diagnosis.

"I realized this could stymie me or I could embrace it and do everything I could to make a difference. So I got involved. I used the fact that I had a career with unconventional hours to my advantage. I realized that medicine was a means to an end," he said.

Since 1997, Katz has served as an officer or director with the Angelman Syndrome Foundation (ASF). The Foundation recognized him in 2007 with the Harry and Audrey Angelman Award. In 2008, he received EmCare's highest clinician award, the Commitment to Care Award, for his work with the ASF.

Research funded by the ASF has hit several milestones in the past 15 years. Scientists have isolated the Angelman syndrome gene (Ube3a) on chromosome 15. DNA methylation testing and increased awareness have led to children being diagnosed at an earlier age. Still, though, about half of children are initially misdiagnosed with cerebral palsy or autism.

"You used to see kids have such physical disability. Now diagnoses can be made earlier. They can get early intervention services, and there is tremendous improvement in their development. Using iPads, children can learn to communicate and are much more functional than even 10 years ago."

Several clinical trials are ongoing to understand the Ube3a gene and to develop effective therapies to improve the lives of people like Seth. Katz is hopeful the work will ultimately lead to an end of Angelman syndrome.

"With all of the technology in genetics, I'm optimistic we are going to find a cure," he said.

### 1. When you were 5, what did you want to be when you grew up?

I wanted to be a pediatrician. A distant cousin (now well into his late 80s or early 90s) was my pediatrician and my role model. I thought he had the coolest job. He took care of people and had the knowledge and expertise to make you at ease with your care and knew all of the tricks to examine children. It took until I went through medical school until I realized pediatrics wasn't for me.

### 2. What drew you to your specialty?

It is one of the few specialties in medicine through which you can get the instant gratification that comes with making a difference in someone's life. In addition, you don't need to advertise for patients — they come regardless of the time, day or night. Finally, I was attracted to the lifestyle of working specified hours with down time when you weren't on call.

### 3. What don't people know about your field that you wish they did know?

I always say about emergency medicine that it is rote repetition 98 percent of the time with sheer, adrenaline-rush terror the other 2 percent of the time.

### 4. What advice would you give to your 25-year-old self?

When I was 25, I had already been through the Penn State/Jefferson program. I was already a resident, married, with a baby on the way. I would probably tell my 25-year-old self that this is going to be a long haul. Stay the course, and there will be rewards, both personally and professionally, in the end.

### 5. What is your biggest pet peeve?

Emergency medicine is a team effort. From the physicians to the nurses to the techs and other support staff, everyone has an important role in the patients' care and their emergency department experience. My greatest pet peeve is when people don't pull their weight. The least little lackadaisical attitude could mean life or death or it could sour the patient on the entire effort. In this era of microscopic scrutiny to patient satisfaction in the ED, everyone needs to put forth 100 percent when they are doing patient care. I always say nobody wakes up in the morning and says "I feel like going to the emergency department and spend four to six hours of my day." So it behooves us to make the experience as smooth as possible for every single patient.





Photo by Jeffrey Leeser

6. What is the biggest challenge in your field?

I think in 2014, the biggest challenge is the external metrics that are imposed on emergency physicians. My door-to-doctor and throughput times are routinely measured and compared to averages. This cuts down on the personalized care patients deserve in the ED. Someone can always do it faster or cheaper and hospitals are using this as a tool to cut their overhead, I feel to the detriment to patient care.

7. If you had a theme song, what would it be?

I am a self-described "deadhead." So I think my theme song would be the song "The Wheel" by the Grateful Dead. Basically the lyrics read in part "the wheel keeps turning and you can't slow down, you can't let go and you can't hold on, you can't go back and you can't stand still." That's how I try to live my life — always moving forward.

8. What is your highest priority for the coming years?

As cliché as it is to say, my highest priority for the next five years is to transition out of medicine into life after medicine. My career has been very good to me, but the increasing oversight and decreasing time for patient interaction has made it tougher and tougher for me to do my job.

In addition, the hours and time commitments have made it into a younger man's field.

9. What is the best decision you ever made?

While I was at Jefferson, my roommate Jonathan Daitch, MD '84, threw a party in Shawnee, Pa., where he introduced me to Sharon. The best decision I ever made was to marry her. To me, family and family time are everything. My decision to get married preceded my decision to pursue a career in emergency medicine by days. I felt as if everything was falling into order, and I have never regretted a moment of it more than 30 years later.

10.

Who is your personal hero and why?

My personal hero is my son Seth. He lives his life so simply. He is happy all of the time. I can honestly say that I have seen him cry only a handful of times in over 25 years, and he is never sad. He lives his life to the fullest every day, and I truly believe that he doesn't have a care in the world. That being said, I am doing everything in my power to make his life as good for him as humanly possible.

— Stacey Miller