

Publisher's Note

Contemporary Biographies in Healthcare is a collection of twenty-eight biographical sketches of “living leaders” in the fields of healthcare and allied health. All of these articles come from the pages of *Current Biography*, the monthly magazine renowned for its unfailing accuracy, insightful selection, and the wide scope of influence of its subjects. These up-to-date profiles draw from a variety of sources and are an invaluable resource for researchers, teachers, students, and librarians. Students will gain a better understanding of the educational development and career pathways of healthcare professionals to better prepare themselves for a career in health and related industries.

The geographical scope of *Contemporary Biographies in Healthcare* is broad; selections span the Eastern and Western Hemispheres, covering numerous major geographical and cultural regions. All of the figures profiled are still working at one or more of their specialties, including cardiology, fitness training, radiology, pharmaceutical, health and human services, and epidemiology.

Articles in *Contemporary Biographies in Healthcare* range in length from 1,000 to 4,000 words and follow a standard format. All articles begin with ready-reference listings that include birth details and concise identifications. The article then generally divide into several parts, including Early Life and Education, and Life's Work, a core section that provides straightforward

accounts of the periods in which the profiled subjects made their most significant contributions to the healthcare field. Often, a final section, Significance, provides an overview of the person's place in history and their contemporary importance. Essays are supplemented by bibliographies, which provide starting points for further research.

As with other Salem Press biographical reference works, these articles combine breadth of coverage with a format that offers users quick access to the particular information needed. Articles are arranged alphabetically by last name. A general bibliography offers a comprehensive list of works for students seeking out more information on a particular individual or subject, while a separate bibliography of selected works highlights the significant published works of the professionals profiled.

An appendix consisting of ten historical biographies culled from the Salem Press *Great Lives* series, introduces readers to professionals in healthcare of historical significance integral to those whose work and research revolutionized the field.

The editors of Salem Press wish to extend their appreciation to all those involved in the development and production of this work; without their expert contribution, projects of this nature would not be possible. A list of contributors appears at the beginning of this volume.

Agatston, Arthur

Cardiologist, writer, nutritionist, researcher

Born: 1947, New York, New York, United States

“If a patient of mine has a heart attack, I ask myself: ‘What have I done wrong?’” the cardiologist, nutrition researcher, and writer Arthur Agatston said to John Tanasychuk of the Fort Lauderdale, Florida, *Sun-Sentinel* (April 11, 2004). For the past decade, the Miami Beach, Florida-based Agatston has been widely known as the “South Beach Diet doctor,” referring to the eating regimen he created with the help of the dietitian and nutritionist Marie Almon, a colleague of his at Miami’s Mount Sinai Medical Center. The label also links him with his books, all of which contain the words *South Beach Diet* in their titles. He wrote them, as he has often said, not to enable people to look good in bathing suits or drop a clothing size or two in a few weeks but to help them avoid getting heart disease or having strokes.

The first of Agatston’s books, *The South Beach Diet: The Delicious, Doctor-Designed, Foolproof Plan for Fast and Healthy Weight Loss* (2003), has sold more than nine million copies and has been translated into some three dozen languages. Among his other books are cookbooks (one of which landed on Amazon.com’s top-five sellers before its publication date), a manual for maintaining a healthy heart, and a guide to “good” fats and “good” carbohydrates (carbs, as they are called colloquially), which rank low on the so-called glycemic index. (The index is a scale devised by a Canadian scientist that measures blood-sugar levels after a given food is eaten; Agatston used it in developing the South Beach diet.) “It has been a great revelation to me that weight loss is not about low carbs or low fat, but the right carbs and the right fats,” Agatston has said, as quoted by *Market Wire* (April 25, 2005). “I am seeing a growing consensus among nutrition experts about the importance of the right carbs like whole grains, fruits and vegetables in the diet, as well as including unsaturated fats like olive and canola oils—all consistent with the South Beach Diet.”

In 2004 Agatston used part of his earnings from *The South Beach Diet* to set up the Agatston Research Foundation, in Miami, “for the purpose of conducting and funding original research on diet, cardiac, and disease prevention” (www.agatstonresearchfoundation.org). In 2005 he signed a contract with Kraft Foods, which launched a line of South Beach Diet prepared meals and other items. He also maintains the South Beach Diet website, which, as of 2013, had more than half a million subscribers. For a fee of \$4 per week (\$16 per month), subscribers have access to recipes, meal-planning tools, a weight-loss tracker, a daily newsletter, and “private discussions” with online nutritionists.

Agatston’s approach to healthful eating is not without critics. “What it comes down to,” Marion Nestle, a professor of nutrition, food studies, and public health at New York University, said to Abby Goodnough of the *New York Times* (October 7, 2003), “is that this is a standard 1,200- to 1,400-calorie-a-day diet, so of course people are going to lose weight. I do think there’s something to the glycemic index, but I just don’t think it’s the be-all and end-all, and that it’s the root of obesity.” In a conversation with Alex Witchel for the *New York Times* (April 14, 2004), Nestle said that the South Beach diet does not address the fundamental issue of overeating. “I don’t understand why it’s gotten the attention it has,” she said. “For the first two weeks it’s a standard low-carbohydrate diet. It’s very hard to argue with restricting bread, white rice, pasta, soft drinks, all great ideas when trying to lose weight. But the hype

is [Agatston] never talks about quantity. It's calories that make a difference in losing weight or not." Robert Eckel, the president of the American Heart Association, told reporters for *People* (April 16, 2004) that Agatston is "respected in cardiology," but he voiced concern that Agatston was "playing into the carbohydrate message." "Obesity is calories—there is nothing magic about carbs versus fat," Eckel added. In response to such criticism, Agatston told Witchel, "When choosing the right fats and the right carbohydrates, in general, the quantity takes care of itself." Thus, he explained, weighing one's foods, as people following certain diets must do, is unnecessary. "Also," he said, "I'm not claiming any unique vision; I've learned a lot from other people. The diet is a consensus of current opinion." He repeated that point in his conversation with Tanasychuk, saying, "The country was ready for [the South Beach diet]. Because a lot of what we have in the book has been percolating through doctors and the public. . . . Everything in there was kind of obvious. If you've really been on top of nutrition, there's nothing in there that's really controversial. There's no substance to the criticism as far as I'm concerned."

Education and Early Career

Arthur Stephen Agatston was born on January 22, 1947, in New York City, to Howard James Agatston and Adell (Paymer) Agatston. He has two sisters and one brother. His paternal grandfather, Sigmund Agatston, had the surname "Agatstein" when he immigrated to the United States from Poland; fearing anti-Semitic prejudice, he changed his name when he applied to medical school. Sigmund Agatston graduated from Columbia Presbyterian Medical School in 1903 and became an ophthalmologist; his innovative technique for early detection of eye disease became a standard in the field. Arthur Agatston's father, Howard James Agatston, also was an ophthalmologist; he practiced in Roslyn, New York, on Long Island, where Agatston grew up. "I knew since I was in elementary school that I wanted to be a doctor," Agatston said to Marie Guma-Diaz for the *Miami (Florida) Herald* (December 10, 2005). "I watched my dad's work in the community, and learned to like the doctor-patient relationship. The love for the academic studies came later."

Agatston earned a B.A. degree from the University of Wisconsin at Madison in 1969 and an M.D. degree in 1973 from the New York University (NYU) School of Medicine, in New York City. He completed his internship and residency in internal medicine at the Montefiore Medical Center, which is affiliated with the Albert Einstein College of Medicine, in the New York City borough of the Bronx. From 1977 to 1979 he was a cardiology fellow at NYU Medical Center. The next year he joined the staff of the Mount Sinai Medical Center, in Miami, which is associated with the University of Miami's Miller School of Medicine.

Later Career

In 1988, with his colleague Warren Janowitz, a radiologist, Agatston began working on a way to determine the amount of calcium present in people's coronary arteries. Excessive levels of calcium often lead to arteriosclerosis, a chronic disease that impairs blood circulation and places people at risk for heart attacks or strokes. Agatston and Janowitz were later members of a team that developed electron beam tomography (EBT), a fast, noninvasive technique for scanning every part of the body; with EBT, doctors can detect and quantify even small calcium deposits in the arteries that carry oxygenated blood to the heart. The so-called Agatston score is a measure of the amount of calcium in the coronary arteries. In a conversation with Soriya Daniels for the *Cleveland (Ohio) Jewish News* (February 13, 2004), Agatston said that the widespread adoption of EBT was his "most rewarding experience."

Beginning in about the late 1980s, Agatston noticed that among his patients who suffered from hypertension and other heart-related ailments, a majority were gaining weight and were developing abnormal blood chemistries. He, too, had become a little fatter around his midsection, and in the United States as a whole, obesity was becoming increasingly common. Agatston thought that the problem might be related to the growing popularity of low-fat, high-carbohydrate diets, such as the one that the American Heart Association had been recommending. “If it was low-fat, [we thought] you could eat with impunity, and I did, as did the country in general,” Agatston told an interviewer for *People* (April 26, 2004). Agatston feared that U.S. food companies, reacting to the advice of the American Heart Association and others, were selling too many items containing processed carbohydrates. Foods of that kind contain large amounts of flour, sugar, and high-fructose corn syrup. “Nobody in the history of man ever ate complex carbohydrates like we have,” Agatston said to Abby Goodnough for the *New York Times* (October 7, 2003).

“After dietary intervention, children’s weight, blood pressure, and academic test scores improved compared to children without the HOPS [Healthier Options for Public Schoolchildren] process.”

Agatston began investigating how the body processes carbohydrates. “My concern was not with my patients’ appearances,” he told Soriya Daniels. “I wanted to find a diet that would help prevent or reverse the myriad of heart and vascular problems that stem from obesity.” During his research he learned about the glycemic index (GI), developed in the late 1970s by David J. A. Jenkins, a specialist in the nutritional sciences at the University of Toronto, Canada. The glycemic index ranks foods, on a scale of zero to 100, according to how much the quantity of glucose in an individual’s blood increases within two to three hours of eating those foods. Foods with a high GI score include baked potatoes, white bread, and most pastas; those with low scores include foods rich in fiber, such as whole- and multigrain bread, lean meat, and most vegetables. Foods with high scores (over 55) are digested more quickly than those with low scores, and people often feel hungry much sooner after eating the former than after consuming the latter. Using that information Agatston drew up what he called the “modified carbohydrate diet”—the precursor to the South Beach Diet. He and a select group of his private patients who tested the diet began to lose weight.

In about 1996 Agatston, in collaboration with Marie Almon, the chief clinical dietitian at Mount Sinai, worked out a more detailed diet, one that did not need to be supplemented with exercise. They printed instructions for following the diet and distributed them to a greater number of people than had tested the diet earlier. Along with their weight, cholesterol levels decreased in most of the people in the new sample group. Agatston presented his findings at national meetings of the American College of Cardiology and the American Heart Association. Meanwhile word of the diet had spread in the Miami area and reached the media, which dubbed it the “South Beach diet,” referring to an upscale section of Miami Beach. Several Miami eateries changed their menus to appeal to diners on the diet. What had “started as research . . . got the glitz added to it by the local media,” Agatston commented to Howard Cohen for the *Miami Herald* (May 1, 2003).

In April 2003 the health-and-fitness publishing house Rodale, based in Emmaus, Pennsylvania, published Agatston’s first book, *The South Beach Diet: The Delicious, Doctor-Designed, Foolproof Plan for Fast and*

Healthy Weight Loss. The book remained on the *New York Times* best-seller list for 38 consecutive weeks. Among Agatston's other books are *The South Beach Diet Cookbook: More than 200 Delicious Recipes that Fit the Nation's Top Diet* (2004), which had a first-run printing of 1.5 million copies—a record for a cookbook; *The South Beach Diet Good Fats/Good Carbs Guide: The Complete and Easy Reference for All Your Favorite Foods* (2004), which was *Publishers Weekly's* number-one best-seller for 18 weeks; *The South Beach Diet Dining Guide* (2005); and *The South Beach Heart Program: The 4-Step Plan that Can Save Your Life* (2006). Newer titles include *The South Beach Diet: Super Charged* (2009) and *The South Beach Diet Wake-Up Call: Why America is Getting Fatter and Sicker* (2012).

The South Beach diet is divided into three stages. In phase one, which lasts two weeks, no foods rich in carbohydrates—pasta, potatoes, fruit, bread, cereal, and rice—are permitted; alcoholic beverages are also off-limits. Meals consist of “normal-size portions of lean meat, fish, eggs, reduced-fat cheese, nonfat yogurt, nuts, and plenty of vegetables.” According to Agatston, dieters can lose as many as 13 pounds in those first two weeks. (The website factsaboutfitness.com reported that in one study of the diet, the results of which were published in the *Archives of Internal Medicine*, the “average weight loss among the subjects was 13.6 pounds in 12 weeks, ... not the first two weeks.”) In phase two, dieters may eat certain fruits and carbohydrate-laden foods having low GI scores (whole-grain items, for example); they are advised to remain in that stage until they reach their desired weights. Alex Witchel characterized the final stage of the diet, meant to be adopted permanently, as “a more lenient version” of the second phase.

The South Beach Diet has often been compared with another popular regimen, introduced in 1972 in the book *Dr. Atkins' Diet Revolution*, by Robert Atkins, who maintained that the harmful effects of saturated fats had been highly exaggerated and that high-carbohydrate diets were far more harmful than diets consisting mostly of proteins and fats. People who maintain the Atkins diet avoid refined sugar, milk, white rice, white potatoes, or white flour (found in white bread; most cakes, cookies, and pastries; and most pasta). They may eat virtually unlimited amounts of meat, poultry, fish, eggs, cheese, and cream, and, after the first two weeks on the diet, limited amounts of fruits, vegetables, and whole-grain foods. One major difference between the Atkins Diet and the South Beach Diet, according to experts, is that Atkins' practitioners enter a metabolic state known as ketosis, in which the body, lacking sufficient carbohydrates, converts stores of fat into energy. Agatston has said that when he designed his diet, he consciously tried to avoid triggering ketosis in his patients, because, in hypertensives, it can cause serious adverse effects.

The popularity of the South Beach Diet led to Agatston's alliance with Kraft Foods, one of the world's largest food and beverage companies. In 2004 Kraft began placing the South Beach Diet trademark on some of its products. The next year the company introduced a line of South Beach Diet products, among them frozen entrees and snacks. “Things can be nutritious and come from a package,” Agatston's collaborator Marie Almon said to Lisa Belkin of the *New York Times Magazine* (August 20, 2006). “It depends what's in the package, not the fact that there is a package.” Some of Kraft's South Beach items came under attack because of their high levels of sodium; daily ingestion of sodium in greater than moderate amounts has been linked with hypertension. Speaking with Howard Cohen and Kathy Martin of the *Miami Herald* (May 5, 2005), Agatston acknowledged that he would not recommend some of the new Kraft products to patients suffering from heart disease or high blood pressure, but he defended the South Beach Diet's overriding principle. “America is overfed,” he said. “If you lose weight and reverse the metabolic syndrome, blood pressure comes down.”

In his recent book *The South Beach Diet Wake-Up Call: Why America Is Still Getting Fatter and Sicker* (2012), Agatston warns that “we’re raising a generation that could be the first in modern history with shorter life spans than their parents ... I predict that our current population of adults between ages 30 and 45 could have the dubious distinction of being remembered as the ‘sickest generation,’ or ‘Generation S’” (www.prevention.com/print/26211, October, 2013). Agatston told Brenda Medina of the *Miami Herald* (February 23, 2013) that this generation “grew up on junk food and led more sedentary lives. ... That lifestyle can lead to heart diseases.” The strategies in his book, he said, focus on “eating healthy, getting rid of unhealthy foods, cooking more at home, shopping for healthy foods, and incorporation a meatless meal or two into your weekly menu planning.” Agatston also places emphasis on the importance of physical activity: “We need to start taking the stairs, mowing our lawns, walking a little more. We need to get moving.”

Thanks to his books, Agatston told Lisa Belkin, he gained “a bully pulpit and an opportunity to change the way Americans eat. One of the obvious places to start is with children. And that means schools.” In July 2004 Agatston, as the head of the Agatston Research Foundation, signed a contract with the Osceola County (Florida) School District that allowed him to take control of the meals supplied by cafeterias in four elementary schools, all in Kissimmee, a city whose population is about 50,000. Starting in the fall of 2004, he began testing a program called HOPS—Healthier Options for Public Schoolchildren—in which more nutritious and fewer high-fat foods were on the schools’ menus, and some items (among them white bread, turkey or pork with gravy, sweetened breakfast cereals, and Tater Tots are banned. Currently, the HOPS program reaches 13,500 students in the Miami-Dade County School District (the fourth-largest school district in the United States) and 50,000 students nationwide. According to the Baptist Health Medical Group Web page profiling Agatston, the HOPS program “showed that after dietary intervention, children’s weight, blood pressure, and academic test scores improved compared to children without the HOPS process.

Since May 2012 Agatston has been the medical director of Wellness and Prevention for Baptist Health South Florida. In addition to his duties at the University of Miami School of Medicine, where he serves as an associate professor of medicine, Agatston is a clinical professor of medicine at Florida International University Herbert Wertheim College of Medicine. He has maintained a private practice as a partner with South Florida Cardiology Associates, in Miami, now a Baptist Health Medical Group facility. . He lectures on nutrition nationally and internationally, serves as a consultant for the Clinical Trials Committee of the National Institutes of Health, and co-directs the Symposium on Prevention of Cardiovascular Disease, which meets annually. Agatston has served on committees of the American Society of Echocardiography and the American College of Cardiology. He serves on the board of directors for the Society of Atherosclerosis Imaging and the American Dietetic Association Foundation. Agatston has written more than 100 articles and abstracts for journals, including the *Journal of the American College of Cardiology*, the *Annals of Internal Medicine*, and the *American Journal of Cardiology*.

Agatston and his wife, Sari Agatston, a lawyer, married in 1983. Sari Agatston has assisted her husband with all his books, which is why he often uses the first-person plural when talking about them, and she handles the financial and other aspects of his businesses. The Agatstons are the parents of sons Adam and Evan and live in Sunset Island, a section of Miami Beach. Interviewers have described Agatston as approachable, self-effacing, and friendly and as trim but not buff. In his leisure time Agatston enjoys reading books about history and politics and playing golf.

Further Reading:

Agatston Research Foundation Web site

Baptist Health Medical Group Web site

Boston Globe pB7 Sep. 22, 2003

Cleveland Jewish News p40 Feb. 13, 2004

Journal of Health Care for the Poor and Underserved Vol. 21, no. 2 (May 2010, Supplement): p93+

Miami Herald Living pE1 May 1, 2003, pA1+ May 5, 2005, p13 Dec. 10, 2005, Feb. 23, 2013

New York Times pF1+ Oct. 7, 2003, pF1+ Apr. 14, 2004

New York Times Magazine p30+ Aug. 20, 2006

People p65 Apr. 26, 2004

South Beach Diet Web site; (Fort Lauderdale, Florida)

Sun-Sentinel pD1+ Apr. 11, 2004

WebMD Web site

Selected Books:

The South Beach Diet: The Delicious, Doctor-Designed, Foolproof Plan for Fast and Healthy Weight Loss, 2003

The South Beach Diet Cookbook: More Than 200 Delicious Recipes That Fit the Nation's Top Diet, 2004

The South Beach Diet Good Fats/Good Carbs Guide: The Complete and Easy Reference for All Your Favorite Foods, 2004

The South Beach Diet Dining Guide, 2005

The South Beach Diet Quick and Easy Cookbook: 200 Delicious Recipes Ready in 30 Minutes or Less, 2005

The South Beach Diet Parties & Holidays Cookbook: Healthy Recipes for Entertaining Family and Friends, 2006

The South Beach Diet Heart Program: The 4-Step Plan That Can Save Your Life, 2007

The South Beach Diet Taste of Summer Cookbook, 2007

The South Beach Diet: Super Charged (2009), *The South Beach Diet: Super Quick Cookbook* (2010)

The South Beach Diet Wake-Up Call: Why America is Getting Fatter and Sicker (2012)

The South Beach Diet Gluten Solution Cookbook: 175 Delicious, Slimming, Gluten-Free Recipes (November, 2013)

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- Agatston, Arthur. *The South Beach Diet: The Delicious, Doctor-Designed, Foolproof Plan for Fast and Healthy Weight Loss*. Emmaus, PA: Rodale, 2003.
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Ayala, Francisco

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Zerhouni, Elias

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