Dr. Myron Cohen is known for his invaluable contributions to the construction of the HIV Prevention Trials Network (HPTN) 052 study, which established that people living with HIV with antiretroviral therapy (ART) improves their short-term and long-term health as well as makes them less likely to transmit the virus to others.

Dr. Cohen earned his medical degree from Rush Medical College, completed his residency in internal medicine at the University of Michigan, and did his infectious disease fellowship at Yale University.

Dr. Cohen is the Associate Vice Chancellor for Global Health, the Yeargan-Bate Distinguished Professor of Medicine, Microbiology and Immunology and Epidemiology, Chief of Division of Infectious Diseases and Director of the Institute for Global Health and Infectious Diseases. He is also the co-Principal Investigator of the HPTN, one of several research networks funded by the U.S. National Institutes of Health (NIH) to investigate HIV.

Dr. Cohen’s research work focuses on the transmission and prevention of STD pathogens. Dr. Cohen and his coworkers have identified the concentration of HIV in genital secretions required for transmission of HIV, and the effects of genital tract inflammation on HIV.

Let me start out by thanking the class of 2015 for giving me the UNIQUE privilege of addressing their graduation. It is a real privilege.

The place to start with any speech is “know your audience.” But there are three audiences here today: UNC faculty, families of the graduating students, AND the students.

Let me dismiss any attempt to appeal to the faculty. I have worked here for 35 years; the faculty know everything I could possibly say. Sorry!

What about the families. Family members are bursting with pride. For the parents…you’re biggest and longest and most serious and precious investment is finally paying off. I know it seemed like yesterday that your child was an infant. BUT here they are… fully grown, and in a robe with the special green colors that signify that your child, today, will become a doctor of medicine. As of today you can introduce your child as, “my son or (daughter) the doctor, or have you met my son or daughter the doctor, or let me introduce you to my son or daughter the doctor.” Parents, this is obligatory behavior consistent with the pride you rightly feel.

And let us not forget that tomorrow is Mother’s Day. Everyone knows that the new doctor is expected
to offer free medical advice to everyone. But let me be clear that this requirement extends to the mothers of the new doctors as well, who by virtue of today’s graduation are expected to offer medical advice as well. As far as I know my mother ran an urgent care clinic before they even existed.

Families: Congratulations. And doctors’ mothers: Happy Mother’s Day.

And now, what to say to our graduating medical students. First, a disclaimer. A small group of totally anonymous students in your class that included not to be mentioned class presidents advised me on what to say to you. Not to throw these anonymous students “under the bus,” but I’m just saying if you don’t like these comments there might well be someone else to blame.

Now about you: the class of 2015. You are, as you know, totally awesome. First, you survived four years of the most grueling schedule imaginable. Forget the television show survivor. No reality show could capture your ordeal. And through it all, you kept your good graces and most notably your sense of humor. Indeed, the class of 2015 won the Golden Humerus Award two years in a row. Parents, the Golden Humerus Award plays on a bad pun related to the upper arm bone. The award is given to the class with the funniest and most entertaining skit. Congratulations class humeruses!

Now back to my speech. I started with a Google search under the heading “School of Medicine speeches” hoping for inspiration, and scarily this search brought up “the 10 most inspirational School of Medicine speeches.” Many of these speeches were given by TV doctors, or actors playing TV doctors. Dr. Oz is a biggie.

The more serious speeches talked about health care systems, or medical economics, and most often constraints in medicine that might make the career of a physician less attractive.

“My firm belief is that today you begin the most rewarding career imaginable.”
I reject these themes. My firm belief is that today you begin the most rewarding career imaginable.

I want to talk to the students about three ingredients of medicine that have been most meaningful to me.

First, change! Medicine is all about change. When I finished medical school there were no CT or MRI scanners. Diseases that now have names and causes were just a set of symptoms. There was no Lyme disease or Hepatitis C. I managed patients who survived polio and were living in an iron lung, a machine that none of today’s students have ever seen. The medicine you learned these past four years at UNC is unrecognizable from what I learned only four decades ago. What is my point? You will surely see miraculous changes over the course of your career. It is change and the anticipation of change that makes a career in medicine so exciting and so unique.

Second, medicine is about being a citizen of the world, wherever you practice and whatever you do. Diseases do not respect borders. Now would seem to be a good time to talk about me. Why was I asked to give this speech? Shortly after I arrived at UNC -1981- we saw our first patients with AIDS, an infectious disease ultimately proven to be caused by a virus. I have spent my entire career working on this virus, in the US, Africa and China. After decades of research our group was able to show that the treatment of the HIV virus not only allows a person a normal lifespan, but treatment stops the spread of the virus to the next person. These results led to change in public health and medical policies. And this work showed me that medicine and public health and global health are married. Of course, UNC students already know this. Your curriculum is filled with issues that affect our entire species. Many of you chose to spend summers or rotations in resource-constrained countries. Twenty-eight of you also completed a degree in public health at UNC. You graduate today. Tomorrow -wherever you go- you might well be asked to deal with a patient from West Africa at risk for Ebola, or to make recommendations about measles vaccination. UNC graduates, as we intended, you are citizens of the world.

Third, medicine is all about humanity. When you started medical school you were told that your white coat was a ticket for people to share their stories, and often under the most difficult circumstances. Doctors get to know patients and their families in ways entirely different than everyone else. You will encounter great tragedy and great joy countless times. Back to me. This past Christmas holiday, I was seeing patients at UNC hospital. We accepted the transfer of a 49-year-old man with diabetes and a fungal infection of the eye socket -the orbit- that can complicate diabetes. Some fungi thrive on the high sugar in diabetes, and the fungi can be aggressive and destructive.

Sadly, such fungal infections are most often fatal. When I met the patient and his wife, I had to let them know the full and terrible gravity of his infection. Our patient had been well only three days earlier, working as a car mechanic. I asked the patient’s wife to gather her five children from around the country to be with her for the ordeal I knew was in store. She looked at me and our students for several moments and said something so simple, but so powerful: “Please, please, we need him.”

Why am I telling you this story? This family came to UNC Hospitals and entrusted the care of this most special person in our hands. What technology could we apply? Was there anything new in the literature? Could we assemble a team on a holiday to do everything possible? Were there any experimental agents or combinations of agents available? On the day of admission and for several days thereafter, the UNC surgeons took the patient back to the operat-

“You will encounter great tragedy and great joy countless times.”
ing room to remove infected pieces of tissue from the sinuses and near the brain – difficult and dangerous surgery. In order to save his life, he lost his left eye. Day by day, we had no idea whether the patient would live or die, and we had to prepare for either outcome. In a few short days, our entire team got to know the family as well as we might over 20 years. After a very long, rocky month, our patient walked out of the hospital and is followed in our clinic today. Why am I telling you this story? All of this reminds me – as if I needed reminding – about the awesome responsibility we have been afforded. And about the privilege of witnessing great love, courage and fortitude that I believe doctors, and perhaps only doctors, are allowed to see. I know you graduates will have similar experiences.

And a note from the family, with whom I shared this speech getting permission to tell their story. “We pray and thank God for you and UNC hospital every day,” and by the way (they went on to say), “as you requested, you can have free car advice for life.”

Back to my Google search of inspirational speeches. Most speakers had lists of things you are supposed to do. What can I tell you?

What is the first rule of Infectious Diseases: don’t get the disease yourself. Wash your hands, wear a mask, don’t sit on the bed where stray needles may lurk, be on guard. I can now reveal why infectious disease specialists send medical students FIRST into a hospital room to take a new patient’s history. Think about a canary in a coal mine.

Be compulsive. The difference between a good doctor and a bad doctor is taking the time to read and reread about a problem every time you see it. Check the labs over and over. Ask your patient about their history, and their travel, and their job, and their life over and over again. Students who watch medical shows - especially HOUSE - know there is always a clue to the mystery in the history.

“If you will witness] great love, courage and fortitude that I believe doctors, and perhaps only doctors, are allowed to see”.

And now, the old cliché about balance. But here is the truth. You are not going to punch a time clock. There are no shifts that begin and end. You will read and worry about patients in your care 24 hours a day, 7 days a week. You must learn to compartmentalize this responsibility so as to enjoy your life.

Finally, look at you today. You have come such a very long way through high school and college and work and four years at our School of Medicine. You are so, so deserving of the recognition we give you today. And through your hard work and sacrifice and the sacrifice of your family, you are receiving an incredible privilege: you are now a doctor of medicine. And with this privilege and recognition comes responsibility: the responsibility to do your very best for your patients; the responsibility to contribute to the health of people in your community; and the opportunity for leadership for the graduates of UNC who will move to communities all over this great state.

Now you continue your training, and I know you are anxious. The euphoria of match day is gone and reality has set in. What are you worried about? Tomorrow your notes finally go into the medical record; tomorrow you will write orders that count; tomorrow you can replace potassium without someone else’s permission; and tomorrow when someone says, “Excuse me doctor, you cannot just look around!! You need to answer yourself. But let me assure you, you are ready. You are prepared. Congratulations doctors!! Enjoy your career!