

Job Profiles: Pediatricians at CDC



Lara Akinbami, MD, Medical Officer, Infant, Children and Women's Health Statistics Branch, Office of Analysis and Epidemiology, NCHS

Even before she started her pediatric residency, Lara Akinbami knew full-time clinical pediatrics wasn't for her. "I'm an introvert and I don't like earwax," she says. Akinbami does like combining her medical training, her undergraduate economics background and a desire to contribute to improving the lives of children. Analyzing maternal and child health in NCHS is the perfect fit. "Most of my analyses have focused on childhood asthma with an emphasis on racial disparities," says the nine-year CDC employee. She is linking NCHS data to other information sources such as EPA air quality data. Her team also launched the "[Health Data for All Ages](#)" website, featuring interactive data tables on a wide variety of health topics.

Akinbami believes in fostering a connection between clinical and public health pediatrics: "In many respects, pediatrics is public health," she says, noting that pediatricians are the bedrock of the immunization program and are key advocates to protecting children from exposures that will harm their adult health.

Marshalyn Yeargin-Allsopp, MD, Medical Epidemiologist and Branch Chief, Developmental Disabilities Branch, Division of Birth Defects and Developmental Disabilities, NCBDDD

To Marshalyn Yeargin-Allsopp, pediatricians are excellent public health ambassadors. "They have a unique ability to communicate health messages in a positive and easy-to-understand way, because of their interest in children and their training," says Yeargin-Allsopp, who works around the largest concentration of pediatricians at CDC in NCBDDD.



Yeargin-Allsopp came to CDC as an epidemic intelligence service (EIS) officer to do the agency's first work on assessing the feasibility for surveillance of developmental disabilities, and never left. She currently is chief of the developmental disabilities branch. While the branch has conducted surveillance of several developmental disabilities since the 1980s, the recent attention on autism has "led to some of the most gratifying and challenging experiences," she says of the branch's work to confirm the suspicions of parents that the prevalence of autism was higher than previously reported. For more view [2000 MMWR](#) and [2002 MMWR](#) reports.



William (Bill) Dietz, MD, PhD, Director, Division of Nutrition, Physical Activity and Obesity, NCCDPHP

As a world-renowned childhood obesity expert, Bill Dietz is perhaps one of CDC's most externally visible division directors. He is often quoted about the public health response to the nation's growing obesity epidemic, especially as it relates to children.

Before joining CDC in 1997, Dietz ran a children's obesity clinic in Boston for 20 years. These days, he oversees 90 employees, and recently added

an obesity branch in his division to concentrate resources and combine the strengths of the division's programmatic efforts to address the obesity problem. As a group, Dietz sees his pediatric colleagues as overall more nurturing, more politically engaged, and more policy focused.

"Because of our interest in children, we tend to focus more on nurturing issues, whether it be nutrition, parenting or school preventive efforts. 'Historically this profession has also been very engaged politically. That's important because ultimately, decisions of what to do and how to do it will come down to political will. Those of us who come from a pediatric background bring to CDC a broader policy perspective. There's a natural correspondence between pediatrics, prevention, and our efforts at CDC."



Christa-Marie Singleton, MD, MPH, Associate Director for Science, Division of State and Local Readiness, COTPER

"Pediatricians have the training, experience, and eyes to see more than the individual patient in front of them but also the community's health," says Christa-Marie Singleton, "which is why pediatricians need to be at the table for community health discussions at all levels – local, state and federal."

Singleton is at that table daily in her role as associate director for science in the Division of State and Local Readiness, where she uses her medical training and unique experiences as a former local health preparedness director to translate the science of state and local public health emergency preparedness into practice. "Public health is often not seen as a 'responder' because they don't have lights or sirens and may not be the first on the scene. However, they are often the last to leave because the health effects of an emergency last long after uniformed personnel leave."

Singleton concludes, "There are many pediatricians behind the scenes at CDC. We're all different... however, if you meet someone who is a passionate advocate for real-world work in public health, don't be surprised if they have a pediatric background."

Mark Anderson, MD, MPH, Medical Epidemiologist, International Emergency and Refugee Health Branch, Division of Emergency and Environmental Health Services, NCEH

CDC medical epidemiologist Mark Anderson is all about safeguarding children's health – especially children in war settings. Before coming to CDC 11 years ago, he worked for an NGO in Bosnia.

As War-related Injury Team leader in the International Emergency and Refugee Health Branch, Anderson develops and evaluates projects to research and prevent injuries in war zones.



"Pediatrics has always emphasized the importance of prevention and has led many of the medical specialties in doing so," says the EIS alumnus, who wanted to focus on injury and violence prevention among children, since they are the leading causes of death among children.



Ketna Mistry, MD, Senior Medical Officer in Exposure Investigations, Division of Health Assessments and Consultations, ATSDR

When Ketna Mistry was a practicing pediatrician in Atlanta and Houston, she was surprised by how many parents and patients did not have information that could have prevented a health problem.

"I realized I could make a more substantial impact on health if I applied my prevention focus to public health, where I could reach even larger

populations,” says the senior medical officer in ATSDR’s Exposure Investigations Branch. Mistry manages on-site investigations of environmental public health problems. She believes that pediatric-trained CDC staff can serve as both an “advocate and a voice for children.”

Julie Gilchrist, MD, (CDR, USPHS), Medical Epidemiologist, Division of Unintentional Injury Prevention, NCIPC

Injuries are the leading cause of death among children, and much of what causes children to be admitted to a hospital Emergency Department or ICU are injury-related and preventable. That simple realization brought Julie Gilchrist, a pediatrician specializing in sports medicine, to CDC a decade ago.

“I wanted my work to have impact on a broader scale than one patient at a time,” says the former EIS officer, who oversees research and programs in many of the injury topic areas that affect children, including water safety/drowning prevention; sports and recreation-related injury prevention; dog-bite prevention; and choking/suffocation/strangulation prevention.



Gilchrist brings a “passion for helping kids be kids” by helping them be challenged yet safe in their activities.



Athena Kourtis, MD, PhD, MPH, Senior Service Fellow, Women’s Health and Fertility Branch, Division of Reproductive Health, NCCDPHP

Large-scale clinical research on pediatric HIV prevention was a huge draw for Athena Kourtis, a pediatrician specializing in infectious diseases, to join CDC.

The Johns Hopkins University alumnus joined CDC in 2001 after serving as a pediatric faculty member at Emory University’s School of Medicine, where she continues clinical work. Today, she is part of the Women’s Health and Fertility Branch in the Division of Reproductive Health.

“I have the opportunity to be involved in several research studies both locally and internationally,” says Kourtis, whose work on pediatric HIV pathogenesis and prevention was recently honored by the Atlanta Executive Federal Board. “I work with a very productive group of people, and our contributions to advancing the knowledge in the field have been multiple and varied,” she says. “It is very gratifying to have the chance to save the lives of some of the world’s most disadvantaged children through HIV prevention.”



Amanda Cohn, MD, Medical Epidemiologist, Meningitis and Vaccine Preventable Diseases Branch, Division of Bacterial Diseases, NCIRD

As a medical epidemiologist focused on meningococcal disease and pertussis, Amanda Cohn knows how much more common these diseases are among adolescents and how challenging it is to get kids in this age group vaccinated.

“There are so many opportunities to prevent diseases – both infectious and chronic – in children,” says Cohn, who joined CDC three years ago. Her experience includes seeing kids in a pediatric clinic, where she uses CDC’s immunization schedule to treat young patients.

“Having first-hand knowledge of how important it is to provide parents and providers with clear guidance for immunizations continues to inform the work I do here,” she says.



Georgina Peacock, MD, MPH, AUCD Fellow, Prevention Branch, Division of Birth Defects and Developmental Disabilities, NCBDDD

What are the “red flags” of child development concerns such as autism? Georgina Peacock works with healthcare providers to improve knowledge of those signs in her role as AUCD Fellow, a position she’s held since March. Part of her job is working on “[Learn the Signs. Act Early](#),” a campaign to raise awareness about child development, developmental delays, and autism.

“This work gives me the possibility to change the lives of children and their families by detecting delays earlier,” says this dedicated mother of four. Prior to coming to CDC, Peacock worked with state agencies to improve

child care quality.

“Many systems must work for children to grow up healthy and achieve their true potential,” she says, adding that public health can play a big role in making this happen.

Jeanne Santoli, MD, MPH, Deputy Director, Immunization Services Division, NCIRD

CDC attracted Jeanne Santoli, an Atlanta native, not only because it afforded her a chance to return home, but also because it offered her a way to “contribute to the health of children, adolescents and adults” without being a practicing physician or educator.

The Princeton University alumna joined CDC in 1998 as a member of NIP's Health Services Research and Evaluation Branch. As deputy director for the Immunization Services Division, she manages issues related to vaccine supply and assesses vaccine coverage. She researches barriers to immunizations and evaluates strategies to overcome them.

“Pediatricians are critical to public health, particularly in immunization, where much of what public health promotes is carried out by providers who care for children,” she says.

