

LANE COUNTY MEDICAL SOCIETY | AUGUST 2025

MEDICAL ERS

I've Got Your Back

Shaped by conflict,
compassion, and cross-
continental care,
Dr. Majaliwa Mzombwe
treats pain with purpose.

LAST CHANCE:
LCMS Vineyard
Social August 9th





CHAMBERS CONSTRUCTION

CCB# 114258

*Building What's Important
in Peoples' Lives*

A healing environment for recovery

The **Serenity Lane Coburg Residential Treatment Center** features administrative offices, hospital and nursing units, food services, lecture halls, fitness center, meeting pods, residential units, meditation center, as well as outdoor structures, walking paths, ponds and open spaces. The buildings utilize a mix of energy-efficient mechanical, electrical, and plumbing systems to reduce operational costs.

Size: 14 buildings, 16 acres

Location: Coburg, OR

Large & Small Commercial Projects • Pre-Engineered Metal Buildings

541-687-9445 • ChambersConstruction.com

Contents

LANE COUNTY MEDICAL SOCIETY | AUGUST 2025

CULTURAL COMPETENCY

9

The JAMA Network

See how first-generation and low-income medical students face persistent financial, social, and institutional barriers.

12

Belonging Matters

Jocelyn Wensel reflects on her journey, stating that cultural competency is a lifelong commitment for equitable care.

14

Member Profile

From Burundi to Eugene, Dr. Majaliwa Mzombwe's journey through global health, COVID care, and pain medicine shaped his purpose.

21

Postpartum Nutrition

Melissa Ortiz illustrates how nutrition rooted in cultural understanding can transform outcomes in postpartum patients.



LCMS MISSION STATEMENT

The Lane County Medical Society is a professional organization that represents, unifies, and supports its physician members as they practice the science and art of medicine. The Society promotes the interests of member physicians and advocates for the health of the community.



24

Eugene Ballet

Eugene Ballet's new season uses dance to retell timeless stories, connecting tradition, innovation, and culture.

Disclaimer: *Medical Matters* is published by Lane County Medical Society (LCMS). The Lane County Medical Society Board, staff, and hired contractors are not responsible for any content information, accuracy, and views submitted to us. Content published is provided by their subjects and/or authors. Views do not necessarily align with those of LCMS nor constitute professional advice. Consult your medical (or other) professional where applicable. The LCMS Board and staff shall not be held responsible for any decisions or actions made based on information within this magazine.

2026 Renewal Opportunities Are Here!

Have questions or ready to renew? Scan below or email us at info@lcmedsociety.com



SUPPORTING THOSE WHO TAKE CARE OF OUR COMMUNITY.



Sponsorships

for our annual events and programs—helping support our physicians and community



Advertising

in Medical Matters magazine and our annual Physician Directory with current practice information



Membership

renewal for continued access to exclusive LCMS resources and events

MEDICAL MATTERS

Lane County Medical Society Executive Committee

President

Bryan McVay, MD

Past President

Leslie Pelinka, MD

Vice President

Amandajo Sanders, DO

Secretary/Treasurer

Gulrukh Rizvi, MD

Executive Director

Kianna Cabuco, MBA

Foundation Director

Shondra Holliday

Editor

Angel Montes-Michel

Advertising & Membership Inquiries

info@lcmedsociety.com

Lane County Medical Society

PO BOX 7192

Springfield, OR 97475

Phone: 541-686-0995

info@lcmedsociety.com

www.lcmedsociety.com

Your Practice Protects Lives. Let Us Protect Your Future.

From protecting your practice to securing your family's financial future, we specialize in helping medical professionals build confident, comprehensive plans.

Let us support you—so life goes right.

Katie Carl, Agent

Bus: 541-359-1189

EugeneSF.com



LCMS Physician Wellness Program

Confidential Counseling

Cascade Health or
24-hour support line
541-345-2800

Joyful Living Counseling

541-505-8168

Karen McGovern

920-903-0323

Lifestyle Medicine

Joseph Sage, MD

541-600-2492

New providers have been added to the PWP. Visit lcmedsociety.com/pwp to view the full list or for more details.

Our Own Journey

Last month, LCMS staff attended the American Association of Medical Society Executives (AAMSE) annual conference. Not only is it a great way for us to connect with peers who face similar challenges to ours, but it is also an eye-opening opportunity to understand how differently healthcare is perceived and received across the country.

One key takeaway is that we're fortunate in Oregon to have the legislative protections that are in place. Can they be improved? Of course! But imagine being in the shoes of a colleague living and working in a state that highly undervalues the knowledge of medical professionals or restricts practice in ways that conflict with personal values.

Each and every person has faced challenges that shape who they are at present. Yes, we can move to a place where we feel more comfortable. Yes, we can surround ourselves with those who are more supportive. We can address all we have accomplished and overcome.

BUT can we empathize with those whose challenges and barriers are still in place? Who are still wading through the muck in hopes of finding solid ground? Are we open to understanding our world from the perspectives of the people standing next to us?

Understanding: comprehension; an individual's perception or judgment of a situation. Understanding (adjective): sympathetically aware of other people's feelings.

Moving from a community with a plethora of cultures, languages, and foods to one with a clear majority can bring on a sense of anxiety

and hesitation. At least, that's how I felt when I moved here from L.A.

The questions were endless: How do I build a community where I feel safe and supported? Will my brown skin make me stand out in ways that could negatively impact me? Are there spaces where I can connect with others who have similar thoughts or struggles? Where am I going to get an actual carne asada burrito?

The answers to these questions took a while for me to find (still looking for a comparable burrito). At the same time, our community has grown significantly in its diversity over the past decade that I've lived in the area.

While some may not understand the challenges that can come with being a minority in a community, I didn't realize how lucky I was to grow up in a community with so much diversity. I've met individuals who didn't even realize there were people who didn't look like them until adulthood. Knowing they were still learning, but also willing to understand different perspectives, made me feel more comfortable sharing my experiences, rather than creating a defensive wall that could shield me from discomfort.

Listening and learning has been a two-way street. Understanding what sets us apart as individuals and how that can also bring us together helps create stronger communities, and ours is constantly growing.

Within LCMS, we have members from all over the country and all over the world. You bring unique experiences and personalized journeys that have molded you and led you to practice medicine in our community.

One of our goals is to encourage that culture of belonging through a variety of events.

- **Interested in enjoying a laid-back, outdoor social with live music?** Join us for the Vineyard Event on August 9th at Hayworth Estate Wines.
- **Want to connect with the arts?** We're partnering with the Eugene Ballet for a social at the Hult Center on October 30th with a private, behind-the-scenes look at Dracula.
- **Want to end the year on a high note?** Connect with peers at the Winter Social on December 9th for casual conversation and good eats.

To further develop health resources for our area, LCMS is also partnering with Lane Community Health Council and others to form the Lane County Healthcare Sector Partnership. Through this, we hope to identify and address pain points within our healthcare community, while finding ways to support and recruit more providers to the area. The kickoff conversation is scheduled for mid-September. If you're interested in joining the conversation, please don't hesitate to reach out.

We hope to see you at one of these opportunities to build rapport and connect with colleagues beyond what we see at the surface level. Join us in growing a welcoming, supportive, and well community for everyone. ♦





Exciting News for our Medical Community!

June 1st, 2025 - Willamette Valley Cancer Institute and Research Center (WVCI) proudly announces a strategic partnership with Oregon Surgical Wellness (OSW), welcoming distinguished breast surgeons Dr. Winnie Henderson, PhD, FACS, CGRA, and Dr. Christine Kollmorgen, FACS, along with their committed OSW staff.

This collaboration marks a pivotal advancement in WVCI's mission to elevate patient care and address the growing need for specialized healthcare providers in our communities.

Together, we're creating a more comprehensive cancer program in Lane County to transform each breast cancer patient's experience into a well-coordinated, supportive journey.

Dr. Henderson and Dr. Kollmorgen will continue to serve at their current location and accept new patients at Oregon Surgical Wellness, with no change to phone or fax numbers. For more information on the partnership, please visit:

<https://www.oregoncancer.com/practice-news/>



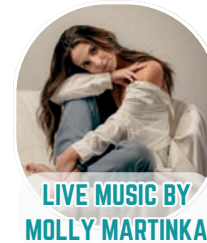
Chart Notes

LCMS Vineyard Social at Hayworth Estate Wines

LCMS members are invited to unwind and enjoy a relaxing summer afternoon social on Saturday, August 9th, from 1-3 PM at Hayworth Estate Wines. Enjoy live music by Molly Martinka, connect with colleagues, and soak in the beautiful vineyard views.

Tickets are \$15 per person for this adults only event. Space is limited. We can't wait to see you there!

Please RSVP by August 4th by scanning the QR code or visiting our website at lcmedsociety.com.



“Everyone has both conscious and unconscious biases that are driving a lot of their decisions...It’s easy to attend a seminar and not change your behavior, but having that sharp discomfort...can be a helpful eye-opener.”

– DR. MAJALIWA MZOMBWE, MD ON STEPPING AWAY FROM CULTURAL BIASES. SEE MEMBER PROFILE ON PAGE 14.

UPCOMING

SAVE THE DATE! Join us on Saturday, October 30th for the LCMS Fall Social at the Hult Center, featuring a special behind-the-scenes preview of *Dracula* by the Eugene Ballet. Registration opens soon. All LCMS members and their guests are welcome.

CME: When Things Go Wrong in the Outdoors on August 14–15th at Timberline Lodge, Mt. Hood. Join OHSU for a hands-on course exploring outdoor and wilderness medicine.

CME: The Oregon Geriatrics Society Annual Conference takes place October 2–5th at Sunriver Resort, bringing together providers focused on aging and population health.



 **Follow Us on Social Media**

Get Connected for Our Latest News & Updates

 on LinkedIn @lanecountymedicalsociety

 on Facebook @lanecountymedicalsociety

 on Instagram @lcmedsociety

SCAN ME 

CADUCEUS

Physician Support Group

MEETINGS EVERY **WEDNESDAY EVENING FROM 7:30-8:30 PM** FOR LICENSED HEALTHCARE PROFESSIONALS SEEKING PEER SUPPORT DURING ADDICTION RECOVERY. EMAIL **INFO@LCMEDSOCIETY.COM** FOR MORE INFORMATION.

“When I realized I needed help for my substance use disorder I was anxious about sharing that information as a doctor (who should know better). My welcome into the Caduceus meeting 12 step program (for licensed health care professionals) was just what I needed as part of a program of recovery. I have been coming weekly for 15 years and care for and admire the people I’ve shared this journey with.”





Eugene Family YMCA WALK IT OFF with the Y!

Create healthy habits with the Y this summer! Join our summer-long community tradition that encourages movement, health and fun! Enjoy weekly themes, guided and independent walks, raffles from local businesses and family-friendly fun!



- **DATES:** Wednesdays from June 18 to August 27
- **TIME:** 5:30 to 6:30 p.m.
- **WHERE:** Alton Baker Park
- **WHO:** Everyone—bring your family and friends!
- **COST:** Free!



Presented by:  Peace Health

Weekly themes! Crazy hats and day-glow gear and sasquatches, oh my!



Sapient
[sā-pē-ənt]

*Having or showing great wisdom
or sound judgment.*

A FOCUS FINANCIAL PARTNER

101 East Broadway, Ste. 480, Eugene, OR 97401
541.762.0300 | sapientprivatewealthmanagement.com

Reshaping Medical Education to Uplift First-Generation Medical Students

BY MYTIEN NGUYEN, MS; DOWIN BOATRIGHT, MD, MBA, MHS; HYACINTH RC MASON, PHD, MPH, CHES
THE JAMA NETWORK

Kamran et al¹ identified a persistent lack of socioeconomic diversity in medical school, where students from higher-income backgrounds continue to be overrepresented in medical schools. Prior research also demonstrated that this disparity begins even before medical school, influencing both the decision to apply to medical school and the likelihood of acceptance.²

Compared with their non-first-generation peers, first-generation students are less likely to apply to medical school and, when they do, have lower acceptance rates.²

During medical school, first-generation and low-income students are more likely to take a leave of absence,³ and consistent with prior findings, Kamran et al¹ also found that first-generation and low-income students are more likely to leave medical training altogether.⁴ Among those who complete their training, low-income students are less likely to secure residency placements.⁵ These findings highlight the systemic challenges, such as financial, social, and institutional barriers, faced by first-generation and low-income students at every stage of medical training that impede their success.

The financial burden associated with medical education is one of the most significant challenges for first-generation and low-income students. High costs of medical school tuition, exam fees, and cost-of-living

expenses force many students to balance work with their studies, often without financial safety nets, leading to increased stress and debt accumulation.⁶ These financial constraints can negatively affect academic performance and retention.

Another critical challenge for these students is the disparity in cultural and social capital. Professional networking, mentorship, and access to preparatory resources play a pivotal role in medical training, particularly in medical school admissions and advancement into residency.

“First-generation and low-income students are more likely to leave medical training altogether.”

Students from affluent backgrounds often have familial or institutional connections to professionals in the field who provide them with guidance and opportunities. In contrast, first-generation and low-income students frequently lack these support systems, making it more difficult to navigate the rigorous academic and professional expectations of medical school.

In environments that are predominantly high income, first-generation and low-income students often experience imposter syndrome, feelings of exclusion, and microaggressions. Compared with their

higher-income peers, students from low-income backgrounds report lower medical education environment scores across all domains, including student empowerment and fellowship.⁷ These negative experiences can erode confidence, hinder academic performance, and contribute to the higher attrition rates found by Kamran and colleagues.¹

The challenges faced by first-generation and low-income students underscore the need for comprehensive institutional interventions to promote equity in the pathway and improve retention rates. While holistic admissions practices are a step in the right direction, they must be complemented by pathway programs that provide early exposure and support for first-generation and low-income students.

Expanding pathway programs that engage underrepresented students before they apply to medical school can help bridge socioeconomic gaps throughout medical training. Need-based scholarships and loan forgiveness programs are essential, as are transparency in financial aid allocation and living expense support. Providing clear guidance on financial aid options and ensuring that living stipends align with actual costs can significantly reduce financial stress for first-generation and low-income students.

Social as well as material capital is needed. Structured peer mentorship programs tailored to first-generation and low-income students can foster a sense of belonging and provide essential guidance.

Proactive and relational academic

support, including faculty-led initiatives, can help all students feel included in the medical community and achieve the professional expectations of medical training. Ongoing academic and professional enrichment programs should be integrated into institutional support structures to ensure students receive continuous guidance throughout their training.

Medical training should incorporate socioeconomic awareness into curricula, ensuring that students understand the impact of social determinants of health.

To effectively do this, medical schools must amplify the voices of their first-generation and low-income community as well as partner with national

organizations, such as the National First Generation and Low Income in Medicine Association.⁸ Creating an inclusive educational culture that acknowledges and addresses these disparities can contribute to a more supportive learning environment.

The house of medicine remains a domain where socioeconomic disparities persist and where first-generation college graduates and low-income students pervasively experience suboptimal academic outcomes, such as leave of absence and attrition.

Kamran et al¹ found that there is a persistent overrepresentation of students from higher-income backgrounds in medical schools. Addressing these barriers is crucial,

as students from disadvantaged backgrounds bring valuable perspectives to medical education, including a nuanced understanding of social and structural determinants of health, strong advocacy skills, cultural humility, and a diverse experience that enriches the field.⁹

Dismantling systemic barriers is essential to advancing educational equity and ensuring that medicine benefits from the diverse voices and lived experiences that are vital to delivering equitable, compassionate care for all.◆

*Sourced from the JAMA Network
Open website: jamanetwork.com/journals/jamanetworkopen/fullarticle/2833850*

1. "First-generation and low-income students in the national medical student body," JAMA Network, doi.org/10.1001/jamanetworkopen.2025.9769
2. "First-generation and continuing-generation college graduates' application, acceptance, and matriculation....," Medical Education Online, doi.org/10.1080/10872981.2021.2010291
3. "Leave of absence and medical student placement into graduate medical education by race and ethnicity," JAMA, doi.org/10.1001/jama.2024.4797
4. "Association of sociodemographic characteristics with US medical student attrition," JAMA Internal Medicine, doi.org/10.1001/jamainternmed.2022.2194
5. "Rates of medical student placement into graduate medical education by sex, race and ethnicity, and socioeconomic status," JAMA Network, doi.org/10.1001/jamanetworkopen.2022.29243
6. "Understanding the medical education experiences of low-income students through a Maslow's hierarchy of needs lens," Journal of General Internal Medicine, doi.org/10.1007/s11606-024-09161-3
7. "Development of a tool to measure student perceptions of equity and inclusion in medical schools," JAMA Network, doi.org/10.1001/jamanetworkopen.2024.0001
8. "National First Generation and Low Income in Medicine Association," <http://FGLIMed.org>
9. "Challenges facing first-generation college graduates in medical school: a qualitative analysis," JAMA Network, doi.org/10.1001/jamanetworkopen.2023.47528



We are hiring:

**Family Practice Physician
Internal Medicine Physician**

GREAT WORK-LIFE BALANCE

Paid holidays, shared/light night and weekend calls

A GROWING COMPANY

Great location, dedicated staff, recently rebranded

A LEADING EMPLOYER

Competitive pay, comprehensive benefits program, one of the best 401k plans in the area

**JOIN
OUR
TEAM!**

VALLEY MED @ THE TEN
10 COBURG RD, SUITE 201
EUGENE, OR 97401
(541) 687-8581

Learn more and apply:
[VALLEYMEDPC.COM/CAREERS](https://valleymedpc.com/careers)

Supporting Trillium Members During Extreme Heat

Trillium has resources to help our members stay healthy during climate events:

- Flexible services for air conditioners, hotel stays, drinking water and more
- Transportation to cooling centers
- Hot weather safety webpage with updates and community resources

Providers may refer Trillium members for flexible services or members may make a direct request.



To learn more, visit trilliumohp.com or call Member Services at 1-877-600-5472 (TTY 711).



TrilliumOHP.com



Concerts • Community Events • Tasting

VISIT [SILVANRIDGE.COM](https://silvanridge.com)
FOR EVENTS & RESERVATIONS

Silvan Ridge
WINERY

27012 Briggs Hill Road | Eugene
OPEN DAILY 12-5 PM

The Lifelong Practice

BY JOCELYN WENSEL, MS3

INTERNATIONAL UNIVERSITY OF HEALTH
SCIENCES & STUDENT NATIONAL
MEDICAL ASSOCIATION RUN THE LIST
PODCAST CO-PRODUCER

My journey in academic medicine, en route to becoming a practicing physician, has been anything but traditional. My path in understanding cultural competency started long before that as a young multi-ethnic Black girl. Moving to Lane County at age six from Tucson, Arizona, gave me experiences that allowed me to recognize the importance of belonging where you live. Since then, this awareness has helped me see how cultural competency applies to healthcare practice in many ways.

Cultural competence in healthcare isn't just a continuing medical education course or a mandated soft skill to add to medical college and university curriculum; cultural competency is a philosophy that should inform all education and be used to teach public health policy, education, training protocols and initiatives, and healthcare research and training recruitment strategies.

Georgetown University's Health Policy Institute defines cultural competence as: *Cultural competence is the ability of providers and organizations to effectively deliver healthcare services that meet the social, cultural, and linguistic needs of patients. A culturally competent health care system can help improve health outcomes and quality of care and can contribute to the elimination of racial and ethnic health disparities.*

Examples of strategies to move the healthcare system toward these goals include providing relevant training on

“...cultural competency is a philosophy that should inform all education and be used to teach public health policy, education, training protocols and initiatives...”

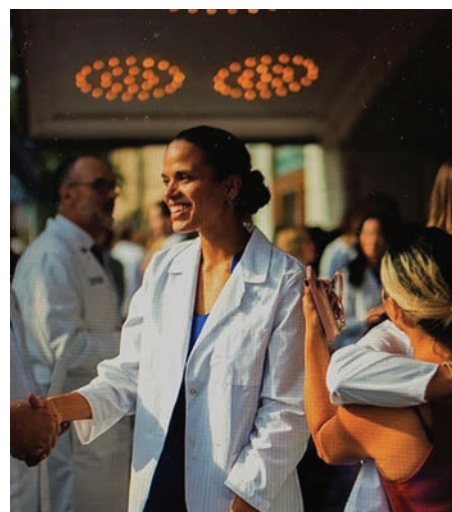
cultural competence and cross-cultural issues to healthcare professionals and creating policies that reduce administrative and linguistic barriers to patient care, thus helping patients feel a greater sense of belonging.

Cultural competency, similar to the concept and values-based initiative diversity, equity, and inclusion go beyond understanding what healthcare personnel and tools you may need to adequately treat patients from different cultural, linguistic, geographic, ethnic, religious, and sociopolitical origins; it also means recruiting people from different backgrounds and lived experiences with different intersectional identities to help design the systems themselves—people of different gender and sexual identities, physical abilities, and cognitive styles, such as those of neurodivergent and neurotypical individuals.

In well-being and belonging spaces and neuro-inclusive spaces, there is a saying, “Nothing about us without us.” It means that cultural competency isn't just about reflecting on failures and shortcomings after harm has occurred. It's about proactive reflection to prevent harm before it happens.

As science writer Rod McCullom put it: *When patients don't trust the providers caring for them or when they feel dismissed or misunderstood, they're less likely to share relevant information.*

And when providers don't understand a patient's life experiences and culture or don't speak their language, they may be less likely to ask relevant questions. Culturally sensitive care starts with the premise that people come from diverse cultural, ethnic, religious, and socioeconomic backgrounds and that understanding these differences is crucial for proper health care. A growing body of research shows that by addressing bias and stigma directly in a rapidly diversifying patient population, culturally concordant care results in better health outcomes across a person's lifespan—from prenatal and maternal health to pediatrics to end-of-life decisions.

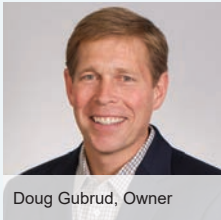


Jocelyn Wensel shakes hands with a professor at her white coat ceremony.

(continued on page 19)



Summer is
Karastan[®]
Season



Doug Gubrud, Owner

Imperial Floors
FLOOR COVERING & DECORATING CENTER

Celebrating Over 50 Years!

541.342.5031 • 355 Lincoln Street, Eugene • imperialfloors.com

burch's[™]
...believe in fit

**Healthcare Professional
Footwear Provider**

Burch's Proudly Offers a
Medical Professional Discount!*

- Expert Service
- Premium Brands
- Specializing in Fit & Comfort

Find Your Fit at Both Burch's Locations!



Burch's Shoes
16 Oakway Center



Burch's Shoes & Outlet
1 Club Road

**Discount available in-store only*



dansko

Professional Clog

The icon with all-day comfort that lasts.
Quality you can trust since 1990.



Dr. Majaliwa Mzombwe
enjoying an afternoon walk at
Alton Baker Park with his new
puppy, Kelele Nakupenda.

I've Got Your Back

Dr. Majaliwa Mzombwe reflects on how his global roots, mentors, and path in medicine led to local impact.

BY STEVIE DAVISSON

FOR LANE COUNTY MEDICAL SOCIETY

Dr. Majaliwa Mzombwe, MD, always knew he would be a doctor. “My life goal was to be a sports medicine physician at the World Cup and be on the sidelines with an African team.” With the influence of his parents, who molded him to pursue the field of medicine, Mzombwe began his medical studies younger than most, and his journey from World Cup hopeful to practicing Interventional Pain Medicine and Sports Medicine (IPM) in Eugene is just as fascinating as the man himself.

Born in Bujumbura, Burundi, to physician parents, Mzombwe's youth was marked by change. Forced to flee Burundi due to ethnic conflict, Mzombwe's family first immigrated to Toronto, Ontario, then again when he was in second grade, this time to Mississippi. “It was quite the cultural whiplash...it was hard to understand people's accents,” he admits.

Early Days of Medicine

Mzombwe got a head start on his medical career by attending the Mississippi School for Mathematics and Science, a boarding school with accelerated classes and college credit. His hard work led him to early acceptance at the University of Alabama at Birmingham, but Mzombwe ultimately chose Vanderbilt University instead.

“What really attracted me to that program was that they had a focus on global health,” he says. This was a concept Mzombwe was familiar with from a very young age due to his parents’ work with organizations like the United Nations Children’s Fund (UNICEF).

“Vanderbilt actually had the Fogarty Fulbright Fellowship, which is a notable, federally-sponsored, global health initiative to expand global health access and research abroad,” he says. He applied to the program, was accepted with a scholarship, and as a consequence spent eleven months in Tanzania, doing noncommunicable disease research.

He was eager to collaborate with organizations like the National Institutes of Health (NIH), which contributed to the work he was able to do there. He describes his time there as formative, and his interest in global health was further encouraged while studying hypertension, diabetes, and cardiovascular risk factors and how they can interplay in the populations in Tanzania.

Mzombwe’s time at the Bugando Medical Center has remained close to his heart. “The work I was doing was housed within a program supported by United States Agency for International Development (USAID), which we know has since been cut,” he says. Having seen the effects of those programs, Mzombwe believes that their absence will have life-changing consequences

for folks around the world.

After graduating from medical school, Mzombwe asked himself, “What kind of physician do I want to be at the end of all this?” The appeal of orthopedic surgery and sports medicine led Mzombwe to realize he did not want that lifestyle. Instead, he was looking for a specialty that still involved hands-on skills where he could use his technical skills.

During his surgical rotation, he became interested in the IPM department nearby at the VA, where he met one of his first mentors in the field of medicine and physical health, Dr. Gina Walton. Dr. Walton is the Vice President of Medical Diversity & Inclusion and Associate Designated Institutional Official for Graduate Medical Education at Sinai Chicago. “[She] was one of my main anchors who showed me how I could combine my interest in global health and interventions with IPM,” he says.

Graduating Class of COVID-19

Soon after, Mzombwe matched at the University of Miami (U of M) for IPM, and began his career as a physician with an intern year in Brooklyn and NYC at Maimonides Medical Center.

“I was in the graduating class of 2019, so I was on the frontlines of COVID starting in early 2020,” he recalls. He spent four months treating COVID patients, and the emotional toll was enormous as his hospital was one of the first to necessitate trucks with freezer capability because of the amount of bodies that were coming through.

He describes the pandemic as another affirmation of the importance of global health. “The failure of [the] worldwide systematic intervention to prevent the spread of, and mitigate the effects of COVID were the reason why we had a lot of morbidity...not just in this country, but around the world. [We]

also couldn’t only take care of ourselves while ignoring [others]—it simply isn’t the way healthcare works,” he explains. “We all get affected.”

He continued his education at U of M and found that IPM suited him and described it as a very good encapsulation of some of the health trends in the U.S.

“The typical path is through the anesthesia route [which] emphasizes pharmacologic management with use of opioids, which did not appeal to me,” he adds.

Rather, he was interested in path number two, which focused more on holistic rehabilitation and intervention. He decided to go a non-ACGME route for his IPM training and applied broadly, being accepted at Pacific Sports and Spine, where he completed a fellowship in Interventional Spine and Musculoskeletal Medicine in 2024.

Pacific Sports and Spine appealed to Mzombwe because it was a hybrid program, with instructors of a similar background to his in IPM. “They subspecialized in pain medicine, while having that rehab perspective, rather than the anesthesia perspective,” he explains. “That intrigued me.”

After completing his fellowship, Mzombwe decided to stay on at Pacific Sports and Spine. “I was pleasantly surprised by what I found in Eugene. It made me want to stay for the first few years of my medical career. The rural nature of the population isn’t anything new to me. There is a lot more in common with Oregonians and Mississippians than I was expecting,” he laughs.

Cross-Continental Care Model

Mzombwe brings his global experiences into the workplace with him, using the biopsychosocial model for pain treatment. “I follow the principle of trying to meet the complete patient,” he explains. “The mind and

body are not two separate things. If you can help one aspect, you're in fact helping both."

Mzombwe's approach to patient care is also uniquely affected by his background as an immigrant and his work abroad; he is acutely aware of the biases physicians can bring into an exam room and urges other practitioners to take the time to examine how they're approaching their patients. "Everyone has both conscious and unconscious biases that are driving a lot of their decisions... acknowledging this is a step towards greater patient care," Mzombwe says.

"The next step is to put yourself in uncomfortable situations, and get a sense of the discomfort and alienation that many patients experience in their lives. Developing that genuine empathy is key," Mzombwe explains. "It's easy

to attend a seminar and not change your behavior, but having that sharp discomfort of being alienated can be a helpful eye-opener."

Mzombwe's global health experiences have given him practice in meeting folks where they are. Even if he's not familiar with their specific background, his baseline is to treat patients with a certain approach of compassion, understanding, and respect. He always has their backs.

He views this not just as a mindset, but as a reflection of himself. "[I am] the product of two physicians who were practicing in Burundi, but left because of war. [They] were still passionate about medicine and wanted to impart that to their children...I happen to have that passion... Ultimately, it doesn't matter if you're in Burundi or if you're in Eugene, there

are essential tenets to healthcare that will be helpful in each circumstance," he mentions.

Future Goals—Literally

As a new member of LCMS and a recent newcomer to Eugene, Mzombwe is ready to embrace the Pacific Northwest, describing himself as interested in all the granola activities. He recently adopted a puppy, Kelele Nakupenda, to accompany him while chasing waterfalls and hiking in the rain.

"I am excited to be a greater part of the community and look forward to hearing what other members of LCMS think regarding the importance of global health and cultural competency in a global context," he says. And as for his World Cup dreams? "That's still a goal of mine," he adds. ♦

Photos provided by Angel Montes



Comprehensive Wealth Management

497 Oakway Road, Suite 300
Eugene, OR 97401
541.636.4001
www.sittnerandnelson.com

Advisory services offered through
Sittner & Nelson, an SEC Registered Investment Advisor



Todd Nelson CPA, CFP® | Fred Sittner MBA, CFP®
Kevin Sittner CPA, CFP®, CFA | Sarah Brooke CFP®

Every

PICTURE Tells a STORY

OIC specializes in various forms of **Ultrasound Imaging**. Our highly skilled Sonographers perform a wide variety of exams including general, musculoskeletal, vascular, breast, as well as ultrasound guided biopsies and other procedures.

We also provide:

- MRI (1.5 & 3T)
- PET/CT
- 3D MAMMOGRAPHY
- DIGITAL X-RAY
- FLUOROSCOPY
- COMPUTED TOMOGRAPHY (CT)
- BONE DENSITY (DEXA)
- AUTOMATED BREAST ULTRASOUND (ABUS)
- PEDIATRIC IMAGING
We observe the Image Gently Pledge
- PLATELET RICH PLASMA (PRP) THERAPY



**OREGON
IMAGING
CENTERS**

541.334.7555
oregonimaging.com

University District | RiverBend Pavilion



Private Wealth Management Team



EXPERIENCE MATTERS



TAX MANAGEMENT | ASSET PROTECTION | BUSINESS STRATEGY

(541) 342-2224

wealth@finleydavis.com

www.finleydavis.com

Award granted in July 2024 for the period 2023-2024. Receipt of an award should not be construed as an endorsement of the financial professional and is no guarantee of future investment success.
Investment Advisory Services offered through RiskBridge Advisors, LLC d/b/a Finley Davis Private Wealth ("RiskBridge") (RB) or Lion Street Advisors, LLC (LSA), registered investment advisers with the SEC. Registration does not imply a certain level of skill or training.
Securities offered through Lion Street Financial, LLC (LSF), member FINRA & SIPC, through Finley Davis Financial Group, Inc. (FDFG). RB and FDFG are not affiliated with LSA or LSF.

(continued from page 12)

Ultimately, to ensure that cultural competency continues to be integrated effectively in healthcare practice, it's important for professionals and administrators to offer more opportunities to hear from their patients and the communities they serve. That means asking for feedback at every stage—even before a patient enters the waiting room or calls to schedule.

There are many opportunities for healthcare providers to look around their community and understand what experiences they share with patients and what experiences and identities may be different, allowing us to better understand a patient's social determinants of health, and ask them: "How can I make you feel seen and understood while you're in my care?"

It's also important to engage in

dialogue about blind spots in understanding the different intersectional identities and cultures that exist. Then, educate oneself and advocate for stronger inclusion of these topics in continuing medical education, patient literature, research publications, and educational institutions. It's always a good practice to engage in conversations around the common misconceptions people believe others have about them, and what they deem to be good resources to educate themselves about the subject.

However, choosing to engage in cultural competency as a healthcare provider and patient educator is choosing to engage in discomfort. Understanding is a lifelong pursuit, and growth in this happens outside the clinic as much, if not more so, than in clinic settings.

As I continue to grow in my pursuit of cultural competency, I know I have been extremely lucky to be influenced by many healthcare professionals who have been mentors, friends, and even family. They have uplifted me in my educational, research, and advocacy pursuits throughout my medical academic journey since I was a young girl.

I would not be who I am today or where I am today without my mom, Karen Crocker-Wensel, MD, my father, JP Wensel, MD, PhD, and my friend and mentor, Dr. Majaliwa Mzombwe, Dr. Kimberly Stewart (my Army mom and mentor), and Dr. Lauren Herbert, who tirelessly advocates for her patients as a pediatrician and continues to advocate for her community while in retirement.◆

Photo provided by Jocelyn Wensel



The Adrienne St Clair Group has been with the same company in the same location for over 25 years while consistently achieving Top Sales Awards. The knowledge and skills we have gained have allowed us to sell well over 1,800 homes in Lane County. In addition to our record sales, our reputation comes from the service we provide to each of our clients whether a buyer or seller.

Experience & Creativity are the Keys to Selling Your Home!

*Trusted and Experienced Real Estate Professionals
Serving Lane County for More Than 20 Years*



Adrienne St.Clair

THE Adrienne St. Clair Group



Contact Us Today! (541) 953-6206 | adrienne@thestclairs.com | TheStClairs.com

Hope. Healing. Peace.

Devoted to your care.

peacehealth.org



Nutritional Prenatal Care Across Cultures

BY MELISSA ORTIZ, RD, CDCES
MY DIABETES NUTRITION

One of the most vulnerable yet powerful periods in a person's life is the postpartum stage. Recovery is not just physical; it's emotional, social, and deeply tied to cultural norms.

While healthcare professionals are trained to assess medical needs, cultural identity and lived experience play a significant role in shaping a patient's understanding of nutrition, chronic disease, and recovery, especially during the postpartum period.

This is particularly important across Oregon's richly diverse and growing population, including Latino, Pacific Islander, Asian American, African American, Native American, and Caucasian communities.

The postpartum stage is medically defined as the first six weeks after childbirth, and is in reality a much longer and more complex transition. It's a time marked by physical healing, hormonal changes, psychological adjustment, and the pressures of caring for a newborn.

Despite its significance, the postpartum period is often underserved, particularly in the United States, where care frequently ends after the six-week checkup. Yet research shows that one in three pregnancy-related deaths occurs between one week and one year postpartum, with rates disproportionately higher among Black, Indigenous, and Hispanic women.¹

The health of the birthing parent during this time also has a profound impact on infant development, bonding, and long-term outcomes. When healthcare providers overlook cultural frameworks, well-meaning advice can fall flat—or worse, alienate patients. Still, when cultural identity is honored and integrated into care, the outcomes speak for themselves.

Understanding Cultural Context

Nutritional counseling, especially in postpartum or chronic disease management, is much more than a checklist of healthy foods. Different cultures have different definitions of what it means to “eat well,” particularly during times of healing.

In many Latino and Pacific Islander cultures, for example, warm, comforting meals like soups or stews made from traditional ingredients are preferred postpartum. Recommending cold salads or smoothies—often considered healing in Western nutrition—might clash with these beliefs, making patients less likely to follow dietary recommendations.

In diabetes management, staple foods like white rice in Asian households or fry bread in Native American communities may be culturally significant, but nutritionally problematic when not addressed with sensitivity. The goal isn't to eliminate these foods, but to integrate them into a plan that honors both heritage and health. A patient who feels seen is far more likely to be engaged.

Cultural Integration in Care

Early in my career, I recall working with a Latina postpartum patient who had just been diagnosed with gestational diabetes. I came into the room prepared with handouts and nutrition guidelines, eager to be helpful. I confidently suggested replacing white rice and sweet breads with high-fiber alternatives, assuming it was a simple swap.

What I didn't realize at the time was how central those foods were to her family meals and emotional connection to home. She nodded politely, but never returned for her follow-up.

It wasn't until much later, after more training and deeper reflection, that I understood how my well-intentioned advice may have come across as

dismissive or even shaming. I hadn't asked about her traditions or what healing looked like in her home. That experience reminded me that cultural competence isn't something you check off a list—it's a lifelong practice of listening, adjusting, and approaching every patient with curiosity and respect.

Language and Assumptions

While language barriers can hinder understanding, assumptions can be just as harmful. It's easy to generalize—believing all Latino patients eat the same foods or that Asian American diets are inherently “healthier,” but such views erase the rich diversity within and across cultural groups. One Korean postpartum patient, for instance, emphasized the healing importance of miyeok-guk (seaweed soup), a traditional dish served to support recovery.

Similarly, Mexican birthing parents may turn to canela tea or warm broths for comfort and healing. Pacific Islander families might prepare koko alaisa (coconut milk and rice porridge), and African American traditions may include nutrient-rich soul foods passed down through generations as forms of nourishment and care. Including these cultural staples in recovery plans not only validates patients' identities, but can also increase engagement and trust.

It's equally important to recognize how family dynamics influence postpartum care. In many cultures, healing is not an individual experience, but rather a family-centered effort. Decisions about food, rest, and medical care are often shared among extended relatives. Educating and involving family members—not just the patient—can lead to more sustainable outcomes and a greater sense of support for the birthing parent.

As a Puerto Rican healthcare provider, my relationship with food is rooted in family, tradition, and care.

CULTURAL COMPETENCY

Growing up, meals were rarely just about nutrition—they were a form of connection. Arroz con gandules, sofrito simmering on the stove, abuela's caldo de pollo when someone was sick—these weren't just dishes; they were acts of love, healing, and resilience.

During my own postpartum journey, it wasn't medical advice that brought comfort, but the familiar flavors and presence of family in the kitchen. This lived experience reminds me that cultural competency isn't only about supporting patients—it's also about encouraging providers to honor their own roots.

When we as clinicians reflect on our personal traditions and healing practices, we deepen our empathy. We begin to see nutrition not just as a science, but as a language—one we speak at our own kitchen tables and one we can use to build bridges with those we serve.

Three Key Strategies

1. **Ask, Don't Assume:** Begin with open-ended questions like, "Are there any cultural or family traditions you follow for healing?" or "What foods help you feel your best after childbirth?"
2. **Use Trained Interpreters:** Avoid relying on family members to interpret complex health messages, especially in sensitive periods like postpartum care.
3. **Diversify Educational Materials:** Offer recipes, visuals, and health guides that reflect different languages and food traditions.

System-Level Changes

To truly support cultural competence, we need system-wide changes. This includes:

- Recruiting diverse healthcare professionals who reflect the populations they serve.

- Investing in continuing education on cultural humility, not just competence.
- Creating interdisciplinary care teams, where dietitians, physicians, doulas, and behavioral health specialists collaborate to meet the whole person's needs.

Healthcare providers, especially in Oregon's diverse landscape, have a responsibility to not only treat, but also understand. When we listen to the lived experiences of our patients—when we honor their cultural identity as a part of their healing—we shift from standard care to transformative care.

Let us move beyond checklists and protocols and become curious learners alongside our patients. In doing so, we don't just improve health outcomes—we restore trust, respect, and resilience in the very communities we serve. ♦

www.MyDiabetesNutrition.com

1. "Pregnancy Mortality Surveillance System," Centers for Disease Control and Prevention, www.cdc.gov/maternal-mortality/php/pregnancy-mortality-surveillance-data

RUN FOR YOUR LIFE 5K

OCT 19 – ALTON BAKER PARK

In partnership with:



Early bird pricing
until September 12th!







Take Charge of Your Financial Health!

Financial Wellness for Physicians
Explained & Explored By Stages

A free series for LCMS Physicians

Presented by



103-Generational Savings

September 18, 2025

College savings plans for kids and what they mean, the options available, and how much you can contribute/what they can specifically be used for. How to start a savings plans for your children and getting them started saving early.



104-Making Your Money Last

December 11, 2025

General advice on what is considered an appropriate amount of money to spend per year off a saved portfolio, how to structure your accounts, other income/investment options you may have, and the nuts and bolts of social security.



Each course can be taken separately.

**Recognize the strength
you possess to safeguard
your financial peace.**

 **541-686-0995**

 **info@lcmedsociety.com**

 **www.lcmedsociety.com**

Dancing Between Worlds

BY MICHELLE FERGUSON

COMMUNICATIONS AND MARKETING
DIRECTOR, EUGENE BALLET

There is a unique joy in ballet. It lives in the sweep of music, the energy of movement, and the quiet power of a story told without words. At its best, ballet opens a window into other worlds. This season, Eugene Ballet invites audiences to explore the rich cultural traditions behind some of the most enduring stories ever told.

Dracula, choreographed by Suzanne Haag, begins the journey with a bold retelling of the gothic legend. “The character of Dracula has always represented fear of the unknown, mystery, and temptation,” Haag says. “These are universal themes, which is why the story still resonates so strongly today.” Her interpretation draws on the novel’s fragmented format

to allow space for emotional reflection.

Cinderella draws on generations of European storytelling, brought to life through Toni Pimble’s choreographic vision. With Prokofiev’s score performed live by Orchestra Next and a focus on transformation and resilience, this production honors both the fantasy and emotional depth of the tale.

Petrushka: An AI Ballet reimagines a Russian folk character through a futuristic lens. “This version asks questions about technology, emotion, and what makes us human,” says Haag. It is paired with Martha Graham’s Dark Meadow Suite, inspired by indigenous rituals of the American Southwest and Mexico, exploring identity from an elemental, human place.

In Alice in Wonderland, Pimble turns Victorian absurdity into expressive movement. Haag reflects, “Childhood perspectives are relatable

to everyone. Even if we’ve forgotten the magic of childhood, it is so valuable to revisit it.” That spirit shapes The Large Rock and the Little Yew, adapted from a poetic story about healing and perseverance. “It may be about a rock and a tree,” Haag says, “but really, it is about children.”

“These ballets are about honoring the stories that shape us, stories passed down through generations, across cultures, and through movement,” says incoming Artistic Director Jennifer Martin. “Ballet gives us a way to share these narratives without words, to connect through emotion, rhythm, and beauty.”

In a time when understanding and connection matter more than ever, Eugene Ballet turns to dance, using it as a bridge between past and present, tradition and innovation. ♦



EUGENE
BALLET

2025/26 Season

Where Dreams Unfold, Fantasies Take Flight, and Stories Reveal What Moves Us

eugeneballet.org | Subscriptions ON SALE NOW! | 541-682-5000

1955

Built by the
community



2025

Still providing
award-winning care
to the community

As we enter our eighth decade,
McKenzie-Willamette Medical Center
is proud to continue offering quality
and compassionate care that earns
national recognitions, year after year.



McKenzie-Willamette
MEDICAL CENTER

70TH ANNIVERSARY



The Society
of Thoracic
Surgeons

Learn more about us at mckweb.com

Announcements

New Members

Majaliwa Mzombwe, MD

Physical Medicine & Rehabilitation
Pacific Sports and Spine
217 Division Ave
Eugene, 97401
P: 541-780-6654

Gautam Nayar, MD

Neurosurgery
Oregon Neurosurgery
3377 Riverbend Dr, 5th Fl
Springfield, 97477
P: 541-222-8400
F: 541-222-8401

LCMS Events

Visit the LCMS website to sign up for future events or email us at info@lcmedsociety.com for any inquiries.

Members are invited to the Vineyard Social on Saturday, August 9th, from 1–3 PM at Hayworth Estate Wines. Enjoy live music by Molly Martinka, connect with colleagues, and relax. Tickets are \$15. Limited to the first 60 registrants. Sign up by Aug 4th!

Our partner appreciation event is next month! We want to thank those who have invested in the wellness of our members and share what we have in store for the upcoming year, while enjoying small bites and great conversation. Check your inbox for the invitation and registration.

Has your practice manager connected with us yet?

All practice managers are invited to a PM Mixer on September 17th at J. Scott Cellars. This is a great opportunity to connect with colleagues, share ideas, and explore ways LCMS can support our members through their organizations. Register on our website or contact info@lcmedsociety.com.

Save the Date! Join us for the LCMS Fall Social at the Hult Center on October 30th, featuring an exclusive preview of *Dracula* by the Eugene Ballet. Registration opens soon—stay tuned!

Community

Volunteers in Medicine is holding its annual Swingin' Summer Night event at Shadow Hills Country Club August 15th at 6 PM. The theme for the year is 007-Dr. VIM and will feature a signature cocktail hour, a gift card wall and booze wall, silent auction, dinner, live auction, dancing, and more!



Join local leaders, healthcare providers, advocates, volunteers, and community members for the United Way Community Breakfast on September 11th at Venue 252. This meaningful event will focus on youth well-being and health equity in Lane County. Come be part of the conversation. Learn more at unitedwaylane.org.

Notes

Advertising opportunities are coming! Keep an eye out next month for renewal details and special promotions for our 2026 Magazine and Directory ads. Contact us with questions or inquiries.

Stay informed with statewide updates through the Oregon Medical Association to stay current on advocacy efforts and connect with physicians across the state. Learn more at theOMA.org

Stay in the loop! Subscribe to get the latest LCMS event updates and community news!





Lane County Medical Society

Physician Wellness Program

Open to all Active and Retired Lane County Physicians



National Support Line
888-409-0141



Appointments*
541-345-2800

*Appointments will be scheduled through Cascade Health.
All Lane County physicians are provided a limited number of sessions annually.



ELEVATING THE FUTURE OF NEUROSURGICAL CARE

Andrew J. Kokkino, M.D. | Daniel Hutton, D.O. | Peter Kosek, M.D. | Valerie Coon, M.D. | Alp Ozpinar, M.D.



We are proud to welcome our newest provider

Tom Nayar, MD

At Oregon Neurosurgery, we believe great care starts with great people. That's why we continue to grow our team with intention—bringing in exceptional talent that enhances every aspect of our practice.

We're thrilled to welcome Dr. Tom Nayar, a fellowship-trained neurosurgeon with specialized expertise in minimally invasive and complex spine surgery, robotic-assisted procedures, and brain tumor care. With training from Duke University and the University of Pittsburgh Medical Center, Dr. Nayar adds both depth and innovation to our trusted team.

Together, we're shaping the future of neurosurgery—right here in Oregon.

Learn more at oregonneurosurgery.com

3377 RiverBend Drive, 5th Floor
Springfield, OR 97477
541.222.8400 / 800.924.8353



MEDICAL MATTERS

Lane County Medical Society

PO Box 7192
Springfield, OR 97475

Change Service Requested



August 2025

PRSRT STD
US POSTAGE
PAID
EUGENE, OR
Permit No. 17

Fly local fly **EUG**[®] .com

The Eugene Airport is a proud part of what makes Western Oregon such a unique place to live and visit, with nonstop routes and connections to hundreds of destinations.

