

Michele Cyr, M.D., '79: Sticking to it

By Rosemary Lunardini

Michele Cyr became a doctor on a dare. She'd long had an interest in math and science, but she'd eschewed the premed path at Bowdoin College in Maine to avoid the craziness over grades that seemed to plague many premeds.

Then, during her senior year, she was issued a challenge. "One of my professors—a woman who ended up being one of my life-long mentors—said the reason I didn't want to go into medicine is that I was too affiliative, not competitive enough," Cyr recalled last fall while speaking at a Dartmouth symposium on women in science and medicine. "So I thought I'd show her."

Cyr's talk at Dartmouth came just a few days before Halloween, which was appropriate given the scary things she shared with her audience about women in science and medicine. Although women make up about half of the medical student body nationwide, they are underrepresented in academic and leadership positions. Today, Cyr noted, only 30% of associate professorships and 18% of full professorships at U.S. medical schools are held by women.

"We should start to see women being half the professors, department chairs, and deans," Cyr said. But, she went on, the number of women in those positions hasn't kept up with the increase in female medical students.

Although deanships are hard to come by for women, Cyr has been very successful in that regard. In 1997, she became associate dean for graduate medical education at Brown Medical School. In 2003, she added the title of associate dean for women in medicine, and two years later she merged those two titles—along with a host of new responsibilities—under her current title of associate dean for academic affairs in Brown University's Division of Biology and Medicine.

Cyr has been a pioneer before. In high school, she played the sports then available to women—field hockey, softball, and volleyball. Then, in 1972, federal legislation known as Title IX banned discrimination in educational programs on the basis of sex. Cyr, who was a senior when the law was passed, asked her school about starting a girls' track team. "They said 'no,' so I went out for the boys' track team," she recalls. The team tryouts were led by an ex-Marine, and they were grueling. "But I was determined to continue," she says. "I made it,

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Grew up: North Scituate, R.I.

Education: Bowdoin College '76 (A.B. magna cum laude in art and biochemistry), DMS '79 (M.D.)

Training: Maine Medical Center, Portland, Maine

Family: Husband Gregory Towne, DMS '79, and son Ben, a student at Bowdoin College

Recent art project: Painting a diamond design on the floor of an addition to their 19th-century house

Latest book: *The New Truth About Menopause: Straight Talk About Treatments and Choices from Two Leading Women Doctors*, written with Carol Landau, Ph.D. (2003)

When her high school said no to a girls' track team, Cyr made it through grueling tryouts for the boys' team.

[but] not without a lot of stick-to-itiveness."

After high school she headed for Bowdoin, which had recently become coeducational. "There were only a handful of women students," Cyr recalls. But thanks to having run with the boys in high school, "I was pretty comfortable being in a male-dominated place," she says.

Cyr's interest in science led her to major in biochemistry, but she also pursued her love of art, eventually choosing to complete a second major in a hybrid of art history and studio art. During her senior year, her advisor asked her to illustrate a microbiology textbook he was writing—an experience that helped Cyr make an important decision. "At one time, I thought maybe I could blend these two interests—my art and my science—and be a medical illustrator," she says. "But, quite frankly, the experience taught me I didn't want to do art for my job. I wanted it to be my avocation, not my profession."

As she hoped, Cyr has been able to carve out a special place in her life for art. But it remains an avocation. "We're blessed in Providence to have the Rhode Island School of Design and a fabulous museum," she says. "I did a decorative painting course for a semester several years ago, and so that is a hobby now." She has also taken courses in paper marbling, culinary art, and nature painting on fabric.

For her vocation, Cyr settled on medicine after the challenge issued by her mentor. She soon found herself at Dartmouth Medical School, which at the time had a three-year, year-round M.D. program. "DMS felt very similar to Bowdoin," she recalls. "But three years was tough. I think we were very well educated, but I didn't feel particularly ready for residency because I hadn't had four years of medical school."

In class during one of her first few days at Dartmouth, she sat next to her future husband, Gregory Towne. After they graduated from DMS in 1979, their residencies in internal medicine sent them in different directions—Towne to Rhode Island and Cyr to Maine—but they married when they completed that step of their training. After another period of separation, while Towne did a residency in anesthesiology in Connecticut and a fellowship in New York City, the two rejoined in Rhode Island, where Cyr was already working at the Brown-affiliated Rhode Island Hospital. In 1989, they had a son, Ben.

At Rhode Island Hospital, Cyr was in charge of inpatient and consultation services for general internal medicine. She soon became an authority on women's health issues, including alcoholism and menopause. In 1994, she cowrote her first book, *The Complete Book of Menopause*, with two other Brown faculty members—Carol Landau, Ph.D., a professor of psychiatry, and Anne Moulton, M.D., an associate professor of medicine.

At about the same time, Cyr became coprincipal investigator of the largest of 40 clinical centers nationwide funded through the Women's Health Initiative (WHI). A major goal of the WHI—a multicenter, randomized trial of the risks and benefits of hormone replacement therapy after menopause—was to evaluate the effectiveness of giving postmenopausal women estrogen and progesterin. But in 2002, the trial was stopped early after results showed that the therapy's risks outweighed its benefits.

"We used to think that estrogen was preventive for heart disease in women, and the WHI undeniably proved that that is not true," Cyr says. "We know that it can prevent osteoporosis, but . . . the real issue is what are the benefits versus the risks," she says. One of the biggest risks of the therapy, she adds, is that it increases the risk of breast cancer, as the trial eventually showed.

The results startled many people when they were released. It was a major challenge, Cyr says, for the investigators to prepare to talk to the media about the findings. At the same time, she was dealing with a very personal challenge: she had recently been diagnosed with breast cancer and begun chemotherapy to treat it. "I was totally bald by the time the WHI results came out," she says. "It became somewhat of a joke among us as we were trying to think of who would be the spokesperson. . . . Being involved in WHI and having breast cancer was a pretty bizarre juxtaposition of the personal and the professional."

In the end, Cyr—who had not taken hormone therapy herself—decided not to be a media spokesperson.

But soon another challenge emerged, one she didn't yet feel up to dealing with. That was her book on menopause. The WHI results had put a new light on everything about prevention in the book. "We have to write another book," Cyr recalls her coauthor Carol Landau telling her. "Everything's changed. We have to."

Cyr was not so sure at first but eventually agreed with Landau.



Women's issues interest Cyr both clinically and educationally. She is the author of two books about menopause and an advocate for mentoring women in medicine.

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"That was the genesis of *The New Truth About Menopause*, the second book we wrote," she says. "We tried to give women the tools to really make decisions about menopause, given that the literature may change" yet again. For example, before the results of the WHI were released, hormone replacement therapy had been the standard treatment for symptoms of menopause.

Today, Cyr advises women to try other ways of treating these symptoms before using hormone replacement therapy. But, she says, "if symptoms are very severe, I think it's reasonable for a woman to use a shorter course of hormone therapy."

While developing her knowledge of women's health issues, Cyr also became interested in issues facing women who, like her, chose a career in medicine. That's what led to her appearance at DMS last fall. "I was completely impressed with the [students] who arranged that program," she says. "They were incredibly tuned in to the issues, approaching their career decisions with much more knowledge than I ever had. Women need to be more cognizant, more proactive."

In her talk at Dartmouth, Cyr warned that although many women are now deciding to go into medicine, the pipeline to career advancement seems to be leaking. It may be a result of the choices women make, she said, or it may be a result of rules that do not accommodate women very well. She believes that institutions must do more in that regard, and she sees some improvements, such as longer probationary periods for young faculty.

Cyr also believes that women can do more to steer their own careers. "The best advice I could give a woman starting her career in medicine or science is to find a mentor," she told the audience. "Not necessarily one mentor, but a panel of mentors—for science, for life and how to balance it, and for negotiation. Women can't be shy about going out and finding people more advanced in their careers who can help them . . . who actually open doors to the right people, committees, and networks."

"How will we know we've arrived?" Cyr asked her listeners. When there is no such thing as "a women's issue," she said. When there is also an old girls' club—or no club at all. When there is no need for special offices to support women. But until that day, just as she did while running track in high school, Cyr will be sticking to it. ■