Beth Israel Deaconess Medical Center



HARVARD MEDICAL SCHOOL TEACHING HOSPITAL News from the Roberta and Stephen R. Weiner Department of Surgery at Beth Israel Deaconess Medical Center

INSIDE SURGERY

EARLY PROSTATE CANCER: To Treat or Not to Treat?

PASS Trial Seeks Answers

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A s I write this message, we are in the throes of dealing with the coronavirus pandemic. Each day presents a new set of challenges, from obtaining adequate personal protective equipment or arranging for sufficient criticalcare beds for the anticipated influx of COVID-19 patients to maximizing the use of telemedicine technology so that we can continue to take care of all patients and sustain our teaching mission during these extraordinary times.

Yet despite the uncertainty, long days, and concerns about their own and their loved ones' well-being, the members of the Department of Surgery have risen to these and countless other challenges with courage, determination, ingenuity, and resolve.

I witnessed this same spirit during the Boston Marathon bombings, when we were also challenged in unanticipated ways. Now, as then, the women and men in the Department of Surgery have never wavered, putting aside their own needs to save lives, reduce suffering, and rapidly find innovative solutions to unprecedented problems.

Unwavering perseverance in the face of daunting circumstances is nothing new in our department. Consider these words by the illustrious surgeon Dr. David Williams Cheever (1831-1915), who led the Fifth (Harvard) Surgical Service—the predecessor of our General Surgery Residency Program—during the Civil War.

"...We struggled bravely to fight sepsis amid the terrible discouragement of those surgical days so full of mortality. Amputation, when primary, often gave a mortality of 50 percent. In abdominal operations, more died than recovered. Much debility and poor blood were brought to our hospital by the returning Union Army; chronic diarrhea, malaria, old suppurating wounds. This influence lasted for years. But we never wavered in our daily visits and honest efforts..."

By the time you receive this issue of *Inside Surgery*, the current situation will certainly have changed—if we are fortunate, for the better—so that even as we will mourn for lives lost to this scourge we can begin to return to our normal lives. Until then, like those who came before us, we will never waver in our efforts to fulfill our mission to provide care of the very highest quality and improve health through innovation and discovery.

Enio Chainot

Elliot Chaikof, MD, PhD #NeverWaver

Beth Israel Deaconess Medical Center



HARVARD MEDICAL SCHOOL TEACHING HOSPITAL

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The mission of the Department of Surgery:

- Provide care of the very highest quality
- Improve health through innovation and discovery
- Prepare future leaders in American surgery
- Serve our communities with sensitivity and compassion

Surgery Chair

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bidmc.org/surgery

PLEASE NOTE: All group photos in this issue were taken prior to the social-distancing policies put in place due to the coronavirus pandemic.



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PROMOTED TO: ASSOCIATE PROFESSOR OF SURGERY



Dhruv Singhal, MD

Dr. Singhal, a member of the Division of Plastic and Reconstructive Surgery, is the founder and Director of the BIDMC Lymphatic Center, the only comprehensive referral center for lymphedema in New England. He joined the Department of Surgery in 2016.

A graduate of the University of Pittsburgh School of Medicine, Dr. Singhal completed his general surgery residency at Brigham and Women's Hospital and his plastic surgery residency in the combined Harvard Plastic Surgery Program. He completed a fellowship in craniofacial surgery at Chang Gung Memorial Hospital and a fellowship in microsurgery at China Medical University Hospital, both in Taiwan. Prior to joining BIDMC, Dr. Singhal practiced at UF Health Shands Hospital in Gainesville, Florida, and was Director of Microsurgery and Director of Adult Craniofacial Surgery at the University of Florida School of Medicine.

Dr. Singhal is a pioneer in preventive lymphovenous bypass surgery at the time of axillary node dissection for breast cancer patients at high risk of lymphedema. He also performs vascularized lymph node transfer for the treatment of patients with chronic lymphedema. Considered one of the world's leading experts in lymphedema prevention and treatment, Dr. Singhal is frequently invited to present his work at major conferences nationally and internationally.

Dr. Singhal's research, which is supported by multiple grants, involves refining his group's animal model to further investigate the physiology of surgical lymphedema prevention at the time of axillary node dissection. In addition, he maintains a tissue bank and a large patient database for research aimed at improving the care of patients with lymphedema.

An enthusiastic teacher of trainees at all levels, Dr. Singhal also serves as the Chair of the Program Committee for the Lymphatic Symposium hosted by the BIDMC Lymphatic Center, an annual educational event he launched in 2017 that attracts hundreds of health care professionals and patients from around the world (see <u>page 13</u> for information about the next symposium in early 2021).

Dr. Singhal is an ad hoc reviewer for *Plastic and Reconstructive Surgery, PRS Global Open, Annals of Plastic Surgery,* and *Journal of Reconstructive Microsurgery,* and serves on the editorial board of the *International Microsurgery Journal.* He has had more than 70 papers published, including more than 60 in peer-reviewed journals.

PROMOTED TO: ASSISTANT PROFESSOR OF SURGERY



David Liu, MD

Dr. Liu is a staff physician in the Division of Cardiac Surgery, Surgical Director of the BIDMC Heart Failure Service, and Associate Program Director of the Cardiothoracic Surgery Fellowship. Dr. Liu was a clinical associate in the Division of Cardiac Surgery at BIDMC from 2006 to 2007, and

following two years as an attending cardiac surgeon at Saint Vincent Hospital in Worcester, Mass., was recruited back to the BIDMC Department of Surgery in 2009.

Dr. Liu earned his medical degree from Tufts University School of Medicine and completed his residency in general surgery at the Medical College of Ohio. During his residency, he completed a two-year research fellowship in thoracic surgery at Memorial Sloan Kettering Cancer Center in New York City. Following his residency, Dr. Liu completed a fellowship in cardiothoracic surgery at Tufts Medical Center.

A Fellow of the American College of Surgeons, Dr. Liu's clinical interests are minimally invasive cardiac surgery, coronary artery bypass surgery, valve repair and replacement, complex aortic surgery, ventricular assist devices, heart failure, and transcatheter valves. In collaboration with BIDMC colleagues from Anesthesia, Cardiology, and Vascular Surgery, Dr. Liu is involved in several national clinical trials, most of which pertain to the treatment of valvular disorders via percutaneous routes.

Dr. Liu is a committed teacher and mentor to trainees at all levels. In 2017, he was selected by BIDMC's General Surgery residents to receive the John L. Rowbotham Award for Excellence in Teaching.

New Faculty

For more information about our new faculty, including their clinical and research interests, please visit the "Find-A-Doctor" section on the BIDMC website.



Ryan Cauley, MD, MPH

Division: Plastic and Reconstructive Surgery Medical School: Weill Cornell Medicine

MPH: Harvard T. H. Chan School of Public Health

Residency: General Surgery, Brigham and Women's Hospital; Plastic Surgery, Harvard Combined Plastic Surgery Residency Program

Clinical Fellowships: Acute Burn Surgery and Reconstruction, Massachusetts General Hospital; Surgical Critical Care, Brigham and Women's Hospital; Microsurgery, Beth Israel **Deaconess Medical Center**

Phone: 617-632-7827



Fayez Kheir, MD, MSc

Division: Thoracic Surgery and Interventional Pulmonology

Medical School: University of Balamand, Lebanon

Residency: Internal Medicine, Rosalind Franklin University of Medicine and Science

Clinical Fellowships: Pulmonary and Critical Care Medicine, Tulane University; Interventional Pulmonology, Beth Israel Deaconess Medical Center/ Massachusetts General Hospital

Phone: 617-632-8252



Salima Hassanaly, MD

Division: Ophthalmology Medical School: University of Montreal

Residency: Ophthalmology, University of Montreal

Clinical Fellowships: Cornea and External Diseases, Illinois Eye and Ear Infirmary; Refractive Cornea and Cataract Surgery, Boston Laser/Boston Eye Group

Phone: 617-667-3391





Division: Urologic Surgery Medical School/PhD: Washington University School of Medicine Residency: Urology, Harvard Program in Urology (Longwood Area)

Clinical Fellowship: Urologic Oncology, Memorial Sloan Kettering Cancer Center Phone: 617-667-3739

Lars Stangenberg, MD, PhD

Division: Vascular and Endovascular Surgery

Medical School/PhD: Albert Ludwig University of Freiburg, Germany

Residency: General Surgery, Massachusetts General Hospital

Clinical Fellowship: Vascular and Endovascular Surgery, Beth Israel Deaconess Medical Center

Phone: 617-632-9959

Facing Intractable Facial Pain

Neuromodulation Can Provide Much-Needed Relief



Neurosurgeon Jeffrey Arle, MD, PhD (left), is one of the world's leading experts in neuromodulation.

or nearly 30 years, Carol Mannila, a former registered nurse from central Massachusetts, suffered from unrelenting, stabbing pain behind her left eye. "The pain was 24/7 and excruciating," she says.

Ms. Mannila was suffering from a type of trigeminal neuralgia (TN), an oftendisabling condition that can be caused by trauma, surgery, or infection. The condition is often misdiagnosed and may be difficult to treat with conventional methods, which include medications, nerve blocks, and radiosurgery. Characterized by persistent, severe, burning or aching pain, rather than brief episodes of pain, this type of TN often gets worse with time.

Like many other TN sufferers, Ms. Mannila was in nearly constant pain, went to dozens of doctors over the years, and tried virtually every available treatment, none of which provided significant, lasting relief. The pain become so intense she had to quit her job. Her longtime specialist, unable to provide any further options, referred her to BIDMC neurosurgeon **Jeffrey Arle, MD, PhD**, one of the world's leading experts in neuromodulation.

Blocking pain signals

Dr. Arle is one of a small number of surgeons in the nation to offer neuromodulation for patients with intractable conditions that cause chronic, severe facial pain. For years, neuromodulation has been used to treat severe back, leg, neck, and arm pain. In the case of facial pain, the treatment entails electrically stimulating the peripheral branches of the

Continued on page 28 >

ALUMNI SPOTLIGHT

Yue-Yung Hu, MD, MPH, 2015

Pediatric Surgeon, Ann & Robert H. Lurie Children's Hospital of Chicago Assistant Professor of Surgery, Northwestern University Feinberg School of Medicine

Growing up, Yue-Yung Hu assumed she would follow in the footsteps of her parents, PhDs in immunology and analytical chemistry. But after working in wet labs during high school, college, and later, she realized bench research was not for her.

She discovered public health—which merged science with another of her interests, service—and began working with a primary-care pediatrician on post-9/11 mental health issues. Inspired, she decided to become a pediatrician and attended SUNY Stony Brook School of Medicine. But during her clinical rotations, Dr. Hu discovered a new passion: surgery.

During her residency in BIDMC's General Surgery Residency Program, Dr. Hu earned a master's degree in clinical effectiveness from the Harvard T. H. Chan School of Public Health and spent three years as a research fellow at Brigham and Women's Hospital with Caprice Greenberg, MD, MPH. She was referred to Dr. Greenberg by her advisor **Sidhu Gangadharan**, **MD**, **MHCM**, Chief of Thoracic Surgery and Interventional Pulmonology. "Dr. Gangadharan's suggestion impacted my career," says Dr. Hu, adding that "the BIDMC residency offered a very supportive environment, which I still draw on today."

In Dr. Greenberg's lab, Dr. Hu used intraoperative video to study quality and safety. "Dr. Greenberg was an inspiring mentor who supported me to have my own research interests," she says. When Dr. Hu returned to her clinical residency, she was drawn to pediatric surgery. "It took me a few wrong turns to find my calling, but I eventually got it right," she says.

After completing her pediatric surgery fellowship at Connecticut Children's in 2017, Dr. Hu was recruited to the Ann & Robert H. Lurie Children's Hospital of Chicago, where she provides general pediatric surgical care and conducts health services research with a focus on surgical education. She



is also Associate Director of the General Surgery Residency Program.

FIRST trial

When Dr. Hu joined Northwestern, the FIRST (Flexibility In duty-hour Requirements for Surgical Trainees) trial, which changed residents' duty-hour policy, was concluding. What the follow-up data revealed was alarming: 39% of U.S. general surgery residents experience symptoms of burnout weekly, and many aspects of the learning environment—not just duty hours—contribute to poor well-being. More than 7,400 residents, or 99.3% of those surveyed, from all ACGME-accredited residency programs across the U.S. had participated in the study.

Dr. Hu was co-first author of a paper published in October 2019 in the <u>New England Journal of</u> <u>Medicine</u> (N Eng J Med 381;18), demonstrating that mistreatment (discrimination, verbal or physical abuse, and sexual harassment) occurs frequently among general surgery residents, especially women, and is associated with burnout and suicidal thoughts (see graphic). After controlling for this mistreatment, the previously reported gender disparities in these wellness outcomes became insignificant, notes Dr. Hu.

SECOND trial

As the FIRST trial results made clear, more must done to improve residents' well-being. To help achieve that goal, the SECOND (Surgical Education Culture Optimization through targeted interventions based on National comparative Data) trial was launched, with Dr. Hu and Karl Bilimoria, MD, MS, also of Northwestern University, as co-principal investigators.

In the SECOND trial, participating residency programs are randomized to a control arm vs. an intervention arm. All programs are given a confidential report of their residents' well-being data compared to other programs in the U.S., as well as suicidality interventions. Programs in the intervention arm (which includes BIDMC's) receive access to a Wellness Toolkit that offers a wealth of programmatic ideas and initiatives, as well as implementation support. After the conclusion of the study, programs in the control arm will have access to all available resources.

"Residency programs need data about their performance so they can focus their efforts to improve trainees' well-being," says Dr. Hu, emphasizing that some programs have very low rates of mistreatment. "They also need access to readily available strategies to make improvements so no one has to reinvent the wheel."

Under the leadership of Dr. Hu and her colleagues in the SECOND trial, those needs will be addressed and steps taken to ensure that all surgery residents are training in an environment that fosters their well-being so they can learn, thrive, and reach their full potential.

Discrimination, Abuse, Harassment, & Burnout in Surgical Residency Training





Hu* and Ellis*, Hewitt, Yang, Cheung, Moskowitz, Potts, Buyske, Hoyt, Nasca, & Bilimoria. *NEJM* October 31, 2019 (*co-first authors)



The NEW ENGLAND JOURNAL of MEDICINE

Hispanic Breast Cancer Program Meeting the Unique Needs of Hispanic Patients

Receiving a diagnosis of breast cancer is difficult for any woman. But if a language barrier makes it impossible for a patient to fully understand her diagnosis, treatment options, and next steps, the news is all the more upsetting. Further, it can contribute to a poor outcome. Unfortunately this is all-too-frequently the predicament of Hispanic women, particularly those who are not native English speakers.

In addition to a language barrier, it is well-documented that other socioeconomic and cultural factors—so-called social determinants of care can compromise the care and outcomes of minorities, including Hispanic women. Indeed, multiple studies show that Hispanic women with breast cancer are more likely to be diagnosed at a more advanced stage and, consequently, more likely to die from their disease than non-Hispanic women of the same age and stage of cancer.

Culturally appropriate

Through the creation of BIDMC's Hispanic Breast Cancer Program **Monica G. Valero, MD**, is determined to change this. Dr. Valero launched the program in October 2019, shortly after she joined the Division of Surgical Oncology in the Department of Surgery.

A native of Venezuela, Dr. Valero attended medical school in Caracas with the goal of becoming a breast surgeon. She came to the United States 10 years ago for her postgraduate training, which included a residency in general surgery and a fellowship



Monica Valero, MD (seated), shown here with Susan McCauley, RN, launched the new Hispanic Breast Cancer Program.

in surgical critical care at Brigham and Women's Hospital/Dana-Farber Cancer Institute and a clinical fellowship in breast surgical oncology at Memorial Sloan Kettering Cancer Center.

Her years in Boston taught Dr. Valero that while the region has an abundance of highly qualified breast surgeons, the unique needs of Hispanic women were not being adequately met. She recalls numerous instances during her training where she had to step in to explain in Spanish about the nuances of treatment to Hispanic patients, who were either too uncomfortable or shy to ask for an interpreter. "I felt that with my background and interests I should be the one to lead a program that will provide Hispanic women with an inclusive, culturally appropriate environment and take steps to begin to address health disparities in this population," says Dr. Valero.

The program received wholehearted support from **Ted James, MD, MS**, Chief of Breast Surgical Oncology. "No one is more qualified to lead this program or more committed to serving the needs of Hispanic women than Dr. Valero," says Dr. James. "The entire multidisciplinary BreastCare Center team is excited to be part of this program, which is designed to address the inequities in breast care for these patients." Dr. James points out that the BreastCare Center already cares for a significant number of Hispanic patients, but welcomes and expects more to seek care at BIDMC as a result of this program.

The Hispanic Breast Cancer Program aims to fulfill its mission in multiple ways: through tailored clinical services, research, education, and community outreach. In addition to Dr. Valero and fellow breast surgeons Mary Jane Houlihan, MD, Betty Fan, DO, Alessandra Mele, MD, and Dr. James, the program includes dedicated interpreters, nurses and nurse practitioners, social workers, patient navigators, and administrative staff. All are committed to providing an inclusive, culturally appropriate environment for Hispanic patients and addressing their specific needs. Several, including Dr. Valero and her administrative assistant, speak fluent Spanish.

Patient navigators

Patient navigators are an essential component of the program, says Dr. Valero. "Breast cancer treatment today involves multidisciplinary treatment—surgery, radiation therapy, and chemotherapy or hormone therapy. Our patient navigators help guide patients through the system to ensure that they receive the care they need at the appropriate times."

Patient navigators, all of whom are registered nurses, are the patient's go-to person for any and all needs, including not only treatment-related matters but also issues that might affect their ability to receive care, such as transportation, access to social workers, and help managing issues at home or work. The program currently has three patient navigators and plans to hire a fourth who speaks fluent Spanish.

Research to reduce disparities

Another priority of the Hispanic Breast Cancer Program is to conduct research aimed, in part, at identifying disparities in care, finding and evaluating ways to reduce or eliminate them, and disseminating findings to clinicians and researchers.

Critical to this effort is increasing Hispanic patients' participation in clinical trials, a high priority among the program's team. Another priority is to build impact of delays in the advent of adjuvant chemotherapy among Hispanic patients.

Education and community outreach

Many Hispanic women are diagnosed with breast cancer at later stages, when treatment may be less effective, largely because they are not being screened for the disease. "We need to educate Hispanic women about the importance of screening mammography," says Dr. Valero. To accomplish this, the program will offer educational events about prevention and early detection during Breast Cancer Awareness Month. In addition, the program will establish ongoing breast cancer survivor support groups. Over the coming year, Dr. Valero and other members of the team

"Reducing health disparities among Hispanic women and other minorities is an enormous undertaking that requires many resources. With our new program, we are taking meaningful steps toward that important goal."

- Monica Valero, MD

an important research tool: a database that will include information specific to Hispanic patients. Another future research project will assess the costs and benefits of cancer screening and patient navigation services for Hispanic Medicare recipients.

The program's research is already gaining widespread interest among the medical community. For example, Dr. Valero was selected to present at the upcoming Society of Surgical Oncology annual meeting on her and her team's research, which identified and described the will visit BIDMC sites to share information about the program and educate women in their local communities.

"Reducing health disparities among Hispanic women and other minorities is an enormous undertaking that requires many resources," says Dr. Valero. "With our new program, we are taking meaningful steps toward that important goal."

 To schedule an appointment or make a referral, call: 617-667-2900

Colon and Rectal Surgery

Working Together to Improve Lives



Evangelos Messaris, MD, PhD, Chief of the Division of Colon and Rectal Surgery (right), leads a team that includes three fellowship-trained colon and rectal surgeons with a fourth to join the group later this year.

Patients newly diagnosed with colorectal cancer have enough to deal with without worrying about how long it will take to get timely appointments with the specialists who will treat their disease—which invariably includes a colorectal surgeon, a medical oncologist, and a radiation oncologist—and wondering whether everyone involved is communicating with one another. Cancer patients who are treated in the BIDMC Division of Colon and Rectal Surgery can cross those concerns off their list.

They are given an appointment within seven days and meet with their entire multidisciplinary team of specialists in the same room. Following the completion of necessary tests, everyone involved in the patient's care, including a pathologist and radiologist specializing in colorectal cancer, meets in a weekly Tumor Board to develop each patient's treatment plan. Within 48 hours of being seen, the patient receives a written care plan and the services of an experienced patient navigator, Jeanne Quinn, NP, who helps facilitate treatments, answers questions, and serves as a goto person for any and all issues relating to the patient's care. This efficient and effective approach to patient care is no accident. When **Evangelos Messaris, MD, PhD**, Chief of the Division of Colon and Rectal Surgery, joined BIDMC in 2018, improving access was one of his highest priorities. "All members of our team share a common goal—to provide the best possible care for each of our patients—and rapid access is an important part of that," he says. Patients with acute conditions are seen within 24 hours and those with benign conditions state-of-the-art surgical treatments, for patients with virtually all conditions affecting the colon and rectum:

- *Cancer:* colon cancer, rectal cancer
- Inflammatory Bowel Disease: Crohn's disease, ulcerative colitis, indeterminant colitis
- Benign Diseases: fecal incontinence, pelvic floor disorders, diverticulitis, anorectal diseases (fistulas, anal fissures, hemorrhoids), rectal prolapse, polyps of the colon and rectum.

"All members of our team share a common goal to provide the best possible care for each of our patients—and the rapid access we offer is an important part of that."

- Evangelos Messaris, MD, PhD

within 15 days—times that will likely decrease still further with the addition of colorectal surgeon **Anne Fabrizio, MD**, who joined the group in October 2019.

In addition to three fellowshiptrained colorectal surgeons, the division includes five advanced practice providers, including two outpatient nurse practitioners (Kristin Messer, NP, and Jeanne Quinn, NP), two inpatient nurse practitioners (Heather Pleskow, NP, and Julie Rocke, NP), and certified ostomy care nurse Daniel Lonergan, RN. The group's administrative leaders are Kristen Skiles and Rozlyn Edwards (See "Our Team," page 13).

The division provides comprehensive care, including

Approximately 80 percent of patients, who come from throughout New England, are treated for cancer or inflammatory bowel disease. In part due to its reputation for providing high-quality care (BIDMC was designated as "high performing" the highest possible ranking—in colon cancer surgery by U.S. News & World Report in 2019), the division is experiencing rapid growth.

Last year, Dr. Messaris and his colleagues performed more than 500 major colorectal resections and recorded more than 1,200 visits to the division's two clinical sites in Boston (the BIDMC main campus and Harvard Vanguard Medical Associates/Kenmore), BID-Milton, and BID-Needhamand these numbers are expected to increase. To meet the growing demand for its services, the division has recruited another fellowshiptrained colorectal surgeon, **Kristen Crowell, MD**, who is completing her training at Cleveland Clinic in Ohio and will join BIDMC later this year.

Latest surgical options

One of the division's major strengths is its Rectal Cancer Program, which in addition to comprehensive, well-coordinated care, offers the latest surgical options. For patients with distal rectal cancer, this includes transanal total mesorectal excision (TaTME), an advanced procedure offered at only a few medical centers in the region. Performed via the anus, TaTME offers the ability to remove a distal rectal cancer with appropriate margins and reduces the chance that the patient will require a permanent ostomy. Patients with cancer or who require surgery for IBD or diverticulitis may be candidates for single-port laparoscopic surgery, which requires only a single small incision in the navel and is virtually scarless.

The division puts a high priority on maintaining the highest quality of care to ensure the best possible outcomes. One example of this commitment to quality is the division's Enhanced Recovery after Surgery Pathway, which provides evidence-based guidelines for post-operative care on everything from diet and pain management to IV fluids.

"As a result of this pathway based on billing data, we have

the shortest length of stay for colorectal resections of any large hospital in Massachusetts," says Dr. Messaris. He emphasizes that this would not be possible without the pre-operative education provided by Mr. Lonergan and the BIDMC ostomy nurses; the perioperative care provided by the Stoneman-5 team led by Nursing Director for Inpatient Surgery Scott Rollins, MSN, RN; and the division's inpatient nurse practitioners, Ms. Pleskow and Ms. Rocke.

Teaching and training

In 2018, the division launched a one-year ACGME-accredited Colon and Rectal Surgery Fellowship Program, led by Program Director **Thomas Cataldo, MD**, with external collaborators Mandeep Saund, MD, of Atrius Health, and Dana Fugelso, with BIDMC gastroenterology (GI) faculty, who also expose the trainees to GI motility and pelvic floor evaluation as well as interventional GI procedures. Fellows also participate in research projects and develop and complete a quality-improvement project.

Faculty also train Harvard Medical School (HMS) clerkship students, participate in the subinternship program, and teach and train BIDMC General Surgery residents through didactics, bedside and OR teaching, and the HMS Surgical Anatomy Program.

Research

Another priority of the division is research, and all faculty are engaged in outcomes research. One area of focus is the development of clinical pathways

One of the division's major strengths is its Rectal Cancer Program, which in addition to comprehensive, well-coordinated care, offers the latest surgical options, including transanal total mesorectal excision for patients with distal rectal cancer.

MD, MPH, in private practice. The first trainee, **Kristina Go, MD**, will graduate this August. The second fellow is **Jeremy Dressler, MD**, from Brown University.

Fellows participate in all aspects of colon and rectal surgery practice, including outpatient clinics, the Rectal Cancer Clinic, inpatient and outpatient surgeries, endoscopy, and inpatient patient care. In addition, fellows perform colonoscopies in collaboration and other systems initiatives for optimal patient care using data from the division and the National Surgical Quality Improvement Program (NSQIP). The focus of other ongoing projects includes outcomes in rescue therapy for ulcerative colitis and the impact of ethnicity on patient outcomes, to cite just a few.

The division also participates in several multi-center, national clinical trials, and Dr. Messaris recently received a \$100,000 grant from the Crohn's and Colitis Foundation to support research aimed at predicting IBD patients' response to medications that could lead to early surgery. The division's research is presented nationally and internationally and published widely in top journals, including the highest ranked journal in the specialty, *Diseases of the Colon and Rectum*, which includes Dr. Messaris on its editorial board.

Giving back

In addition to caring for patients, members of the division are committed to helping those outside the medical center. Last year they participated in the Colon Cancer Coalition's "Get Your Rear in Gear" fundraising 5K walk, raising more than \$1,600 for the organizationand plan to do so again this year. In addition, via Camp Harbor View, the entire division "adopts" a family in need for a year, donating essential items as well as nonessential but important gifts that brighten their lives. Ms. Edwards and Ms. Messer also proudly serve in the U.S. Air Force and will be deployed for much of 2020.

Dr. Messaris is justifiably proud of his team and their shared accomplishments, attributing the division's growth and excellent reputation to teamwork and common goals. "We work together to provide the highest quality care to our patients, train the next generation of colorectal surgeons, conduct research that will help improve our understanding and treatments of colorectal conditions, and strive to help others in the broader community of which we are a part," he says.

Our Team

Surgeons





Evangelos Messaris, MD, PhD *Chief*

Thomas E. Cataldo, MD



Anne C. Fabrizio, MD

Advanced Practice Providers

Daniel Lonergan, RN Kristin Messer, NP Heather Pleskow, NP Jeanne Quinn, NP Julie Rocke, NP

Administrative Leadership

Kristen Skiles Administrative Director

Rozlyn Edwards Administrative Supervisor

To schedule an appointment or make a referral,

call: 617-667-4159

UPCOMING EVENTS

GlycoT 2020: 12th International Symposium on Glycosyltransferases

This year's symposium will be hosted virtually on June 21-23.

Organizers and Chairs: **Richard D. Cummings, PhD**, BIDMC; Michael Pierce, PhD, University of Georgia

To register/for more information: <u>glycot2020.com</u>

4th Annual Lymphatic Symposium (Clinical Symposium)

This year's symposium, originally scheduled for November 13-14, was postponed to early 2021. When available, new dates will be posted at: harvardlymphaticsurgery.org.

Hosted by the Lymphatic Center at BIDMC (Director, **Dhruv Singhal, MD**), in partnership with the Lymphatic Education and Research Network

To register/for more information: harvardlymphaticsurgery.org

4th Annual Lymphatic Symposium (Patient Symposium)

This year's symposium, originally scheduled for November 14, was postponed to early 2021. When available, new dates will be posted at: harvardlymphaticsurgery.org.

Hosted by the Lymphatic Center at BIDMC (Director, **Dhruv Singhal, MD**), in partnership with the Lymphatic Education and Research Network

To register/for more information: harvardlymphaticsurgery.org

PLEASE NOTE: All dates in this issue are subject to change based on the status of the coronavirus pandemic. **Selected Publications**

Acute Care Surgery, Trauma, and Surgical Critical Care

Itagaki K, Kaczmarek E, Kwon WY, Chen L, Vlková B, Zhang Q, Riça I, Yaffe MB, Campbell Y, Marusich MF, Wang JM, Gong WH, Gao JL, Jung F, Douglas G, Otterbein LE, Hauser CJ. Formyl peptide receptor-1 blockade prevents receptor regulation by mitochondrial dangerassociated molecular patterns and preserves neutrophil function after trauma. Crit Care Med 2019; in press.

Kondo Y, Ledderose C, Slubowski CJ, Fakhari M, Sumi Y, Sueyoshi K, Bezler AK, Aytan D, Arbab M, **Junger WG**. Frontline Science: *Escherichia coli* use LPS as decoy to impair neutrophil chemotaxis and defeat antimicrobial host defense. J Leukoc Biol 2019; in press.

Kondo Y, Sueyoshi K, Zhang J, Bao Y, Li X, Fakhari M, Slubowski CJ, Bahrami S, Ledderose C, **Junger WG**. Adenosine 5'-monophosphate protects from hypoxia by lowering mitochondrial metabolism and oxygen demand. Shock 2019; in press.

Otterbein LE. Conquering radicals with a sense of humor. Cell Chem Biol 2019;26(10):1335–37.

Patterson JC, Joughin BA, Prota AE, Mühlethaler T, Jonas OH, Whitman MA, Varmeh S, Chen S, Balk SP, Steinmetz MO, Lauffenburger DA, **Yaffe MB**. VISAGE reveals a targetable mitotic spindle vulnerability in cancer cells. Cell Syst 2019;9(1):74–92.

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Cardiac Surgery

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Andrew Wagner, MD, is the BIDMC-site principal investigator of the PASS trial and Director of Minimally Invasive Urologic Surgery.

PASS Aims to Improve Management of Prostate Cancer

When diagnosed with earlystage prostate cancer, a patient has to cope with more than just the fear that such a diagnosis invariably instills. He also must make a decision that could alter the course of his life.

Should he undergo surgical or radiation treatment, both of which can negatively impact urinary and sexual health? Or instead opt for active surveillance, which involves being closely monitored for signs that his cancer is becoming more aggressive and should be treated?

The decision is a tough one. At least 30 to 50 percent of newly diagnosed prostate cancer patients have slow-growing, low-risk cancer that does not require treatment right away—or perhaps ever. Importantly, the risk of dying from prostate cancer with low-risk disease is only one percent. Unfortunately, doctors do not yet understand whose cancer might progress, often leading to anxiety and overtreatment.

Only center in Northeast

But cancer researchers at BIDMC and elsewhere hope to change that. Since 2010, BIDMC has been the only medical center in the Northeast to participate in a nationwide multi-center, prospective clinical trial seeking to refine the safety of active surveillance and discover biomarkers that could identify which patients with early-stage prostate cancer might require early treatment. Called the Prostate Cancer Active Surveillance Study (PASS) and launched in 2008 with a grant from the nonprofit Canary Foundation, this study is based at Fred Hutchinson Cancer Research Center in Seattle.

In November 2019, the National Cancer Institute awarded a fiveyear, \$6.7 million UO1 grant to provide infrastructure support for the PASS trial, which began with six participating sites and now has 11 sites throughout the country. The principal investigator is Daniel Lin, MD, Director of the Institute of Prostate Cancer Research at the Fred Hutchinson Cancer Research Center and UW Medicine; the BIDMC-site principal investigator is **Andrew Wagner, MD**, Director of Minimally Invasive Urologic Surgery.

Reduce unnecessary treatment

"This trial, the largest prospective multi-center study in North America, will help us find the 'holy grail' of For more information about this trial, visit: <u>canarypass.org</u> or contact Drs. Wagner or Chang at 617-667-3739.

prostate cancer: clinical criteria and biomarkers that will enable us to reliably identify who should receive treatment right away and who can be monitored over time, with the goal of reducing unnecessary treatment and improving quality of life," says Dr. Wagner.

According to Peter Chang, MD, MPH, BIDMC co-investigator and Director of the BIDMC Prostate Cancer Center, BIDMC has one of the largest number of patients enrolled in the PASS trial, with 285 men currently participating and others still being enrolled. Study participants are actively followed with regular PSA tests, biopsies, clinical exams, and quality-of-life questionnaires. Because prostate cancer tends to be slow-growing, participants will be followed for up to 25 years so researchers can better understand the timing of cancer progression. Participants whose cancer shows signs of more aggressive behavior receive appropriate treatment.

One **BIDMC** patient participating in the PASS trial is James Zatzos, 71, of Bridgewater, Mass., who was diagnosed five years ago. When Mr. Zatzos learned about the PASS study from Dr. Wagner, he was all in. "I recommend this to other patients. I'm monitored very closely, educated about my condition, and can undergo my blood work locally, so it's convenient," he says. Participant Bill Deschenes, 57, of Wrentham, Mass., feels likewise. "Being in this study gives me peace of mind because I'm followed so closely," he says, adding that he also appreciates the opportunity to take part in a study that may someday make treatment decisions easier for other patients.

NEWSBRIEFS



Mark P. Callery, MD, Chief of General Surgery, presented the Margrét Oddsdóttir Lectureship at Yale University School of Medicine in the fall. Dr. Callery's presentation was entitled "GI Surgery and the SSAT: The Road Ahead." Dr. Callery is president of the Society for Surgery of the Alimentary Tract (SSAT).

Earlier this year Dr. Callery was awarded a Fellowship ad hominem by the Royal College of Surgeons of Edinburgh, an organization of over 27,000 medical professionals from more than 100 countries worldwide. First incorporated as the Barber Surgeons of Edinburgh in 1505, the college has been at the vanguard of surgical innovation and developments for more than 500 years. Dr. Callery will receive the prestigious award at a ceremony on July 3 at the college's headquarters in Edinburgh, Scotland, followed by a black-tie dinner hosted by the organization's president, S. Michael Griffin, MD, OBE.



Wolfgang Junger, PhD, an investigator in the Division of Acute Care Surgery, Trauma, and Surgical Critical Care, received a five-year R35 grant from the National Institute of General Medical Sciences (part of the National

Institutes of Health) to fund his research project "Metabolic and Purinergic Immune Regulation." The goals of the project are to investigate how ATP, the main energy currency of cells, regulates the functions and metabolism of immune cells and how these regulatory mechanisms can be targeted therapeutically to improve immune responses in patients with infections, sepsis, and inflammatory diseases.



Peter L. Steinberg, MD, Urologic Surgery, was selected as a recipient of the 2020 Young Urologist of the Year Award by the American Urological Association (AUA). Dr. Steinberg will be formally recognized during the AUA annual meeting

in Washington, DC. The Young Urologist of the Year Award is presented annually to an AUA member in each section in recognition of their efforts and commitment to advancing the development of early-career urologists.



Bernard Lee, MD, MBA, MPH, Chief of Plastic and Reconstructive Surgery, was selected as a recipient of the 2020 A. Clifford Barger Excellence in Mentoring Award at Harvard Medical School (HMS). The prestigious Excellence in Mentoring Awards were

established to recognize the value of quality mentoring relationships and the impact they have on professional development and career advancement in basic and clinical medicine, research, teaching, and administration. Nominations are submitted by individuals currently or formerly within HMS and its affiliated institutions who have been mentored by the nominee or by colleagues who have personally witnessed the impact of the nominee's mentorship on others. A celebration to honor Dr. Lee and the other award recipients will be held at HMS.



Members of the Division of Podiatry recently assumed leadership positions in the American College of Foot & Ankle

Surgeons (ACFAS), the specialty's leading organization. **Barry Rosenblum, DPM**, was elected to the board and **Thanh Dinh, DPM**, assumed her role as President-Elect.



Kolawole Olugbade, MD, MPH,

joined the department as the Minimally Invasive Urologic Surgery Fellow. Dr. Olugbade received his medical degree from the University of Michigan Medical School and completed his residency at SUNY Health Science Center. He also

holds a Master's in Public Health from Johns Hopkins University. Led by **Andrew Wagner**, **MD**, the William C. DeWolf Fellowship in Urologic Surgery offers trainees a unique combination of high-volume robotic surgery and advanced education in clinical research through the Harvard T. H. Chan School of Public Health Clinical Effectiveness Program.



The following members of the Department of Surgery were named "Top Doctors" in the January 2020 issue of Boston Magazine. Congratulations to: Drs. Jeffrey Arle, Michael Cahalane, Mark Callery, David Caradonna, Thomas Cataldo, Elliot Chaikof, Peter Chang, Joseph Ciccone, Anurag Das, Lisa Ferzoco, Sidhu Gangadharan, Allen Hamdan, William Innis, Scharukh Jalisi, Ted James, Daniel Jones, Kamal Khabbaz, Khalid Khwaja, Ernest Kornmehl, Mark Kuperwaser, Stephen Lazarou, Bernard Lee, Samuel Lin, David Liu, Adnan Majid, Leonard Miller, Abraham Morgentaler, Donald Morris, A. James Moser, Christopher Ogilvy, Aria Olumi, Heidi Rayala, Marc Schermerhorn, Terri Silver, Sumner Slavin, Ajith Thomas, Andrew Wagner, and Richard Whyte.



Jeffrey Arle, MD, PhD, Neurosurgery, was named Section Editor for Brain in the journal *Neuromodulation*. The publication of the International Neuromodulation Society and the International Functional Electrical Stimulation Society, *Neuromodulation* is the primary

journal covering the therapeutic alteration of activity in the central, peripheral, or autonomic nervous systems via implanted devices.



In January, members of the Division of Otolaryngology/ Head and Neck Surgery Voice Team (from left, voice specialists **Tori Flormann, MS, CCC-SLP**, and **Barbara Wilson Arboleda, MS, CCC-SLP**, and laryngologists **Pavan Mallur, MD**, and **Stephanie Teng, MD**) attended the New England Conservatory of Music Health Fair, providing students with educational materials on vocal health/hygiene and information about services available at BIDMC. In February, Dr. Teng and Ms. Arboleda hosted a webinar to educate voice teachers and coaches about vocal fold hemorrhage and to introduce the BIDMC Voice Team.



Sidhu Gangadharan, MD, MHCM,

Chief of Thoracic Surgery and Interventional Pulmonology, was recently appointed to the Board of Advisors at Geisel School of Medicine at Dartmouth, from which he received his medical degree. Dr. Gangadharan is also a graduate of Dartmouth College.

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NEWSBRIEFS

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Faculty, trainees, and research staff from the Department of Surgery presented their research at the Annual Academic Surgical Congress (ASC) in Orlando, Florida in February: **Seema Anandalwar, MD, MPH, Gabriel Brat, MD**,

MPH, MSc, Daniel Copeland, Christiane Ferran, MD, PhD, Alok Gupta, MD, Ted James, MD, MS, Mark Kashtan, MD, MPH, Evan Messaris, MD, PhD, Jaime Pardo, MD, Jonathan Pastrana Del Valle, MD, Leena Pradhan-Nabzdyk, PhD, MBA, Brian Tung, and Daniel Wong, MD. Sponsored by the Association for Academic Surgery and the Society of University Surgeons, ASC is a leading meeting for surgeon-scientists to exchange scientific information and network with peers.



Urologic Surgery residents **Suprita Krishna, MD, MHA, and Kenneth Softness, MD, MS**, each won an award for their essays

on health policy from the New England Section of the American Urological Association (NE-AUA). Dr. Krishna's essay focused on reducing racial disparities in prostate cancer screening and treatment through improving physician cultural competence and targeted marketing programs. The subject of Dr. Softness's essay was advocating for expanding infertility coverage on a national level.



Resident **Shahdabul (Shad) Faraz**, **MD**, received the John H. McArthur Canadian Fellowship to attend Harvard Business School (HBS) and earn his MBA. Dr. Faraz, a native of Toronto, will attend HBS during his research elective years from 2020 through 2022.



Alejandro Abello, MD, MPH, and Joseph Black, MD, PhD, matched to the Beth Israel Deaconess/ Harvard Medical School Urology

Residency Program in January. Dr. Abello received his medical degree from Pontificia Universidad Javeriana Bogotá Facultad de Medicina Colombia and his Master's in Public Health from the Yale School of Public Health. Dr. Black received his MD/PhD from the University of Florida College of Medicine.



The 12th International Symposium on Glycosyltransferases, GlycoT 2020, will be held June 21-23. Due to the coronavirus pandemic, the in-person meeting was cancelled and the symposium will be hosted virtually.

This year's event is organized and chaired by **Richard D. Cummings, PhD**, BIDMC, and Michael Pierce, PhD, the Complex Carbohydrate Research Center at the University of Georgia. Dr. Cummings is Vice Chair of Basic and Translational Research in the Department of Surgery and Director of the National Center for Functional Glycomics and the Harvard Medical School Center for Glycoscience. Dr. Pierce is the Distinguished Research Professor of Biochemistry and Molecular Biology and the Mudter Professor of Cancer Research at the University of Georgia. The local organizing committee members are **Sandra Cummings, Jamie Heimburg-Molinaro, PhD, Sylvain Lehoux, PhD,** and **Akul Mehta, PhD**. To register and for more details, visit: <u>glycot2020.com</u>.



Research fellows Juan Ascanio, MD, and Rani Singh, PhD, Thoracic Surgery and Interventional Pulmonology, were selected

as oral abstract presenters at the 100th American Association for Thoracic Surgery (AATS) annual meeting in New York City. Dr. Ascanio's presentation is entitled "A Multidisciplinary Quality Improvement Project Can Significantly and Sustainably Reduce Wasted Time Prior to Starting Thoracic Surgical Operations." Dr. Singh will present on "Quantification of the Airflow Effects after Tracheobronchoplasty by Computational Fluid Dynamics Modeling is More Accurate Than Standard Spirometric Testing."

The Division of Cardiac Surgery earned top honors three stars—from the Society of Thoracic Surgeons (STS) in recognition of excellent patient care and outcomes in three categories: isolated coronary artery bypass graft surgery (CABG), isolated aortic valve replacement surgery (AVR), and combined AVR and CABG surgeries. The society's three-star ratings, which denote the highest quality, place BIDMC's cardiac surgery program among the most elite in North America for these operations.

"Achieving the society's highest rating in three separate procedures is an accomplishment that reflects our commitment to collaboration across cardiac surgery, cardiology, anesthesiology, and



other disciplines," says Chief of Cardiac Surgery **Kamal Khabbaz, MD**. Calculated using a combination of quality measures for specific procedures, the STS star rating is one of the most sophisticated and highly regarded overall measures of quality in health care.



Seventeen-year-old Dante Preston, of Lake Placid, New York, was successfully treated for a vascular malformation by the Otolaryngology/ Head and Neck Cancer team during the 2019 holidays. Here, Dante (center, in hat) displays the holiday gifts given to her by members of her team. Each year, members of the division chip in for gifts to brighten the holidays of an especially deserving patient. From left: **Trisha Clermy**, Shannon Preston (Dante's mother), **Katie Deary, DNP**, **Ted Gomez, MD, Manuela Martins**, Chief Scharukh Jalisi, MD, Denise Brown, RN, Ana Pontes, Deb McKinnon, and **Vera Pina**.



In 2019, the Department of Surgery and Division of Podiatry's "Sox for Socks" sock drive collected 3,764 pairs of new white socks for Boston Healthcare for the Homeless, making it the largest annual BIDMC collection to date. Since the department began participating in the program in 2014, it has collected nearly 11,000 pairs of socks, which help reduce the risk of frostbite and other serious foot conditions among the city's homeless population.

NEWSBRIEFS

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In January, five faculty members participated in the Harvard BIOME (Biomedical Interdisciplinary Occupations and Medical Exposure) Program: Sidhu Gangadharan, MD, MHCM, Chief of Thoracic Surgery and Interventional Pulmonology; Bernard Lee, MD, MPH, MBA, Chief of Plastic and Reconstructive Surgery; Aria Olumi, MD, Chief of Urologic Surgery; Martina Stippler, MD, Neurosurgery; and Nurhan Torun, MD, Chief of Ophthalmology. A program of the Harvard Premedical Society, Harvard BIOME is aimed at facilitating conversation, community, and learning among the premedical community. Students who participated in the program were: Olivia Blanchard, Sheila de la Cruz, Suuba Demby, Jessica Ehondor, Mary Neguse (pictured above, at right, with Dr. Stippler), and Marilyn Rodriguez.



Resident **Rashi Jhunjhunwala**, **MD**, **MA**, received the Paul Farmer Global Surgery Research Fellowship, which is part of the <u>Program in Global Surgery and</u> <u>Social Change</u> at Harvard Medical School. The fellowship was created to train leaders in surgical

care, education, and research relating to global surgery, anesthesia, and obstetrics and gynecology. Fellows develop a variety of skills to further promote development in global surgery, public health, surgical systems, and humanitarian aid. Through this program, Dr. Jhunjhunwala will continue the work she began during the completion of her master's degree in bioethics and society at King's College London, in which she focused on global health ethics.

ADAKVEO works by making blood vessels and certain blood cells less sticky

ADAKVEO[®] (crizanlizumab-tmca) attaches to P-selectin, a sticky factor that plays a key role in blockages, also know as vaso-occlusion. By attaching to P-selectin, ADAKVEO blocks connections between certain cells such as red blood cells, white blood cells, and platelets.



An important new therapy-crizanlizumab (brand name Adakveo/Novartis)-that significantly reduces the frequency of vaso-occlusive crises (VOCs) in patients 16 years and older with sickle cell disease was approved by the U.S. Food and Drug Administration (FDA) in November 2019 and is now on the market. The treatment was developed by Selexys Pharmaceuticals, Inc., whose co-founder is Richard D. Cummings, PhD, Vice Chair of Basic and Translational Research in the Department of Surgery and Director of the National Center for Functional Glycomics and the Harvard Medical School Center for Glycoscience. VOCs in sickle cell disease are unpredictable, sudden, and intense episodes of pain that last, on average, 10 days and are associated with an increased risk of life-threatening complications. The FDA's approval of Adakveo was based on results of the year-long SUSTAIN trial, which showed that, compared to placebo, Adakveo reduced VOCs by nearly half (45%).





James Naples, MD,

Otolaryngology/Head and Neck Surgery, and Michael Ruckenstein, MD, at Penn Medicine, were guest editors of a 184-page, single-topic issue of *Otolaryngologic Clinics of North America* on "Cranial Nerve Stimulation in Otolaryngology." The issue was published in February.

NEUR SURGERY



Neurosurgeons and BIDMC Brain Aneurysm Institute leaders **Ajith J. Thomas, MD** (co-director), and **Christopher S. Ogilvy, MD** (director), were guest editors of a 116-page *Neurosurgery* supplement entitled "Flow Diversion for Intracranial Aneurysm Treatment," which was published in January 2020. The

supplement is a repository of current knowledge on flow-diverter therapy, which is the subject of more than 600 papers in peer-reviewed literature. The BIDMC Brain Aneurysm Institute has one of the largest experiences with flow-diverter technology in the world.



Gabriel Brat, MD, MPH, MSc,

Acute Care Surgery, Trauma and Surgical Critical Care, and Seth Berkowitz, MD, Radiology, were the recipients of a 2019-2020 Innovation Grant from the BIDMC Center for Healthcare Delivery Science (CHDS) for their BIDMC@Home

app to track opioid use and digital phenotypes of pain in surgical patients. The CHDS provides training, programs, and support to researchers throughout the Beth Israel Lahey Health system with the goal of transforming health-care delivery through innovation.



Resident **Jane Cheng, MD**, and postdoctoral research fellow **Jiaxuan Chen, PhD** (above, right), presented their research at the Consortium for Excellence in Glycoscience during the 2019 Annual Meeting of the Society for Glycobiology. Dr. Cheng presented on "Identification of Carbohydrate Antigens and Its Application in Human Diseases and Disorders." Dr. Chen presented on "Podoplanin Glycopeptide Mimetics for the Treatment of Venous Thrombosis."



Jiaxuan Chen, PhD, a postdoctoral research fellow in the lab of Surgery Chair Elliot Chaikof, MD, PhD, received a Harvard Medical School (HMS) Eleanor and Miles Shore Faculty Development Award, which was presented at a reception honoring recipients in November. The Shore Program provides support for academic activities to members of the HMS Faculty of Medicine at the level of instructor and assistant professor through a range of award opportunities. The awards may be used for protected time to pursue academic work, including research, or to develop a new clinical or teaching program. Here Dr. Chen accepts his award from HMS Dean George Daley, MD, PhD.



Residents (from left) **Rashi Jhunjhunwala, MD, MA, Jacqueline Wade, MD, Claire Sokas, MD, Charity Glass, MD, Sophie Wang, MD**, and **Benjamin Allar, MD**, volunteered recently at the Greater Boston Food Bank. Each fall BIDMC and the Department of Surgery host the Food is Medicine gala, which raises funds for the Greater Boston Food Bank. Look for the date of this year's gala in the next issue of *Inside Surgery* and on Twitter @BIDMCSurgery.

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In addition to many Surgery faculty and alumni, residents had a strong showing at the American College of Surgeons Clinical Congress 2019 in San Francisco. Residents who contributed to or gave presentations at the meeting are: **Kevin Arndt, MD, Quynh Chu, MD, Mark Kashtan, MD, MPH, Patric Liang, MD, Kortney Robinson, MD, MPH, and Daniel Wong, MD.**



Martina Stippler, MD, Neurosurgery (left), and Jennifer Wilson, MD, Thoracic Surgery and Interventional Pulmonology,

were inducted as Fellows of the American College of Surgeons (FACS) at the American College of Surgeons Clinical Congress 2019 in October in San Francisco. ACS fellowship indicates that a surgeon's education and training, professional qualifications, surgical competence, and ethical conduct have passed a rigorous evaluation, and have been found to be consistent with the high standards established and demanded by the ACS, the largest organization of surgeons in the world.



Stephanie Teng, MD, Otolaryngology/ Head and Neck Surgery, presented her research at the Fall Voice Conference in Dallas, Texas. The titles of her two presentations were: "Airway Management in Vocal Professionals" and "Low-Frequency, Low-Pressure Jet Ventilation:

Techniques, Safety, and Complications."



Jacques Kpodonu, MD,

Cardiac Surgery, was the recipient of the Excellence in Thought Leadership Award presented by Hewlett Packard (HP) for his work as a key opinion leader on global health innovation over the past year. The award was presented to Dr. Kpodonu in October at the HLTH

Innovation Conference in Las Vegas, Nevada.



In January, the Division of Thoracic Surgery and Interventional Pulmonology hosted a daylong course, "Updates in Interventional Pulmonology," led by course director Alex Chee, MD; course co-directors Adnan Majid, MD, Chief of Interventional Pulmonology, and Mihir Parikh, MD; and coordinated by Tina Phillips. The course, attend by 40 clinicians from around the country, included a didactic session on a range of topics followed by hands-on training sessions in BIDMC's Carl J. Shapiro Simulation Center. Invited faculty comprised experts from BIDMC, Brigham and Women's Hospital, Massachusetts General Hospital, and St. Elizabeth's Medical Center. Pictured here are (from left): Rachel Martinez, NP, Mihir Parikh, MD, Alichia Paton, ACNP, Adnan Majid, MD, Tina Phillips, Priya Patel, MD, Colleen Keyes, MD, Alex Chee, MD, and Ramsy Abdelghani, MD. Course faculty not pictured are: Muhammad Ali, MD, Fayez Kheir, MD, Danai Khemasuwan, MD, Tanmay Panchabhai, MD, Rona Spector, MD, and Majid Shafiq, MD.



Ted James, MD, MS, Chief of Breast Surgical Oncology and Vice Chair of Surgery (Academic Affairs), spoke at the National Academies of Sciences, Engineering, and Medicine in Washington, DC, in the fall at a public workshop entitled "Guiding Cancer Control: A Path

to Transformation." Dr. James's remarks focused on advancing team-based, coordinated care. In addition, Dr. James was selected to serve as an Institutional Representative for Harvard Medical School (HMS) of the Association for Academic Surgery (AAS). In this role Dr. James will assist in the recruitment and engagement of HMS-affiliated surgeons, trainees, and students with the AAS while communicating their needs to the association's leadership.



Nurhan Torun, MD, Chief of Ophthalmology, gave the keynote lecture, "What is New in Optic Neuritis," at the 55th National Neurology Congress in Antalya, Turkey in November. During the meeting's Ask the Expert session, Dr. Torun addressed nystagmus and other ocular oscillations.

Amy Evenson, MD, MPH, Transplant Surgery, was among a group of 83 surgical educators inducted into the American College of Surgeons (ACS) Academy of Master Surgeon Educators at a ceremony in October



in Chicago. Dr. Evenson was inducted as an Associate Member of the prestigious Academy.



Christopher Barrett, MD, received third place for best resident paper at the 2019 annual American Association for Surgery of Trauma (AAST) for his paper entitled "Plasmin-Modified Thromboelastography Rapidly Identifies Patients at Risk

of Hyperfibrinolyis, Mortality, and Need for TXA: A Diagnostic Tool to Resolve an International Debate." The paper will be published in the *Journal of Trauma and Acute Care Surgery* with co-author **Michael Yaffe**, **MD**, **PhD**, in the Divisions of Acute Care Surgery, Trauma, and Surgical Critical Care and Surgical Oncology.



John Giurini, DPM, Chief of Podiatry (left), crossing the finish line at the American Diabetes Association (ADA) "Step Out: Walk to Stop Diabetes" walk around Boston Common held in October. Led by Dr. Giurini, the BIDMC Podiatry team was the third-highest company fundraiser for this event, raising nearly \$2,700 for the ADA.

NEWSBRIEFS

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Resident **Quynh Chu, MD** (left), received the award for the best basic science presentation at the Department of Surgery Clowes

Research Symposium for her presentation "Double-Loaded Paclitaxel Nanoparticles for the Treatment of Aggressive Breast Cancer." Her mentors were Yolonda Colson, MD, PhD, Massachusetts General Hospital, and Mark Grinstaff, PhD, Boston University. Neurosurgical fellow **Santiago Gomez-Paz, MD**, received the award for the best clinical presentation for "Women Smokers with Chronic Hypertension Have a Seven-Fold Increased Risk for Having an Intracranial Aneurysm: A New Target Population for Screening." His mentor was **Christopher S. Ogilvy, MD**, Neurosurgery. The George H.A. Clowes Visiting Professor of Surgical Research was Funda Meric-Bernstam, MD, of the University of Texas MD Anderson Cancer Center.

Amy Evenson, MD, MPH, Transplant Surgery, and Benjamin James, MD, MS, Surgical Oncology, gave keynote addresses at the BIDMC Academy annual fall retreat "Confronting the Tribal Culture of Medicine." Dr. Evenson, Director of the BIDMC Surgery Clerkship, addressed "What is Tribalism." Dr. James, Chief of Endocrine Surgery, discussed "What are the Contributors to Tribalism in Medicine."

In March, Harvard Medical School (HMS) students Aliya Feroe and Brenna Nelsen gave presentations about research conducted under the mentorship of Chief of Breast Surgical Oncology and Vice Chair (Academic Affairs) **Ted James, MD, MS**, at the 80th annual HMS Soma Weiss Student Research Day. The presentation was on the research team's work on the project "A Profile of a National Accreditation Program for Breast Center Directors in the United States." The day is a forum for HMS medical and dental students to present their scholarly work and learn about the work of their peers.



Boris Gershman, MD, Urologic Surgery, was a recent guest on an online Russian-language TV show (RussianTVBoston; Местечковое Телевидение Бостона), during which he discussed a variety of urologic topics, including urologic cancers, prostate cancer screening,

kidney stones, and voiding dysfunction. As a Russianfluent urologist, Dr. Gershman is committed to reaching out to the Russian-speaking population in the Greater Boston area.



Scharukh Jalisi, MD, Chief of Otolaryngology/Head and Neck Surgery, was a visiting professor at the 29th National Conference of ENT/Otolaryngology/Head and Neck Surgery in Pakistan in the fall. Dr. Jalisi presented keynote lectures on thyroid cancer, skull base surgery,

and de-intensification in head and neck cancer. He also participated in a discussion on improving health care in Balochistan with the governor of the province.



Monica Valero, MD, Surgical Oncology, was selected to give a presentation on "The Impact of Delay of Adjuvant Chemotherapy in Hispanic Patients" at the annual Society of Surgical Oncology International Conference on Surgical Cancer Care in Boston.

Dr. Valero is Director of the Hispanic Breast Cancer Program at BIDMC (see <u>page 8</u>).





The annual **Department of Surgery Research Report** is now available in print and on

the department's website. The 128-page publication includes an overview of research underway within the department, a bibliography of published and in-press publications during

the 2019 fiscal year, and reports from 48 investigators across all divisions. To request a print copy, contact: <u>surgerycommunications@bidmc.harvard.edu</u>.

ALUMNI NEWS



Residents (from left) **Sayuri Jinadasa, MD, Rashi Jhunjhunwala, MD, MA**, and **Aron Lechtig, MD**, placed in the top five at the annual Resident Top Gun Competition at the Massachusetts Chapter of the American College of Surgeons (MCACS) in December. MCACS introduced the statewide Top Gun competition in 2011 to provide residents with an opportunity to showcase their laparoscopic skills in simulated surgical tasks, such as intracorporeal knot tying, transferring objects from hand to hand, and pattern cutting.



The Bookshelf

Jeffrey Arle, MD, PhD, Editor. *The Neuromodulation Casebook*. Elsevier, Academic Press, 2020.



Geoffrey P. Dunn, MD, a 1984 graduate of the Fifth (Harvard) Surgical Service (the predecessor of the BIDMC General Surgery Residency Program) is the editor with Anne C. Mosenthal, MD, of Surgical Palliative Care: Integrating Palliative Care,

published in November 2019 by Oxford University Press. William V.

McDermott, MD (1917-2001), former Director of the Fifth Surgical Service and Cheever Professor of Surgery, is featured in the book's first chapter.

Now retired, Dr. Dunn was a member of the Department of Surgery and Medical Director of the Palliative Care Consultation Service at UPMC Hamot Medical Center in Surgical Palliative Care

edited by Anne C. Mosent and Geoffrey P.



Erie, Penn. Since 1997 Dr. Dunn's work has focused on the education of surgeons about the principles and practice of palliative care in the setting of serious and life-limiting illness. He serves on the editorial board of *Annals of Palliative Medicine*, edited *The Surgeon and Palliative Care* (2001), and co-edited *Surgical Palliative Care* (2004) with the late Alan G. Johnson, MChir, which have become major references for surgeons interested in the field of palliative care.

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trigeminal nerve, which provide sensation to the eyes, mouth, nose, scalp, forehead, and upper and lower jaws. While the precise mechanism is unclear (a subject of Dr. Arle's research), electrical stimulation of these nerves creates an electrical field that blocks pain signals.

Taking about an hour, the procedure is done in the operating room with the patient under general anesthesia. Via tiny incisions behind the hairline, the neurosurgeon inserts electrodes subcutaneously (under the skin) to the painful site(s), anchors them in place, and attaches them to a pulse generator implanted beneath the collarbone, where a pacemaker would be located. Most patients are discharged from the hospital the same day. An external programmable device, which is fine-tuned in later office visits, enables the patient to control the level of pain relief.

Non-invasive office trial

It is not yet known who will likely respond to peripheral nerve stimulation, so surgeons typically conduct a trial during which they insert the electrodes subcutaneously and attach them to an external system to test the response over a week. However, this has the potential for infection and scarring, not to mention inconvenience to the patient. Dr. Arle has developed a

and the control device is easy to use. I had tried so many things over the years and was desperate. I want others to know this option exists."

Elizabeth MacDonald, a Quincy resident who underwent

"I had tried so many things over the years and was desperate. I want others to know this option exists."

- Patient Carol Mannila

non-invasive, office-based trial in which electrodes are placed directly on the patient's skin for up to two hours, which has proven helpful in determining who is likely to respond.

After undergoing an in-office trial that, to her astonishment, provided "immediate pain relief," in December 2019 Ms. Mannila had the procedure. Following a brief recovery period, she found that for the first time in decades the pain, while not completely gone, was greatly reduced and has remained that way. "I'm so glad I did this," she says. "The wire doesn't show on my face the procedure in the fall of 2019 for unremitting pain in her mouth following dental operations, is equally enthusiastic about this treatment. "Every day my pain was about a 12 on a scale of one to 10, but now it's at a level that I can live with, which is what I had hoped for. This treatment was absolutely worth it," she says.

Dr. Arle points out that this treatment is safe when performed by an experienced surgeon, that complications are both rare and minor, and that patients who respond to the trial usually experience worthwhile pain relief after the procedure.

To schedule an appointment or make a referral, call: 617-234-4477