Jim Ferzoco, a retired teacher and father of four, was understandably concerned when he learned he had prostate cancer. But he was relieved to know that the surgeon — Andrew Wagner, MD, Chief of Minimally Invasive Urologic Surgery — who had successfully treated his youngest brother for prostate cancer, would also be providing his care.

After reviewing his treatment options with Dr. Wagner, Mr. Ferzoco decided on robotic-assisted prostatectomy, a minimally invasive procedure in which the entire prostate is removed. The advantages of minimally invasive treatment are excellent cure rates, quicker recovery, less bleeding and pain, and a lower complication rate — as long as the procedure is performed by an experienced surgeon. “I knew that BIDMC is a national leader in minimally invasive treatment of urologic cancers and the region’s foremost center for robotic surgery, so I felt very confident about my decision,” says Mr. Ferzoco, whose brother also underwent the same procedure.

Mr. Ferzoco’s confidence was justified. He was discharged from the hospital the day after his procedure, the few side effects he had were gone within a few weeks, and he remains cancer-free. “But what impressed me the most was the personal attention of Dr. Wagner, my nurse practitioner [Jodi Mechaber-Di Fiori, NP], and the entire team,” says Mr. Ferzoco, whose brother also underwent the same procedure.

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Ideal outcomes are the norm for patients who undergo treatment in the BIDMC Division of Urologic Surgery, which for many years has had a well-earned national reputation for excellence not only in clinical care but also research, education, and training. Building on this solid foundation, the division is undergoing growth and continued improvement under the leadership of its new Chief of Urologic Surgery, Aria Olumi, MD (see page 6).

With the expansion of the BIDMC network to encompass affiliated hospitals throughout the region, one of Dr. Olumi’s high priorities is to continue to provide outstanding subspecialty urologic care, but with an even greater emphasis on teamwork. “Team-based care that includes surgeons, advanced practice providers, and administrative personnel ensures that all of our patients receive excellent, well-coordinated care wherever they go within our healthcare system for treatment,” says Dr. Olumi.

Advanced treatments
The Division of Urologic Surgery’s surgeons (see “Our Team”), all of whom are fellowship-trained, provide the most advanced treatments for a broad range of urologic disorders:

- Benign prostate hypertrophy (BPH)
- Stone disease (kidney, ureter, bladder, and other stones)
• Elevated PSA
• Hematuria (blood in the urine)
• Kidney blockage obstruction and kidney cysts
• Urologic cancers: kidney cancer, bladder cancer, prostate cancer, testicular cancer, penile cancer
• Adrenal gland tumors: benign and malignant
• Urinary incontinence
• Male sexual health: infertility, erectile dysfunction (ED)
• Neuro-urologic conditions, including urinary retention

Patient care is provided throughout the BIDMC system: at BIDMC in Boston, Beth Israel Deaconess Hospital Needham, Beth Israel Deaconess Hospital Milton, and Beth Israel Deaconess HealthCare Chestnut Hill.

BIDMC has the most experience in the region in minimally invasive robotic-assisted procedures for complex urologic conditions, and is considered a national leader in these techniques. For example, 90 percent of procedures for kidney cancer are performed using minimally invasive techniques. And BIDMC is one of the only academic centers in New England to offer robotic-assisted radical cystectomy and urinary tract reconstruction (removal of the bladder and surrounding organs and urinary diversion) for patients with advanced bladder cancer.

In addition, the division now offers comprehensive services in men's sexual health and is recruiting a urologist with expertise in the minimally invasive treatment of women's urologic disorders. BIDMC is also the lead site for kidney cancer of the Dana-Farber Harvard Cancer Center (DF/HCC) and a co-lead site for prostate cancer at DF/HCC, giving patients with these cancers access to a wide range of clinical trials.

**Diverse research portfolio**

Research has always been an integral part of the Division of Urologic Surgery’s mission, and has led to its prominence in urologic research spanning many areas, with results published frequently in top academic journals. “We conduct a diverse portfolio of research focused on improving outcomes for patients with a wide range of urologic conditions,” says Dr. Olumi.

Some current major areas of investigation include patient outcomes, including quality of life; kidney stone prevention; evaluation of overactive bladder; the cost-effectiveness of robotic and minimally invasive procedures; and recovery trends and narcotic use after major surgery.

The division is also a national leader in the research and use of active surveillance for selected patients with low-risk prostate or kidney cancer, sparing them unnecessary surgical treatment and preserving quality of life. Dr. Olumi’s laboratory research, which is funded by the National Institutes of Health, focuses on mechanisms of hormonal change in the prostate and how those affect treatment options and outcomes after treatment. In addition, the division is one of 13 sites in the U.S. participating in a national study to assess the use of biomarkers and MRI for the optimal diagnosis of prostate cancer.

**Unique training opportunities**

The division offers unique, world-class training opportunities for residents and fellows through its accredited Esta and Robert Epstein Fellowship in Minimally Invasive Urologic Surgery and its new, independent Urology Residency Program.

Established ten years ago by Program Director Dr. Wagner, the Fellowship in Minimally Invasive Urologic Surgery was the first such academic program in New England. Fellows spend one to two years focusing on advanced surgical techniques in minimally invasive urologic cancer surgery (much of which is robotic kidney, prostate, and bladder surgery), conducting urologic research, and teaching. They also complete a seven-week intensive training program in clinical effectiveness (biostatistics, epidemiology, and health outcomes) through the Harvard T.H. Chan School of Public Health. “Upon completion of the fellowship, fellows are well-prepared to establish minimally invasive urologic programs at other institutions,” says Dr. Wagner.

With decades of experience training residents from the Harvard-Longwood Combined Urology Residency Program and Lahey Hospital & Medical Center, BIDMC Urologic Surgery now offers its own ACGME-accredited Urology Residency Program, led by Program Director Dr. Olumi and Assistant Program Director Ruslan Korets, MD. The Harvard Urology Residency Program at BIDMC will accept its first trainees in 2019.

Residents in the five-year program will rotate between BIDMC and Beth Israel Deaconess Hospital Needham, gaining exposure to all aspects of urologic practice including general urology, endourology/stone disease, neuro-urology, urologic oncology, infertility, and pediatric urology (at Boston Children’s Hospital). In addition, residents will conduct research and choose an elective clinical experience to explore their specific areas of interest.

“BIDMC Urologic Surgery has always stood for excellence in patient care, research, and education,” says Dr. Olumi. “Through teamwork and a continued focus on excellence as we expand, we will build on this legacy well into the future.”