Seven years ago, cancer patient Patrice DiCarlo faced a decision that no one should ever have to make. With no guarantee it would result in a cure, she could undergo yet another operation (her sixth) — this time to remove the remainder of her tongue, the floor of her mouth, and likely also her larynx, which would leave her unable to eat or breathe normally or to speak.

Or she could live out her remaining days — those functions intact — allowing the oral cancer that had plagued her on and off for 11 years to claim her life.

DiCarlo, now 59, a retired executive secretary who lives in Florida, spent two days considering those options. “I wanted to live,” says DiCarlo, so the choice was clear. “I decided to have the surgery, whatever the outcomes.”

Making that difficult decision was made somewhat easier because of DiCarlo’s relationship with and deep trust in her longtime head and neck surgical oncologist Robert Frankenthaler, MD, Chief of Otolaryngology and Head and Neck Surgery at BIDMC.

Frankenthaler, who was fellowship trained in head and neck surgical oncology at MD Anderson Cancer Center, began caring for DiCarlo in 2000, when she had a recurrence of the tongue cancer (carcinoma) that had been treated — and everyone believed cured — five years earlier.

Total faith
Frankenthaler has since performed five operations, including reconstructive procedures, on DiCarlo, whose last cancer was not a carcinoma recurrence, but

Continued on page 4 >
Save the Date

**February 6, 8-9 AM**
**Surgical Grand Rounds**
Salzman Visiting Professor of Surgery:
Peter Gloviczki, MD, Mayo Clinic
“Open Surgical Reconstruction of Large Veins in the Endovascular Era”

**February 11, 5-6 PM**
**Surgical Horizons Seminar**
Victor R. Ambros, PhD, UMass Medical School
“RNAi and microRNAs in Cancer Pathogenesis”

**March 11, 5-6 PM**
**Surgical Horizons Seminar**
Robert M. Zwolak, MD, Dartmouth Medical School; White River Junction VA Medical Center
“Impact of Health Care Delivery System Changes on Vascular Surgery Practice”

**March 13, 8-9 AM**
**Surgical Grand Rounds**
Distinguished Visiting Professor of Surgery:
Stanley W. Ashley, MD, Harvard Medical School; Brigham and Women’s Hospital
“Redefining General Surgery Training: The SCORE and Milestones Projects”

**March 20, 8-9 AM**
**Surgical Grand Rounds**
Hepatobiliary and Pancreatic Visiting Professor of Surgery: William R. Jarnagin, MD, Weill Medical College of Cornell University; Memorial Sloan-Kettering Cancer Center
“Biliary Cancer-New Insights and Emerging Trends”

**March 27, 8-9 AM**
**Surgical Grand Rounds**
Greenberg Visiting Professor of Surgery: Herand Abcarian, MD, University of Illinois at Chicago; John H. Stroger Hospital of Cook County
“The Changing Paradigm in the Treatment of Anal Fistulas”

**April 8, 5-6 PM**
**Surgical Horizons Seminar**
Stephen F. Badyik, MD, PhD, University of Pittsburgh; McGowan Institute for Regenerative Medicine
“Clinical Translation of a Biologic Scaffold Approach to Regenerative Medicine”

**April 10, 8-9 AM**
**Surgical Grand Rounds**
Capper-Hermanson Visiting Professor of Surgery: Glenn D. Steele Jr., MD, PhD, Geisinger Health System
“Re-engineering Systems of Care: The Geisinger Experience”

**April 22, 5-6 PM**
**Surgical Horizons Seminar**
Sarah P. Thayer, MD, PhD, Harvard Medical School; Massachusetts General Hospital
“Pancreatic Cancer: Approaches to Future Therapies”

**April 27, 7:30 AM-4 PM**
**Third Annual IDEAS™ Symposium on Surgical Robotics: “Building Bridges and Breaking Barriers”**
Location: The Inn at Longwood Medical (Fenway Room), 342 Longwood Ave., Boston
For information, visit our website. To register for this event, contact: Bonnie Gallivan, bgalliva@bidmc.harvard.edu; 617-632-8363

All Surgical Grand Rounds are held in the Kennedy Building (G2A) on the West Campus of BIDMC. For more information, please contact Kara May: klmay@bidmc.harvard.edu; 617-632-9236.

All Surgical Horizons Seminars are held in the Carl J. Shapiro Simulation and Skills Center, G20 (East Campus), BIDMC. For more information, please contact Molly Jay: mjay@bidmc.harvard.edu; 617-667-8258.
Distinguished Visiting Professors Enrich Education

Throughout the year, the Department of Surgery’s Distinguished Visiting Professors Series brings luminaries in surgery and surgical research to BIDMC to educate trainees and faculty and stimulate the exchange of ideas, which is the lifeblood of any leading academic surgery program.

In October, Joseph McCarthy, MD, Director of the Institute of Reconstructive Plastic Surgery at NYU Medical Center and the Lawrence D. Bell Professor of Plastic Surgery, spent two days with members of the department as the inaugural Robert M. Goldwyn Distinguished Lecturer in Plastic Surgery.

McCarthy presented at the Division of Plastic and Reconstructive Surgery rounds, participated in roundtable discussions with faculty and trainees, and gave a presentation on the history of plastic surgery of the face at Surgical Grand Rounds, which was co-sponsored by the Combined Harvard Plastic Surgery Residency Program.

McCarthy was honored at a dinner at the Boston Public Library, where it was announced that the BIDMC Plastic Surgery Service will be named the Goldwyn Service in honor of the late Robert M. Goldwyn, MD. Goldwyn was the former Chief of Plastic Surgery at Beth Israel Hospital, former president and Honorary Fellow of the American Association of Plastic Surgery, and the longtime Editor-in-Chief of the influential journal Plastic and Reconstructive Surgery.

In November, Alexander W. Clowes, MD, V. Paul Gavora/Helen and John Schilling Endowed Chair of Surgery at the University of Washington, visited the department as the Clowes Visiting Professor in Surgical Research.

The son of the late George H.A. Clowes Jr., MD, a New England Deaconess Hospital surgical leader and innovator after whom the visiting professorship is named, Clowes presented at Grand Rounds on the mechanisms of arterial graft healing and failure, and participated in roundtable discussions with faculty and trainees.

He also helped judge trainees’ oral abstracts at the department’s Surgery Research Symposium (see page 23). During his two-day visit, Clowes was honored at a dinner at the Harvard Faculty Club.

Other Distinguished Visiting Professors during the fall were: Frans L. Moll, MD, PhD, Peter Angelos, MD, PhD, Gerard M. Doherty, MD, and Clifford Y. Ko, MD.

For information about the Distinguished Visiting Professors Series, 2012-2013, including the speakers, topics, and schedule for spring, please visit our website.
a new, different type of malignancy (sarcoma) on the opposite side of her tongue. And he has overseen her complex care, which in addition to reconstructive surgeries, has included radiation therapy, speech and swallowing therapy, dental work, prosthetic devices, and no small measure of moral support.

DiCarlo has “total faith” in Frankenthaler. While at various times she sought second opinions from other specialists around the country, she always circled back to him. “In addition to being a superbly trained surgeon, Robert is a very caring, compassionate doctor who establishes a personal connection with all of his patients,” says DiCarlo. “He treats me like family.”

She adds, “In my opinion, Robert deserves the credit for the fact that I’m alive and have been cancer free for seven years, and that I can talk and eat and breathe on my own.” She also acknowledges her longtime speech/language pathologist and the other doctors and health care professionals involved in her care, as well as her family.

‘Nothing short of a miracle’
In Frankenthaler’s opinion, however, the credit belongs entirely to DiCarlo. While he was able to preserve her larynx, that certainly did not guarantee that she would be able to breathe and take in adequate nutrition without dependence on tubes.

And learning to speak so intelligibly without a tongue is nothing short of “miracle,” says Frankenthaler, noting that it took determination and hard work to achieve that. “Patrice is an incredible woman who has overcome enormous obstacles to live a normal life. It’s been an honor to be her surgeon all these years.”

**Multidisciplinary team**
While fortunately relatively rare, head and neck cancers can sometimes be especially challenging to treat, in part because of their close proximity to organs that enable important or vital functions like breathing, swallowing, and speaking.

In addition to possibly affecting these functions, treatment — which may include surgery as well as radiation therapy and chemotherapy — can also affect a patient’s appearance. As a result, patients benefit when they have a multidisciplinary team of surgeons and other specialists working collaboratively to develop and administer a comprehensive treatment plan that addresses all their anticipated, and frequently complex, needs.

At BIDMC, for example, the core members of the multidisciplinary Head and Neck Surgery team include Frankenthaler, medical oncologist Elizabeth Buchbinder, MD, radiation oncologist Anand Mahadevan, MD, plastic and reconstructive surgeon Samuel Lin, MD, and speech and language pathologist Colleen Frayne, CCC-SLP.

This team involves other health care professionals, such as dietitians and social workers, as needed, to ensure that patients receive all the services they need in a coordinated fashion. The types of conditions the team treats include cancers and non-malignant conditions of the oral cavity, advanced cancers of the skin in the head and neck region, chronic salivary gland infections, and HPV-associated growths.

**Focus on quality of life**
The team meets weekly in a multidisciplinary conference to develop an individualized treatment plan for each patient that offers the best chance of cure with the fewest possible side effects.

The latter goal is paramount, says Frankenthaler. “We don’t focus solely on treating the person’s cancer, but treating each patient as a unique individual who deserves a good quality of life.”

In addition to a highly experienced team of doctors, the team has access to the latest technologies for diagnosis, staging, and treatment, including noninvasive, targeted radiation treatment with BIDMC’s CyberKnife, as well as many in-office treatments. Patients also have access to clinical trials available Harvard-wide.

Since her last operation seven years ago, DiCarlo, a stylish woman with a playful sense of humor, fully embraces the life she has fought so hard to keep. She takes cruises, enjoys time with her large circle of family and friends, cooks (although she cannot swallow solid foods, her
The Division of Otolaryngology (ear, nose, and throat)-Head and Neck Surgery specializes in the evaluation and state-of-the-art treatment of patients with ear, nose, and throat disorders; voice and swallowing disorders; and cancers and non-malignant conditions of the head and neck.

A team of fellowship-trained surgical specialists, as well as a speech and language pathologist/voice specialist, audiologist, and nurse, provides “one-stop shopping” for patients, ensuring that care is well-coordinated and as convenient as possible. Using the latest technologies, many services are provided in an outpatient setting.

The Otolaryngology-Head and Neck Surgery Team

Robert Frankenthaler, MD
Major clinical interests: benign and malignant tumors and congenital lesions of the head and neck, benign and malignant thyroid tumors

David S. Caradonna, MD, DMD
Major clinical interests: sinus disease, rhinology, sleep disorders, voice disorders

Selena E. Heman-Ackah, MD, MBA
Major clinical interests: chronic ear disease, hearing loss, vertigo, tinnitus, facial paralysis, tumors of the ear and cerebellopontine angle

Pavan S. Mallur, MD
Major clinical interests: voice disorders (including the professional voice), upper airway stenosis, and swallowing disorders

Audiologist
Donica Porter, AuD

Speech-Language Pathologist/ Voice Specialist
Laura A. Bauman, MS, CCC-SLP

Nurse
Robin J. Dann, RN

For complete information, please go to www.bidmc.org/surgery and click on Otolaryngology-Head and Neck. For appointments, call 617-632-7500.
In November, Andrew Wagner, MD, Urology, welcomed an attending surgeon and a uro-oncology fellow from Massachusetts General Hospital, who came to observe him and his team perform a robotic adrenalectomy and partial nephrectomy. The department plans to establish a formal case-observation program for surgeons from across the nation. Wagner was also recently interviewed by a writer from Popular Mechanics for a feature on robotic surgery.

Daniel Jones, MD, Vice Chair for Technology and Innovation, was chosen to be a member of the International Surgical Group (ISG). Founded in 1958, ISG is an organization whose active membership is limited to 60 well-established academic surgeons worldwide. ISG members meet once a year for open-minded exchanges. Jones will attend and present at the ISG’s 2013 annual meeting in Belgium.

Per-Olof Hasselgren, MD, PhD, and former Surgery Chairman Josef E. Fischer, MD, are also ISG members.

David Campbell, MD, Vascular and Endovascular Surgery, was elected Vice President of the New England Society for Vascular Surgery. Among other responsibilities, the Vice President chairs the Student/Resident Initiative Committee.

Mark Callery, MD, General Surgery, was re-elected to a third term on the Executive Council of the International Hepato-Pancreato-Biliary Association (IHPBA).

Ellen Loudermilk, EdM, joined the department as manager of the newly established Center for Learning Science in Surgery. She is responsible for developing, implementing, and evaluating educational activities for the department’s faculty and trainees, focusing on the application of state-of-the-art and emerging instructional technologies. Loudermilk has an undergraduate degree in psychology from Brown University and a master’s degree in technology, innovation, and education from the Harvard University Graduate School of Education. She comes to the department from Scholastic, Inc. in Boston, where she was responsible for developing innovative e-learning course development and training. While at Harvard, Loudermilk designed and evaluated interactive educational software, including tutorials to teach genetics.

In December, 15 Department of Surgery faculty were named by Boston Magazine as “Top Docs:” Richard Bartlett, MD, Michael Cahalane, MD, Mark Callery, MD, Elliot Chaikof, MD, PhD, Andy Das, MD, Allen Hamdan, MD, Daniel Jones, MD, Abraham Morgentaler, MD, Deborah Nagle, MD, Peter Rubin, MD, Martin Sanda, MD, Marc Schermerhorn, MD, Benjamin Schneider, MD, Sumner Slavin, MD, and Richard Whyte, MD, MBA.
Surgical resident Erica Fallon, MD, was the recipient of the prestigious “Young Investigator” award for 2012 from the journal Fertility and Sterility for her paper, “Effect of sunitinib on functional reproductive outcome in a rabbit model,” which was judged to be an exceptional contribution to the field of reproductive medicine. In October, Fallon attended the American Society for Reproductive Medicine conference in California to accept the award and present her research.

Harvard Medical School student Christina Grassi was recently elected Chair of the Medical Student Division of the American Association of Women Surgeons.

Surgical resident Charity Glass, MD, presented a poster, “The American College of Surgeons Association for Surgical Education: Simulation-Based Medical School Curriculum Needs Assessment,” at a Harvard Medical School symposium on simulation in medical education in September. The co-authors were: Robert Acton, MD, Patrice Blair, MPH, Andre Campbell, MD, Ellen Deutsch, MD, Daniel Jones, MD, Kathleen Liscum, MD, Ajit Sachdeva, MD, Daniel Scott, MD, and Stephen Yang, MD.

Surgical residents Jennifer Zhang, MD, Peter Soden, MD, and Hau Le, MD, participated in the Top Gun Competition at the Massachusetts Chapter of the American College of Surgeons meeting in December. The competition consisted of teams of three residents participating in a series of tests where laparoscopic skills such as intracorporeal knot tying, transferring objects from one hand to the other, and pattern cutting were timed and graded. While the team did not take the trophy, they performed extremely well, said General Surgery Residency Program Director Tara Kent, MD.

The Institute for Hepatobiliary and Pancreatic Surgery announced that BIDMC is now a full member of the Pancreas Cancer Research Team (PCRT). The preeminent clinical trials network in the world for innovative human studies in pancreatic cancer, PCRT offers patients access to the most promising new agents against pancreatic cancer. BIDMC is now the largest PCRT center in New England and the only Dana-Farber/Harvard Cancer Center member to be affiliated with the network.

Ekkehard Kasper, MD, PhD, Neurosurgery, was recently named Associate Chief Editor of the journal Surgical Neurology International. He was also appointed Section Editor of a new journal, Anaplastology, which brings together specialists across multiple surgical disciplines with researchers in bioengineering and reconstructive sciences. Kasper will guest edit an upcoming special issue of Anaplastology on interdisciplinary reconstruction techniques.

Samuel Lin, MD, Plastic and Reconstructive Surgery, was recently named an Associate Editor of Plastic and Reconstructive Surgery-Global Open.

Michael Wertheimer, MD, Director of the BreastCare Center, was invited for the third time to present a lecture on the provider-patient relationship at the 2012 China Senior Health Executive Education Program at the Harvard School of Public Health (HSPH) in December. The program, a collaboration of the Ministry of Health of China/HSPH China Initiative, is attended by senior health care leaders from China's central government and provincial health departments.
BIDMC’s Weight Loss (bariatric) Surgery Program was recently re-accredited as an American College of Surgeons Level 1 facility by the Bariatric Surgery Center Network (BSCN) Accreditation Program of the American College of Surgeons (ACS). This designation means that the Weight Loss Surgery Program meets the essential criteria that ensure it is fully capable of supporting a bariatric surgery care program and that its performance meets or exceeds the requirements established by the BSCN Accreditation Program.

In December, the Division of Thoracic Surgery/Interventional Pulmonology held its third daylong “Introduction to Interventional Pulmonology Course” for fellows, led by Program Director Adnan Majid, MD, and Co-Director Erik Folch, MD. In addition to presentations by BIDMC faculty and invited presenters, the course included seven workstations in the Carl J. Shapiro Simulation and Skills Center, offering attendees hands-on training in various interventional techniques.

Jennifer Tseng, MD, MPH, Chief of Surgical Oncology, was selected as one of 12 members of the American Society of Clinical Oncology (ASCO) Leadership Development Program for 2012-2013. The year-long program provides members with networking opportunities, mentorship from ASCO leadership, exposure to federal government research agencies, enhanced leadership skills, and first-hand advocacy experience on Capitol Hill.

Susan E. Pories, MD, a breast surgeon at Department of Surgery affiliate Mount Auburn Hospital, was recently elected president of the Association of Women Surgeons (AWS) at the association’s annual conference in Chicago. AWS has more than 1,700 members worldwide. Pories is Co-Director of the Hoffman Breast Center at Mount Auburn Hospital.

Nurses, doctors, and other members of the Division of Colon and Rectal Surgery gathered at Castle Island in South Boston in October to participate in the “Get Your Rear in Gear Boston 5K,” a Colon Cancer Coalition fundraising event. The 30-plus member team, which also included patients and family members, raised nearly $4,500 to fight colon cancer and raise awareness of the disease, said team caption Amy Monaghan, RN.
A landmark report published in 1999 by the Institute of Medicine made a compelling case for the need to improve health care quality in the United States. The report estimated that as many as 98,000 people died in hospitals each year due to preventable medical errors. While the precise numbers have been debated, the fact remains that there is much to be done to improve health care quality in this country.

Improving the quality of health care involves much more than reducing preventable medical errors and injuries, however. It also means providing care that is effective and based on the latest clinical evidence, efficient and cost effective, patient-centered, equitable, and timely.

Achieving these so-called “pillars of quality” is a complex task with many dimensions. It requires taking a critical, objective look at the entire continuum of care, identifying the key problems, devising creative strategies to address them, regularly measuring progress to determine if they are working and, if not, making informed changes. This is the challenge facing Richard Whyte, MD, MBA, who joined the Department of Surgery in the fall of 2011 as Vice Chair for Quality, Safety, and Clinical Affairs.

Driving the quality agenda
“My role is to raise the profile of quality and drive the quality agenda across the entire department,” says Whyte, a thoracic surgeon and Professor of Surgery at Harvard Medical School who was recruited to BIDMC from Stanford University.

“Fortunately, BIDMC is a premier institution that justifiably prides itself on providing high-quality, safe, cost-effective care and where people are attuned to the importance of quality,” says Whyte. “But for the well-being of our patients and to remain viable in an incredibly competitive environment we must continually strive to do better.”

Whyte has an ideal background to lead this charge. He trained at Massachusetts General Hospital and the University of Michigan; was Chief of Thoracic Surgery and, later, Associate Chair of Cardiothoracic Surgery at Stanford, where he was responsible for quality; and has a masters in business administration from the University of Pennsylvania. He enjoys putting both his medical experience and business knowledge to use in his current role, and being challenged by the diversity of the issues he faces.

Quality on the radar screen
“Each division in our department is different with a unique set of issues and challenges,” says Whyte. “It’s this variety and complexity that makes my job exciting. And while change takes time, observing how quality is now on virtually everyone’s radar screen in the department has been very gratifying.”

While crediting the many faculty and staff, including those outside the department, who make it happen, Whyte is pleased by the department’s recent quality improvements, such as reduced rates of preventable surgical site infections and increased rates of hand hygiene, that have resulted from recent quality-improvement initiatives.

He also points with pride to a recent commendation from the American College of Surgeons’ National Surgical Quality Initiative Program (NSQIP), in which BIDMC was ranked among the top 10 percent of 316 participating hospitals nationwide for its exemplary outcomes in surgical patient care (see page 12).

Whyte leads or serves on many department and hospital-wide committees focused on quality, while also maintaining a busy clinical practice and participating in teaching and clinical research. He thoroughly enjoys every aspect of being an academic surgeon, but says his role in helping improve quality will likely have “the biggest impact.”
As members of a leading academic medical center, residents, fellows, students, and faculty at all levels in the Department of Surgery are encouraged — in fact, are eager — to engage in clinical research aimed at discovering ways to improve patients’ survival and quality of life.

But conducting high-quality clinical research requires specialized skills, information, and access to human and technological resources. In addition, clinical investigators — especially those who are new to the process but also more experienced researchers — often want feedback or to connect with a collaborator to take their ideas to the next level.

All of this and much more is becoming available through SOAR (Surgical Outcomes Analysis and Research), a new Department of Surgery initiative created to serve as the virtual and physical epicenter of clinical research within the department.

Co-led by experienced clinical investigators Jennifer Tseng, MD, MPH, Chief of Surgical Oncology; Jim Rodrigue, PhD, Director of the Center for Transplant Outcomes and Quality Improvement; and Marc Schermerhorn, MD, Chief of Vascular and Endovascular Surgery, SOAR will be a rich resource for members of the department who are involved in or contemplating a clinical research project of any type, from outcomes studies to comparative-effectiveness investigations.

An evolution of earlier, similar programs led by the three co-leaders at BIDMC and elsewhere, SOAR was championed by department Chairman Elliot Chaikof, MD, PhD, who is deeply committed to supporting the expansion of high-quality clinical research within the department.

The mission of SOAR is to help further increase the academic productivity of the department by offering access to a wide range of previously hard to find or non-existent resources and expertise in one location — a newly renovated space in the Deaconess Building on BIDMC’s West Campus.

Trainees and junior faculty, as well as senior faculty, are encouraged to take advantage of all SOAR has to offer, including:

- a comfortable, spacious, well-equipped setting for informal brainstorming and scheduled meetings
- access to experienced clinical investigators who serve as mentors and facilitators
- a “safe” environment in which to share ideas, present abstracts, and receive feedback
- information about and access to biostatisticians, research analysts, and other experienced research personnel
- assistance with grant applications and funding opportunities
- access to potential collaborators
- a place to discover resources and find solutions to challenges through informal conversations and networking

SOAR, in conjunction with the Department of Surgery’s Clinical Scholars Program, also hosts a meeting two mornings a month to which everyone interested or involved in clinical research within the department is invited.

These informal gatherings include a presentation on a research topic, with plenty of time for asking questions and exchanging ideas. Later this year, the SOAR co-leaders will move to a weekly Monday lunchtime format, giving trainees and faculty a relaxed opportunity to connect and learn from each other.

SOAR is already starting to have its intended impact. Says surgical resident Miriam Eskander, MD, “SOAR provided me with the framework for launching a successful research project: mentorship, access to important resources, and a forum for feedback and discussion.”

For listings of SOAR meetings, please visit the research section of the Department of Surgery website.
Research Notes

The mainstay of head and neck reconstruction is the use of microsurgically transferred skin and tissue from other areas of a patient's body; these types of procedures are performed more than 87,000 times a year in the U.S. A promising new option is full-face transplantation for patients who have suffered extreme disfigurement from trauma or cancer.

Currently, the viability of transplanted facial tissue relies solely on the surgeon's subjective clinical assessment, which contributes to flap loss in 14% of cases, with complications occurring in 21% to 43% of cases. A better alternative is clearly needed.

Bernard Lee, MD, Plastic and Reconstructive Surgery, and John Frangioni, MD, PhD, BIDMC Hematology/Oncology, were recently awarded a National Institutes of Health R01 grant for their project, “Real-Time Flap Viability Monitoring during Facial Transplantation using SFDI” (spatial frequency domain imaging).

Lee, Frangioni, and their multi-institutional team of experts will exploit the latest advances in near-infrared (NIR) imaging to develop a noninvasive technology aimed at providing surgeons with objective, real-time information on the viability of transplanted facial tissue. This much-needed technology would allow surgeons to intervene early and minimize complications, such as flap loss, during and following surgery.

Jim Rodrigue, PhD, Transplantation, received an R01 grant for a clinical study that will evaluate live donor kidney transplantation in minorities and low-income patients. Rodrigue and colleagues will study whether the use of a house call intervention (one to two-hour educational session on transplantation and living kidney donation) and a novel web-based tool will help increase the number of live donor kidney transplants in these patients.

Teresa Sanchez, PhD, Acute Care Surgery, recently received a three-year grant from the American Heart Association for her research project “Targeting Sphingosine-1-phosphate Receptors (S1PR) as Vasoprotective Therapies for Stroke.”

Nima Alamdari, PhD, Surgery Research, received a grant from Sirtris Pharmaceuticals, Inc. for his research project, “The Role of SIRT1 During Muscle Wasting.” Alamdari’s research is mainly focused on the areas of sepsis- and glucocorticoid-induced muscle wasting.

Currently, his research is looking at the role of transcription factors and nuclear co-factors in the molecular regulation of muscle mass. Alamdari recently demonstrated a particularly important role for the nuclear co-factor Sirtuin (SIRT) 1 in the muscle-wasting process, suggesting that treatments that increase SIRT1 levels may protect against the loss of muscle mass in multiple catabolic conditions such as sepsis, cancer, and other critical illnesses.
The American College of Surgeons’ National Surgical Quality Improvement Program (ACS NSQIP®) has recognized BIDMC as one of 28 ACS NSQIP participating hospitals in the United States to have achieved “exemplary” outcomes for surgical patient care. In 2002, the Institute of Medicine named NSQIP the “best in the nation” for measuring and reporting surgical quality and outcomes.

The only Boston hospital
The 28 commended hospitals were singled out from among 316 hospitals, which encompass all major U.S. academic medical centers, as well as many private-sector community programs, placing them among the top 10 percent of participating hospitals nationwide. BIDMC was the only hospital in Boston to be recognized by NSQIP. (A list of participating NSQIP hospitals can be found at http://site.acsnsqip.org/participants.)

BIDMC received further distinction as one of only five hospitals in this group to have achieved exemplary status for two or more consecutive years, placing it within the top 1-2 percent of all participating hospitals nationwide.

The NSQIP recognition program commends a select group of hospitals for achieving exemplary outcome performances related to patient management in five areas:

- Surgical site infections
- Cardiac incidents (cardiac arrest, myocardial infarction)
- Respiratory (pneumonia)
- DVT (deep vein thrombosis, thrombophlebitis, and pulmonary embolism)
- Urinary tract infections

According to Richard Whyte, MD, MBA, Vice Chair for Quality, Safety, and Clinical Affairs in the Department of Surgery, this achievement was a team effort that involved all health care professionals who provide care for patients perioperatively. BIDMC performed 27,000 operative procedures during the past year in its nearly 40 operating rooms.

The 28 commended hospitals achieved the distinction of attaining exemplary results in general surgery in two or more of the five areas listed above. Risk-adjusted data from the July 2012 ACS NSQIP Semiannual Report (from the period January through December 2011) were used to determine which hospitals demonstrated exemplary outcomes.

BIDMC also achieved exemplary status in mortality, overall morbidity, and return to OR rates during the same period.

Other leading health care institutions that received recognition are the Mayo Clinic-Rochester Methodist Hospital, Montefiore Medical Center of the Albert Einstein College of Medicine, and Kaiser Permanente San Francisco Medical Center.

NSQIP is the only nationally validated quality-improvement program that measures and enhances the care of surgical patients. As a voluntary participant in NSQIP, BIDMC is required to track the outcomes of inpatient and outpatient surgical procedures and collect data that directs patient safety and the quality of surgical care improvements. This program measures the actual surgical results 30 days postoperatively as well as risk adjusts patient characteristics to compensate for differences among patient populations and levels of acuity.
Harvard Medical School Promotes Faculty Members

The Department of Surgery is pleased to announce that Harvard Medical School recently promoted three faculty members in recognition of their academic excellence and achievements. Two other faculty members were officially named Harvard Medical School Professors of Surgery.

**PROMOTED TO:
PROFESSOR OF SURGERY**

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<td>George Blackburn, MD, PhD</td>
<td>Fundamental investigations in nutrition medicine</td>
<td>George Blackburn, MD, PhD, is the S. Daniel Abraham Professor in Nutrition Medicine and Director of the Study of Nutrition Medicine at BIDMC. An internationally renowned pioneer in the field of nutrition medicine, Blackburn has made innumerable contributions to the fields of metabolism, nutrition, and obesity. His decades of innovations have had, and continue to have, a profound impact on patients worldwide.</td>
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<td>Aristidis Veves, MD, DSc</td>
<td>Fundamental investigations in podiatry</td>
<td>Aristidis Veves, MD, DSc, is the Research Director of the Joslin-Beth Israel Deaconess Foot Center and the Department of Surgery's Microcirculation Lab. Veves is recognized worldwide for his research contributions, which have led to improved care for diabetic patients with complications such as neuropathy, peripheral vascular disease, and foot ulcers.</td>
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**NAMED AS:
PROFESSOR OF SURGERY**

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<tr>
<td>Ron Alterman, MD</td>
<td>Clinical innovation in neurosurgery</td>
<td>Ron Alterman, MD, Chief of Neurosurgery, is an international leader in the field of functional neurosurgery and a clinical innovator in the application of deep brain stimulation for the treatment of movement disorders and other neurological conditions.</td>
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<tr>
<td>Richard Whyte, MD, MBA</td>
<td>Clinical innovation in thoracic surgery</td>
<td>Richard Whyte, MD, MBA, is Vice Chair for Quality, Safety, and Clinical Affairs and a general thoracic surgeon. He was one of the first to report on the use of stereotactic radiosurgery for the treatment of lung cancer and has spoken and published widely on the management of the disease.</td>
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**PROMOTED TO:
ASSISTANT PROFESSOR OF SURGERY**

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<tr>
<td>Tara Kent, MD</td>
<td>Clinical innovation in general surgery</td>
<td>Tara Kent, MD, General Surgery, is Program Director for BIDMC's General Surgery Internship and Residency Program, one of the oldest, most competitive programs in the nation. In addition to maintaining a diverse clinical practice in pancreatobiliary and general surgery, Kent is active in clinical outcomes research and education at all levels.</td>
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Colleen Ryan, MD

As a surgeon who has long specialized in the care of adults and children who have suffered burns, Colleen Ryan, MD, has countless memories of the courage and determination of her patients, many of whom have endured devastating injuries as a result of fires or accidents.

But one of the most memorable moments happened only recently. Ryan, who has been on staff for many years at Massachusetts General Hospital and the Shriners Hospitals for Children-Boston, visited her patient — a survivor of the Rhode Island Station Nightclub fire who had been terribly burned — shortly after he'd undergone a hand transplant. “I remember when we had to remove his hand,” she says, “so seeing him with a new hand was especially gratifying.”

Ryan chose a career that she says has been gratifying in virtually all respects. She had initially wanted to go into medicine but, while at Georgetown University School of Medicine, decided that surgery suited her personality better. Though few women went into surgery at the time, Ryan has never regretted her decision.

Surgery a good fit

“What I liked, and still like, about surgery is that you get things done — that when something bad happens to a patient, such as a serious burn, you can be immediately helpful…useful,” she says. “While you can certainly do that in other specialties, it’s rarely as vivid as in this field.”

Ryan, who launched Mass General’s Burn Recovery Program and is Director of the hospital’s Fraser Outpatient Burn Service, also finds it rewarding to care for patients over the long term, helping them with the often-lengthy and difficult process of reintegrating to their everyday lives. She also enjoys being involved in many other areas related to her specialty, from teaching and research to leading burn-prevention initiatives at the regional and national level.

“I’m especially passionate about prevention,” says Ryan, who has been actively involved in helping get legislation passed on fireworks safety, fire-retardant children’s sleepwear, home oxygen safety, and fireless cigarettes, which has significantly reduced injuries and deaths from burns.

A profound impact

Ryan’s research, which spans investigations of metabolism in burn patients to outcomes studies, has also had a profound impact. For example, her oft-cited 1998 New England Journal of Medicine paper describing a simple method for objectively estimating mortality following burns provided a much-needed tool for physicians to use when discussing resuscitation decisions with families of severely burned patients.

In addition, Ryan’s description of — and new and perhaps other treatments for — a syndrome of neuropathic-like pain in burn scars is also helping relieve patients’ suffering and enabling them to go back to work and resume their normal lives. She has also led the way in incorporating Integra artificial skin into the standard management of burn patients, demonstrating in one published study that it significantly reduces intensive care unit length of stays following massive burns.

An intense learning experience

Ryan trained at New England Deaconess Hospital in the mid-1980s when William V. McDermott, MD, and his successor, Glenn Steele Jr., MD, PhD, headed the surgical residency program. She spent one year as a registrar (a resident-like position) in London, and following graduation in 1988 joined the faculty at
Mass General. Subsequently, she completed five years of research fellowships at Mass General and Shriners Hospitals for Children-Boston.

“The Deaconess offered a very intense learning experience because we took care of the sickest patients,” says Ryan. “It was an exciting time, as the hospital was doing the first liver transplants, the first gastric bypass operations, and had a very busy cardiac surgery service. We saw the entire breadth of surgery and critical care, and had many wonderful teachers.”

Steele, in particular, made a lasting mark on Ryan. “He was a very insightful surgeon who championed evidence-based medicine. He believed that the way to advance the frontiers of surgery is to identify where we have failed, and work to fix it. That lesson has stayed with me.”

In keeping with Steele’s legacy, Ryan plans to focus her efforts increasingly on areas she believes need improvement. “With burn patients, we often fail at prevention, infection, and some psychosocial issues,” she says. “My long-term goal is to help figure out how we can do these better and further improve patients’ lives.”

Alumni: Please keep in touch. E-mail your contact information to hbennett@bidmc.harvard.edu or send it to our mailing address on page 2.

New Faculty

Khalid Khwaja, MD
Division: Transplantation
Medical School: Aga Khan University Medical School, Karachi, Pakistan
Residency: University of Connecticut Health Center, Farmington, CT
Fellowship: Transplantation; University of Minnesota Medical Center, Minneapolis, MN
Clinical Interests: kidney, pancreas, and liver transplantation; living donor transplantation; kidney, hepatobiliary, and pancreatic surgery; dialysis access surgery
Research Interests: immunosuppressive protocols after solid organ transplantation; outcomes research in solid organ transplantation
Phone: 617-632-9812

Peter Steinberg, MD
Division: Urology
Medical School: University of Pennsylvania School of Medicine, Philadelphia, PA
Residency: Dartmouth-Hitchcock Medical Center, Lebanon, NH
Fellowship: Robotics, Laparoscopy, and Endourology; Montefiore Medical Center, Bronx, NY
Clinical Interests: robotics, laparoscopy, and endourology; kidney stones; general urology
Research Interests: role of the Internet in urologic information, new minimally invasive therapies for kidney stones, new techniques in robotic kidney surgery
Phone: 617-667-3739
Selected Faculty Publications

Acute Care Surgery and Critical Care


Cardiac Surgery


General Surgery


Neurosurgery


Lam FC, Kasper E. Augmented autologous pericranium duraplasty in 100 posterior fossa surgeries—A retrospective case series. Neurosurgery 2012; in press.

Plastic and Reconstructive Surgery


Surgical Oncology


Thoracic Surgery/Interventional Pulmonology

Transplantation


Urology


Vascular and Endovascular Surgery


The Bookshelf
A selection of books by our faculty

BOOKS
Melanie Goldfarb, MD, Mark Gromski, James Hurst, MD, Daniel Jones, MD, co-authors. Pocket Surgery. Published by Wolters Kluwer/Lippincott Williams & Wilkins, 2011.

Susan E. Pories, MD, Marsha A. Moses, MD, and Margaret M. Lotz, PhD, co-authors. Cancer (Biographies of Disease Series). Published by Greenwood Press, 2009.

Every June, the Department of Surgery welcomes nine categorical* interns to its General Surgery Internship and Residency Program. Selected from among more than 1,050** applicants, the nine newly minted doctors come from different parts of the world and all walks of life, but before long become like family as they begin their years-long journeys to becoming full-fledged surgeons.

Here, we introduce you to this year’s remarkable interns, who share what sparked their interest in a career in surgery, as well as some of their many accomplishments and wide-ranging interests.

**CHRIS D. BARRETT, MD**

After completing a combat tour in Iraq as a paratrooper in the 82nd Airborne Division, Chris Barrett, MD, decided to do a 180 in terms of his career — become a doctor. “Rather than inflict pain, I want to help alleviate it,” says Barrett, who received an Army Commendation Medal and Combat Infantryman’s Badge. Barrett has co-authored six peer-reviewed publications in high-impact journals, volunteered at Meds and Food for Kids program in Haiti, and served as a “Big Brother,” among his many other accomplishments. Barrett’s goal is to work in surgical critical care at a Department of Veterans Affairs hospital affiliated with a tertiary academic medical center.

**Hometown:** Forest Lake, MN  
**Medical school:** Washington University School of Medicine, St. Louis  
**Clinical/Research interests:** Trauma, acute care surgery, critical care, and how evolutionary science can provide clinical insights into human pathophysiology and response to stressors  
**Biggest fear:** Failure  
**Interesting fact:** I have three cats

**COURTNEY BARROWS, MD**

When Courtney Barrows, MD’s fantasies of becoming the first female NBA all-star seemed unrealistic, she turned to medicine. Her interest in science, combined with her appreciation for teamwork, helped guide this decision; scrubbing in on an operation to remove a large tumor from a patient helped confirm it. A natural leader, Barrows was coxswain for the Boston College rowing team, captain of an intramural basketball team, co-president of the American Medical Women's Association New York Medical College chapter, and co-founded “Explora La Vida Latina,” a Spanish special-interest group. She also participated in cancer research at Boston Children's Hospital, which led to two co-authored publications and a patent filing.

**Hometown:** Danvers, MA  
**Medical school:** New York Medical College, Valhalla, NY  
**Clinical/Research interests:** Surgical oncology and colorectal surgery  
**Biggest fear:** Losing my ideals and values  
**Interesting fact:** I’m a sports enthusiast and play everything from softball to golf

**MARIAM ESKANDER, MD**

“Doctors are needed everywhere. No matter what town you visit, if there is a doctor you will see quality of life improvements and better life expectancy,” says Mariam Eskander, MD, when asked why she wanted to go into medicine and, specifically, surgery. While an undergraduate at Harvard, Eskander was director of the Harvard Square Homeless Shelter and co-founded and directed the Boston Refugee Youth Enrichment Tutoring Program. Following graduation, Eskander was selected as a Rockefeller fellow, a prestigious year-long Harvard fellowship that gives recipients an opportunity to better understand themselves and the world through

*Residents who will remain in the General Surgery Program throughout their entire residency.  
Categorical programs provide the training required for board certification.

**2013 applicants**

www.bidmc.org/surgery
immersion in another culture. Eskander spent her fellowship year in Egypt, where she was involved in both education and the social resistance movement. During medical school, Eskander received the Outstanding Female Student Leadership Award and was elected to the Gold Humanism in Medicine Honor Society.

**Hometown:** Cairo, Egypt

**Medical school:** Chicago Medical School, Chicago

**Clinical/Research interests:** Pediatric surgery and surgical oncology

If you could fix or cure one thing, what would it be? I’d like to overhaul the way we teach surgery. There have been great advances in the way people learn that have not yet been translated to surgery.

**Hobby:** Kuumba, a multicultural choir that celebrates the spirituality of the black musical tradition

**Interesting fact:** I have a cat named Bilirubin, named after the breakdown product of heme catabolism

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**Charity Glass, MD**

Charity Glass, MD, knew she wanted to become a doctor at the age of four. The Harvard graduate has conducted research looking at how obesity impacts the black community, and developed a national simulation-based curriculum for medical students. During her undergraduate years, Glass was director of the AHEAD after-school program and mentored low-income students. While at Harvard Medical School (HMS), she earned a master’s in Public Policy at the Harvard Kennedy School, where she was Chair of the African-Americans, Latinos, Asian Pacific Americans, Native Americans, and Allies (ALANA) student group. Glass also helped develop the innovative HMS/BIDMC Pre-Internship Surgical Boot Camp, which launched last year.

**Hometown:** Pittsburgh, PA

**Medical school:** Harvard Medical School, Boston

If you could sit down with someone living or dead, who would it be? My Dad; he’s the best person I know

**Interesting fact:** I have seven brothers and sisters

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**Mautin Hunedayin, MD**

When she was 17, Mautin Hunedayin, MD, left her native home of Nigeria to pursue her interest in medicine and science at Trent University in Canada. She became intrigued by surgery during her third year of medical school, after she spent many hours in the OR caring for patients. Hunedayin aspires to work at an academic medical center and become involved in projects in Nigeria that address disparities in access to surgical care. While in medical school, she served as president of the Penn State Chapter of the Student National Medical Association and received the McGlumphy/Andrason Memorial Scholarship for Scholarly Excellence.

**Hometown:** Lagos, Nigeria

**Medical school:** Penn State College of Medicine, Hershey, PA

**Clinical/Research interests:** Surgical oncology, acute care surgery, and endocrine surgery

If you could sit down with someone living or dead, who would it be? Wangari Maathai, the first American woman to receive the Nobel Peace Prize

**Interesting fact:** When I was 13 I climbed one of the tallest mountains in southern Nigeria

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**Sayuri Jinadasa, MD**

Sayuri Jinadasa, MD, knew she wanted to be a doctor since she was a young child. “I knew I loved science, wanted to work with people, and hated the idea of a desk job,” says the Princeton Magna cum Laude alumnus. Although Jinadasa didn’t think she was “tough enough” to be a surgeon, she discovered during her third-year surgical rotation that she was. “Surgery is the most important and deepest, most intimate connection you can make with a person,” she says. While at the Columbia University College of Physicians and Surgeons, Jinadasa served as co-president of the International Health Organization and established the medical campus dance club.

Continued on page 20 >
Hometown: Rahway, NJ
Medical school: Columbia University College of Physicians and Surgeons, New York
Most interesting thing you’ve done during your internship: Dr. Raven [BIDMC transplant surgeon] let me suture a vein to an artery

Interesting fact: I love to dance…it’s a way for me to be free

ANITA MAMTANI, MD
“Incredible mentors helped me realize my passion for surgery,” says Anita Mamtani, MD, who completed her BS and MD as part of a six-year, combined degree program at Pennsylvania State University and Jefferson Medical College. Mamtani was very involved in the Trauma Surgical Group at the University of Toronto/Sunnybrook Hospital, which spawned her interest in surgery. Elected to both the George McClellan Surgical Honor Society and the Hobart Amory Hare Medical Honor Society, Mamtani also participated in research projects that were published in high-impact journals and presented nationally. Mamtani’s clinical interests include surgical oncology, and she hopes to be involved in teaching and working with residents and students throughout her career.

Hometown: Toronto, Canada

Medical school: Jefferson Medical College, Philadelphia

Biggest fear: Becoming complacent and resistant to change

If you could fix or cure one thing, what would it be? Obesity

Interesting fact: I enjoy hip-hop dancing

JOHN TILLOU, MD
“I entered medicine because I loved chemistry, but realized I didn’t want to be confined to a lab,” says John Tillou, MD. As an undergraduate, Tillou excelled at research, receiving the Undergraduate Research Scholar Award and the Senior Chemistry Award. He also coached Junior Varsity baseball and was actively involved in numerous volunteer activities. He continued to pursue his passions for sports and volunteering throughout medical school, playing intramural sports and participating in the Big Sibling program, as well as other volunteer efforts. During medical school, Tillou’s research focused on the surgical management of pancreatitis.

Hometown: Norfolk, VA
Medical school: University of Virginia Medical School, Charlottesville, VA

If you could sit down with someone living or dead, who would it be? Thomas Jefferson

Interesting fact: I love skiing in Utah

JENNIFER Q. ZHANG, MD
Jennifer Zhang, MD, a Massachusetts Institute of Technology (MIT) graduate, became interested in surgery after experiencing human suffering and frailty firsthand, most recently during a stint of volunteering and involvement in community projects throughout Haiti and Vietnam. Zhang helped run a primary care clinic in a rural village of Vietnam, where she saw many patients suffering from chronic illnesses. “It is always eye-opening to be immersed in different cultures and to see the unique struggles people endure,” she says. While at MIT, Zhang was involved in research projects that led to co-authorship of a paper in the Proceedings of the National Academy of Sciences.

Hometown: Naperville, IL
Medical school: Johns Hopkins University School of Medicine, Baltimore

Clinical/Research interests: Thoracic surgery, surgical oncology, and oncology/bioengineering research

If you could fix or cure one thing, what would it be? Depression

What is your long-term goal? To practice in an underprivileged country and be involved in basic oncology research
BIDMC Leads the Way in Robotic Surgery

The Department of Surgery achieved three major “firsts” in recent months. This further establishes the department’s position as an emerging national leader in robotic-assisted surgery for an expanding range of operations across multiple disciplines, including highly complex procedures.

Mark Callery, MD, Chief of General Surgery, and James Moser, MD, Executive Director of the Institute for Hepatobiliary and Pancreatic Surgery, performed the first robot-assisted pancreatectomy in Boston. Recently, Benjamin Schneider, MD, General Surgery, performed the first robot-assisted, single-incision cholecystectomy (gallbladder removal) and first Lap-Band bariatric operation in Boston. Also in the fall, Andrew Wagner, MD, and Martin Sanda, MD, Urology, performed the first entirely robotic radical cystectomy (bladder removal for cancer) with urinary diversion in the Boston area.

The robotic approach to these and other surgical procedures offers many advantages over open and/or laparoscopic surgery, including less blood loss, smaller/fewer incisions, less pain, and improved visualization.

The Department of Surgery is a leader in robotic surgery across many specialties, including urology, general surgery, hepatobiliary surgery, colon and rectal surgery, and chest surgery. In addition to offering this option to growing numbers of patients, the department’s faculty members train surgeons from around the nation in robotic techniques.
Department’s Global Reach

Even in this era of virtual communication, surgeons often still rely on meeting in person to learn from each other, whether it is to observe a new surgical technique from an experienced surgeon or to gather firsthand information on how to set up a new program.

For this and other reasons, Department of Surgery faculty have always welcomed visiting surgeons from around the globe. “As an academic department, we’re eager to share our knowledge with our international colleagues and, in turn, have the opportunity to learn from them,” says department Chairman Elliot Chaikof, MD, PhD. In keeping with this philosophy, the department recently hosted surgeons from Ireland, Thailand, and China.

In September, a group of 31 surgeons from Ireland, all members of the Irish Surgical Travellers Club, spent a full day at BIDMC — observing operations, attending presentations, and participating in panel discussions. The surgeons comprise an elite group whose members include the current and former presidents of the Royal College of Surgeons of Ireland. Present to welcome the surgeons were Michael Lonergan, Consul General from the Irish Consulate in Boston, and many Department of Surgery surgeons, residents, nurse managers, and staff.

“It was a highly educational, interesting, and enjoyable experience for us all,” said club president and surgeon Aongus Twomey. “We were delighted to host the club members, and hope this will lead to further international collaborations,” said Michael Cahalane, MD, Acting Chief of Acute Care Surgery, who helped arrange the visit.

In October, Kasaya Tantiphlachiva, MD, a surgical educator and colorectal surgeon from Bangkok, Thailand, spent four activity-filled days at BIDMC. Tantiphlachiva was the recipient of an International Surgical Education Scholarship offered by the American College of Surgeons (ACS) in 2012. She chose to visit BIDMC, and specifically Daniel Jones, MD, and the Carl J. Shapiro Simulation and Skills Center (SASC). “We were honored to be Dr. Tantiphlachiva’s top choice,” said Jones.

Tantiphlachiva spent time in the OR and in informational meetings with Jones, Elliot Chaikof, MD, PhD, Tara Kent, MD, Mark Callery, MD, Vitaliy Poylin, MD, Alok Gupta, MD, SASC Operations Manager David Fobert, and other BIDMC physicians and staff. She also attended Grand Rounds, Medical Education Day at Harvard Medical School, and a weight loss surgery research meeting. Since one of her main reasons for selecting BIDMC was to learn more...
about simulation in surgical education, Tantiphlachiva spent considerable time in the SASC.

“My objectives, which were definitely met, were to observe how to systematize the training of medical students, surgical residents, and fellows effectively, to learn about the new teaching technologies and techniques, and to expand my views in surgical education,” said Tantiphlachiva. She took this knowledge back to her home institution, Chulalongkorn University, which is one of the largest medical schools in Thailand.

Also in October, Marc Schermerhorn, MD, Chief of Vascular and Endovascular Surgery, welcomed a delegation of eight doctors, including neurosurgeons, neurologists, and vascular surgeons, from West China Hospital. The group attended a conference sponsored by BIDMC’s Division of Neurology on current guidelines on the management of patients with asymptomatic carotid stenosis.

**Clowes Surgery Research Symposium**

In November, the department held its annual Surgery Research Symposium in conjunction with the Clowes Distinguished Visiting Professorship in Surgical Research (see page 3).

Department trainees at all levels were invited to submit abstracts in one of two categories: basic science or clinical. From among the 41 abstracts submitted, the judges (Distinguished Visiting Professor Alexander W. Clowes, MD, Elliot Chaikof, MD, PhD, Per Olof-Hasselgren, MD, PhD, Susan Hagen, PhD, and Sidhu Gangadharan, MD) selected 10 for presentation. Following the presentations, the judges selected a winner in each category, each of whom received recognition at Grand Rounds and a monetary award.

**Presenters and award recipients in each category:**

**BASIC SCIENCE**

**Presenters:**
Wande Pratt, MD
Alessandra Mele, MD
Denis Gilmore, MD
Matheus Correa-Costa, BS
Antonio Lasaletta, MD
Gab Kim, PhD

**Award recipient:** Alessandra Mele, MD

**Presentation:** Transdifferentiation of liver cells into insulin-producing cells by A20 overexpression causes diabetes regression in streptozotocin-treated mice.

**CLINICAL**

**Presenters:**
Ahmed Ibrahim, MD
Yoshihiro Yonekawa, MD
Erica Fallon, MD
Charity Glass, MD

**Award recipient:** Erica Fallon, MD

**Presentation:** Neonates with short bowel syndrome: An optimistic future for parenteral nutrition independence.
Looking Back

In many issues of *Inside Surgery*, we publish photographs from the medical center’s archives (photos courtesy of the Ruth and David Freiman Archives at Beth Israel Deaconess Medical Center).

Operating rooms at New England Deaconess Hospital (above) and Beth Israel Hospital (right) in the 1950s were strikingly different than they are today. In the middle of the 20th century, for example, robots were the stuff of science fiction; Today BIDMC has two sophisticated surgical robots used by a growing number of surgeons across multiple specialties for an increasingly broad range of operations (see page 21).