Established in 1992, the Duke Lung Transplant program is the largest and most successful in the world, performing 146 lung transplants in 2011. To date, the program has performed more than 1,200 total transplants. The program's surgeons, R. Duane Davis Jr., MD, Professor of Surgery; Shu Lin, MD, PhD, Associate Professor of Surgery; and Matthew Hartwig, MD, Assistant Professor of Surgery, each have a per-surgeon volume that is higher than the entire volume of most lung transplant centers. “Dr. Davis and his colleagues have more experience than almost any other group of transplant surgeons in the country,” says Peter K. Smith, MD, Professor and Chief, Division of Cardiovascular and Thoracic Surgery. “The experience level and the size of the program work together to create the environment that leads to better outcomes.” The program’s one-year and three-year survival rates consistently surpass national averages.

The program has also seen excellent outcomes in transplanting patients who have not historically been candidates for lung transplantation, such as people 70 and older, patients with cystic fibrosis whose lungs are colonized with resistant pathogens, patients with coronary artery and/or valvular heart disease, and critically ill people who require mechanical ventilation or ECMO (extracorporeal membrane oxygenation).

In 2010, pulmonologist, Dr. David Zaas, and Dr. Davis led a team in a transplant never before attempted—a double lung and cadaveric bone marrow transplant. Laura Margaret Burbach, then 16, had fought an immune deficiency disease (commonly known as “boy in the bubble” disease) all her life, and it had worn out her lungs. Her unique double transplant was performed in hopes that her new immune system, fed by the donor bone marrow, wouldn’t reject the lungs, which were from the same donor. “The idea was that we might be able to create an immune system that wouldn’t react against the organ but would otherwise have normal function. Achieving tolerance was the holy grail that we were hoping to achieve,” says Dr. Davis. It worked. Burbach had quick engraftment of the bone marrow and left the hospital amidst confetti and fanfare. She did have a setback—she had to return to Duke for treatment of graft-versus-host disease involving her small bowel. But she has recovered well, and she has been able to stop taking immunosuppressive medications. Laura returned to school after missing two years, and made up for lost time by making varsity cheerleader and graduating second in her class. She will

Continued on page 6
New Division Chiefs in the Department of Surgery

The Department of Surgery has a number of new Division Chiefs. To better serve our patients and streamline our services, the Department announced the restructuring of the Division of General Surgery into the following new standalone divisions with newly appointed division chiefs:

- Theodore N. Pappas, MD—Division of General and Advanced Gastrointestinal Surgery
- Cynthia K. Shortell, MD—Division of Vascular Surgery
- Debra L. Sudan, MD—Division of Abdominal Transplant Surgery
- Alfonso Torquati, MD—Division of Metabolic and Weight Loss Surgery
- Douglas S. Tyler, MD—Division of Surgical Oncology
- Steve N. Vaslef, MD, PhD—Division of Trauma and Critical Care Surgery

In addition to these new division chiefs, the Department announced the following new division chiefs in Urology and Plastic, Maxillofacial, and Oral Surgery:

- Gregory S. Georgiade, MD—Division of Plastic, Maxillofacial, and Oral Surgery
- Glenn M. Preminger, MD—Division of Urology

We welcome these new division chiefs who bring a wealth of expertise to the Department and share in our mission of commitment to excellence, innovation, and providing the very best in patient care, medical education, and clinical research.

Danny O. Jacobs, MD, MPH
David C. Sabiston Jr. Professor
Chair, Department of Surgery
Duke University Medical Center
Gregory S. Georgiade, MD, has been appointed Chief of the Division of Plastic, Maxillofacial, and Oral Surgery at Duke University Medical Center. Dr. Georgiade joined the Duke Department of Surgery in 1980 as Assistant Professor of General Surgery and Plastic and Reconstructive Surgery; he was promoted to Professor of Surgery in 1997. Dr. Georgiade is an expert in breast reconstruction and trauma; his clinical interests include premalignant and malignant disease of the breast, breast reconstruction, liposuction, abdominoplasty, breast implants and related problems, general reconstructive plastic surgery, and reconstructive cleft lip and palate surgery.

He has published a vast amount of information on plastic and reconstructive surgery and edited the most widely used textbooks in plastic surgery and a textbook on aesthetic breast surgery.

Theodore N. Pappas, MD, has been appointed Chief of the Division of General and Advanced Gastrointestinal Surgery at Duke University Medical Center. His clinical interests include gastrointestinal surgery, peptic ulcer surgery, and cancer of the esophagus, stomach, pancreas, and bile duct.

Since joining Duke in 1988, Dr. Pappas has held the positions of Director of Surgical Endoscopy, Co-Founder and Director of the U.S. Surgical Endosurgical Center, Chief of Gastrointestinal Surgery, Program Director of the General Surgery Residency Program, Medical Director of the Duke Physician Assistant Surgical Residency Program, Chief of Surgical Services for the Veterans Administration Medical Center in Durham, Associate Dean for Clinical Affairs for Duke University School of Medicine, and Executive Medical Director for the Duke Faculty Practice in the Private Diagnostic Clinic (PDC).

Dr. Pappas currently holds the position of Distinguished Professor of Duke Innovative Surgery and Vice Chair for Administration in the Department of Surgery, Vice Dean for Medical Affairs in the Duke University School of Medicine, and Assistant Medical Director for the Duke Faculty Practice. Dr. Pappas currently serves on the Board of Directors for Project Access of Durham County, Durham County Hospital Corporation, and Duke University Health System.

The 1994 and 2006 recipient of Duke’s David C. Sabiston Jr., MD, Teaching Award, Dr. Pappas also serves as a member of several medical journals’ editorial boards. He is a Past President of the American Hepato-Pancreato-Biliary Association and serves as a Senior Director on the American Board of Surgery. He is the editor of seven books and has co-authored more than 300 papers and chapters.

Glenn M. Preminger, MD, James F. Glenn Professor of Urologic Surgery, has been appointed Chief of the Division of Urology at Duke University Medical Center. Dr. Preminger joined the Department of Surgery at Duke in 1993 as Professor in the Division of Urology, Director of the Comprehensive Kidney Stone Center, and Director of the Urology Residency Program.

Prior to joining Duke, Dr. Preminger was a faculty member at UT Southwestern Medical Center for eight years in the Departments of Urology, Medicine, and Radiology. While at UT Southwestern, Dr. Preminger was an American Urological Association Scholar for two years while in the Division of Mineral Metabolism, concentrating on the medical management of nephrolithiasis.

A national and international leader in his field, Dr. Preminger has expertise in minimally invasive management of urinary tract stones, including shock wave lithotripsy (SWL) and percutaneous and ureteroscopic stone removal, as well as comprehensive metabolic evaluation and preventative medical treatment of nephrolithiasis.

Dr. Preminger has had extensive experience in the development of endoscopic instrumentation for minimally invasive urologic procedures and holds eight patents in shock wave lithotripsy design with fellow SWL expert Pei Zhong, PhD.

Cynthia K. Shortell, MD, has been appointed Chief of the Division of Vascular Surgery at Duke University Medical Center. Her clinical interests include diagnosis and management of vascular malformations, open and endovascular aneurysm repair, outcomes research, and venous disease.

Dr. Shortell began her career at Duke in 2005 as an Associate Professor of Surgery. Prior to joining Duke Surgery, Dr. Shortell graduated from Dartmouth College and earned her MD from Cornell University Medical College and is a member of Alpha Omega Alpha. A New York native, she completed her general surgery residency, vascular surgery fellowship, and research fellowship at the University of Rochester’s Strong Memorial Hospital.

She is currently Professor of Surgery and Associate Professor of Radiology at Duke. Since arriving at Duke in 2005, Dr. Shortell has initiated the multidisciplinary vascular malformation team and the venous fellowship. Currently, Dr. Shortell holds positions at Duke as Vice Chair for Faculty Affairs, Department of Surgery; Director, Center for Vascular Disease; Director, Venous Center of Excellence; Medical Director, Non-Invasive Vascular Laboratory; Director, Vascular Residency Program; and Co-Director, Duke Annual Symposium in Venous Disease.

Dr. Shortell also serves as an editor for several medical journals, including the Journal of Vascular Surgery, and she is the founding Editor and Editor-in-Chief of the Journal of Surgical Radiology. In addition, she has edited several books and textbooks and serves on educational committees in several national surgical associations.
Debra L. Sudan, MD, has been appointed Chief of the Division of Abdominal Transplant Surgery at Duke University Medical Center. Dr. Sudan joined Duke in 2008, and in 2009 she launched Duke’s small-bowel transplant program, the only such program in the Southeast. Under Dr. Sudan’s leadership, the program currently has a 100 percent patient survival rate. The program also offers intestinal-lengthening procedures, which are lifesaving treatments that restore function for patients with irreversible damage to their native intestines. Dr. Sudan has the largest published experience of lengthening procedures in the world literature.

Dr. Sudan was appointed Vice Chair for Clinical Operations and Patient Services for the Duke Department of Surgery in 2011 and serves on the steering committee of Duke University Health System’s effort to implement its new standardized electronic health records system, Maestro Care.

Prior to joining Duke, Dr. Sudan served as Professor of Surgery at the University of Nebraska, where she was a faculty member for 12 years. She is a member of the American Surgical Association, the American Society of Transplantation, and the American Society of Transplant Surgeons, and she is a fellow of the American College of Surgeons. She serves as Associate Editor of the American Journal of Transplantation.

Alfonso Torquati, MD, MSci, has been appointed Chief of the Division of Metabolic and Weight Loss Surgery at Duke University Medical Center. In addition to holding the position of Associate Professor of Surgery, Dr. Torquati is also the Director of Obesity Research at Duke and Director of the Duke Center for Metabolic and Bariatric Surgery. Since 2006, the Center has been continuously credentialed as an American Society for Metabolic and Bariatric Surgery Center of Excellence. The designation recognizes surgical programs with a demonstrated track record of favorable outcomes in bariatric surgery.

Dr. Torquati joined the Duke Department of Surgery in 2007 after having served as Director of the Foregut and Bariatric Surgery Research Program at Vanderbilt University. His clinical interests include minimally invasive surgery with a focus on foregut and bariatric surgery. He has lectured widely on these subjects, having served as Chair of the Duke Masters of Minimally Invasive Bariatric Surgery Symposium; lectured on endoscopic treatment of bariatric surgery complications at the First International Symposium of Non-Invasive Bariatric Techniques in Lyon, France; and lectured on surgical treatment of diabetes at the 26th Annual Clinical Conference of the American Diabetes Association. In addition, Dr. Torquati has published many articles on the effects of bariatric surgery on insulin sensitization and diabetes. His work has been supported by several grants from the National Institutes of Health.

Dr. Torquati is active in the Society of American Gastrointestinal and Endoscopic Surgeons, serving on the organization’s research committee and its endoscopy committee. He is a member of many national surgical organizations, including the Society of University Surgeons and the American College of Surgeons.

Douglas S. Tyler, MD, has been appointed Chief of the Division of Surgical Oncology at Duke University Medical Center. He also serves in the positions of Chief of Surgical Services at the Durham VA Medical Center, Director of the Melanoma Program and Director of Surgical Oncology Clinical Operations at the Duke Cancer Institute, and Vice Chair of the Department of Surgery.

Dr. Tyler completed his general surgery residency training at Duke. He served as a junior faculty associate at The University of Texas MD Anderson Cancer Center between 1992 and 1994 during his surgical oncology fellowship. He joined the Department of Surgery at Duke as an Assistant Professor of Surgery in 1994.

His clinical interests include surgical oncology focusing mainly in the areas of gastrointestinal malignancy including pancreatic and gastric cancer; carcinoid tumors; melanoma; and sarcomas of the retroperitoneum and abdominal wall. He oversees one of the largest regional chemotherapy programs in the country. Dr. Tyler conducts basic research to develop novel regional and systemic treatment strategies for patients with malignant melanoma and translates those strategies into novel phase I and II clinical trials for patients with advanced extremity melanoma.

Since 1998, Dr. Tyler has been continuously selected for inclusion in Castle Connolly Medical Ltd.’s “The Best Doctors in America.” He has received Duke University Health System’s Strength, Hope, and Caring Award for leadership in patient care and safety at Duke University Hospital as well as the David C. Sabiston Jr., MD, Teaching Award for Excellence in Resident Education. He was also awarded a Durham VA Medical Center “Partners in Care” Nursing Service Excellence Award in 2011 for his efforts in improving the patient safety culture of the perioperative services involved in the surgical care of veteran patients.

Steven N. Vaslef, MD, PhD, has been appointed Chief of the Division of Trauma and Critical Care Surgery at Duke University Medical Center. He also holds the positions of Associate Professor of Trauma and Critical Care Surgery, Assistant Professor of Anesthesiology, Co-Director of the Surgical Intensive Care Unit, Director of Duke’s Level I Trauma Center, Co-Director of the Medical/Surgical/Critical Care Clinical Service Unit, and Program Director of the Surgical Critical Care Fellowship.

Dr. Vaslef joined the Duke faculty in 1994. Previously he was a member of the faculty of Northwestern University Medical School, where he served as Assistant Professor of Surgery and Assistant Professor of Biomedical Engineering.

His research and clinical interests include trauma surgery, trauma outcomes, surgical critical care, general surgery, trauma/shock resuscitation, enhancement of oxygen delivery, design and testing of membrane oxygenators/ artificial lungs, and analytical and experimental aspects of mass transport processes. He is involved in clinical trials related to sepsis and acute lung injury.

Dr. Vaslef is a member of the editorial boards of several professional journals, including the World Journal of Critical Care Medicine. He has authored numerous textbook chapters and journal articles and is the coeditor of two books. He is a recipient of the David C. Sabiston Jr., MD, Teaching Award for Excellence in Resident Education.
It is estimated that nearly one in eight men will suffer from kidney stone disease in their lifetime and the prevalence of kidney stone disease is on the rise. North Carolina, in particular, has one of the highest rates of stone disease in the country, and this prevalence continues to increase. The economic impact of kidney stone disease is enormous, costing an estimated $2.1 billion in health care expenditures in the United States in 2001.

Men with a history of kidney stones, a family history of stones, and such medical conditions as diabetes, inflammatory bowel disease, or gout are at increased risk of forming kidney stones. Obesity is also a major risk factor for stone formation. Men with any of these risk factors should be considered for a metabolic workup to determine the cause of their kidney stones. Men in certain occupations, such as pilots or long-haul truckers, should be considered for a metabolic workup, as well.

The workup has evolved from a two-week inpatient evaluation to a two-visit outpatient evaluation. At the first visit, blood chemistries are obtained, including a basic metabolic panel and uric acid levels. Patients then complete two 24-hour urine collections at home. The results of these tests are reviewed at the second visit.

With these exams, an underlying cause for recurrent stones can be identified in approximately 95 percent of patients. Specific treatments are offered to reverse the causes of the patients’ stones. These treatments, which include dietary modification often in conjunction with medications, can reduce stone formation rates by up to 95 percent.

The surgical management of kidney stones continues to evolve, as well. Such minimally invasive treatments as shock wave lithotripsy (SWL) and ureteroscopy are performed as outpatient procedures. SWL can be used to treat stones less than 1.5 cm in the kidney. Ureteroscopy is used to treat stones in the ureter or smaller stones in the kidney.

Advances in technology, such as digital flexible ureteroscopes and higher-powered lasers, have led to ureteroscopy surpassing SWL in efficacy for treating ureteral stones. The stone-free rates after ureteroscopic treatment of a ureteral stone is more than 90 percent.

For larger stones or those that are refractory to shock wave lithotripsy, percutaneous nephrolithotomy (PNL) is the preferred treatment option. In the majority of patients, a nephrostomy tube is no longer left in place at the end of the surgery. Patients undergoing “tubeless” PNL have less pain and are able to leave the hospital sooner, usually the morning after their surgery.

The evaluation and treatment of kidney stones is continually changing. For men who suffer from recurrent bouts of kidney stones, the cause can be determined and future stones can be prevented. When patients require surgical management for their stones, there are a number of highly effective and minimally invasive techniques.
attend Honors College at Georgia Tech as a President’s Scholar majoring in public policy. A second patient has now received such a transplant at Duke.

Successes such as these are made possible by a multidisciplinary team of transplant surgeons and transplant pulmonologists, as well as nurses, nurse clinicians, dieticians, financial coordinators, rehabilitation specialists, medical psychologists, social workers, and transplant coordinators. “Dr. Davis and I get to do the big thing that people pay attention to—the transplant itself. But there’s a lot of care pre-transplant and post-transplant that is performed by people who are just as important, if not more so,” says Dr. Lin. Patients receive intensive follow-up care for life, provided by transplant pulmonologists, including John Reynolds, MD, who recently joined the team as Medical Director of Lung Transplantation.

Another hallmark of Duke’s program is much shorter waiting times than other centers. Duke’s median time on the waiting list is 10 days, compared to a national median of 4.7 months. “We are able to get organs for our patients in a much more efficient manner than anyone else,” says Dr. Davis. The program takes an aggressive stance toward organ procurement and will consider lungs that on paper may not look outstanding but that are actually viable.

“For instance, the oxygenation status of the donor, based on arterial blood gas, may not look stellar on paper. But that may be related more to how the lungs are being managed and not by intrinsically how good the lungs are,” says Dr. Lin. “So if we go and take a look at the lungs in person and work on them to optimize their condition, they may turn out to be a very good set of organs.”

Duke is making strides with additional methods to improve the viability of available lungs, including a method called ex vivo lung perfusion (EVLP), in which donor lungs considered unsuitable by usual criteria are maintained and tested outside the body using a machine that assesses their actual function. Duke has performed five EVLP transplants as part of a multicenter clinical trial called the Novel Lung Trial, for which Dr. Davis serves as the principal investigator.

“This technology would allow more people to receive transplants,” says Dr. Lin. In addition, Duke has led the way in treatments to improve outcomes and reduce rejection for lung transplant patients. Dr. Davis has performed pioneering studies that showed that one of the factors leading to chronic rejection of the lung is recurrent aspiration related to gastroesophageal reflux disease (GERD). Duke is developing a clinical trial involving lung transplant candidates who suffer from GERD. Some patients in the trial will have their reflux fixed surgically (nissen fundoplication surgery) before transplant. The study will determine whether having that repair results in a significant difference in the survival of the new lungs. Drs. Lin and Davis also conduct basic research to understand the mechanisms involved when GERD promotes transplant rejection, in hopes of developing treatments to prevent the rejection. In addition, Dr. Davis and colleagues are studying the impact of older age (over 65) on immunobiological and neurocognitive transplant outcomes.

Together, the program’s surgeons devote the energy and resources needed to evaluate every organ that becomes available for possible transplant. One of the surgeons is on call, day and night. “We don’t have any holidays. We transplant on Christmas, we transplant on my kid’s birthday,” Dr. Lin says. “We love doing what we’re doing, and that’s why we’re here.”

For more information, contact R. Duane Davis Jr., MD, at 919-681-4760.
“The experience level and the size of the program work together to create the environment that leads to better outcomes.”

—Peter K. Smith, MD

“Dr. Davis and I performed the actual transplant surgery, but there’s extensive pre-transplant and post-transplant care that is performed by many other specialists on the team who are just as important.”

—Shu S. Lin, MD, PhD

Laura Margaret Burbach, recipient of the first-ever double lung and cadaveric bone marrow transplant, is now a high-school varsity cheerleader.
Here’s more bad news for smokers: Puffing cigarettes increases the likelihood of developing the deadliest form of kidney cancer.

The finding from Duke University Medical Center researchers offers new insights into the direct role smoking plays in advanced renal cancer, but it also comes with a motivational message. “If you stop smoking, the risk stops,” says Matvey Tsivian, MD, a Duke Urology postdoctoral associate and lead author of the study published online on April 18 in the *Journal of Clinical Oncology*. “And the longer you stop smoking, the better it is.”

Dr. Tsivian and colleagues reviewed the smoking histories of 845 Duke patients who had undergone surgery for kidney cancer from 2000 to 2009. Of those, 164 were current smokers, 246 had quit, and the remaining 435 never took up the habit.

Current and former smokers were more likely than non-smokers to have advanced renal cancer, defined as a tumor that involves the lymph nodes or has otherwise spread.

Advanced malignancies are much more lethal than early-stage renal cancers. Only 8 percent of patients with the most severe form of renal cancer survive five years, according to the American Cancer Society, while five-year survival rates top 70 percent among early stages of kidney cancer.

The Duke researchers found that advanced disease was diagnosed in only 20.2 percent of the nonsmokers in the study group, compared to 28.7 percent of the current smokers, and 29.3 percent of the former smokers—some of whom had been addicted for decades before they quit.

“The actual mechanisms of how smoking may affect cancer growth are unknown,” Dr. Tsivian says. He added that tobacco smoke has long been associated with genetic mutations, inflammation, and cellular damage—all of which fuel cancer growth.

But by quitting, smokers lower their chances of developing severe kidney cancer. The Duke researchers found that every decade spent smoke-free resulted in a 9 percent reduction in the odds of being diagnosed with advanced disease.

“The more durable the cessation is, the more it lowers risk,” says Dr. Tsivian, although quitting doesn’t completely negate harm.

According to Dr. Tsivian, those who quit for at least 20 years have a 22 percent risk of developing advanced kidney cancer, compared to a nonsmoker’s 20 percent risk.

“There is a clear relationship between heavier smoking and the development of advanced renal cell carcinoma,” says Thomas J. Polascik, MD, Professor, Division of Urology and senior author of the study. “The good news is that smoking cessation can revert those risk factors over time. This should provide the public with another reason to quit smoking. It is not too late.”

In addition to Drs. Tsivian and Polascik from Duke, other study authors included Daniel M. Moreira, MD; Jorge R. Caso, MD; and Vladimir Mouraviev, MD, PhD. The research was supported by Duke.

“There is a clear relationship between heavier smoking and the development of advanced renal cell carcinoma. The good news is that smoking cessation can revert those risk factors over time. This should provide the public with another reason to quit smoking. It is not too late.”

—Thomas J. Polascik, MD
Smoking Habits
SMOKING HISTORIES OF 845 DUKE KIDNEY CANCER PATIENTS

- Current Smokers: 164
- Never a Smoker: 435
- Quit Smoking: 246

- Advanced disease diagnosed in 28.7%
- Advanced disease diagnosed in 29.3%
- Advanced disease diagnosed in only 20.2%
**Research Grants: Clinical Trials**

**Basic and Translational Research**

Hardean E. Achneck, MD, Assistant Professor, Division of Surgical Sciences, was awarded a grant from the National Institutes of Health for “Endothelial Progenitor Cell Seeded Self-Expanding Vascular Stent.”

Chin Ho Chen, PhD, Professor, Division of Surgical Sciences, was awarded a grant from the National Institutes of Health for “Betulinic acid derivatives as anti-HIV agents.”

Matthias Gromeier, MD, Associate Professor, Division of Neurosurgery, was awarded a grant from the National Institutes of Health for “Oncolytic virotherapy of meningeal cancer.”

Stephen T. Keir, DPH, MPH, Associate Professor, Division of Neurosurgery, was awarded a grant from Gilead Sciences Inc. for “Rational testing of PI3K inhibitor in brain tumor xenograft model.”

Bruce M. Klitzman, PhD, Associate Professor, Division of Plastic, Maxillofacial, and Oral Surgery, was awarded a grant from Profusa for “Advanced biomaterials as implantable chemical sensors.”

Hui-Wen Lo, PhD, Associate Professor, Division of Surgical Sciences, was awarded a grant from the Beez Foundation for “Understanding molecular pathways that promote angiogenesis of pediatric glioblastoma.”

Bruce A. Sullenger, PhD, Joseph and Dorothy W. Beard Professor of Surgery, Division of Surgical Sciences, was awarded a grant from the National Institutes of Health for “Center for AIDS Research-Improved MVA vaccines against HIV.”

Rebekah R. White, MD, Assistant Professor, Division of Surgical Oncology, was awarded a grant from the National Institutes of Health for “RNA Therapeutics for Pancreatic Cancer.”

**Clinical Trials**

Gerald A. Grant, MD, Associate Professor, Division of Neurosurgery, was awarded a grant from the US Army Medical Research and Material Command for “Randomized controlled trial of galantamine, methylphenidate, and placebo for the treatment of cognitive symptoms in patients with mild traumatic brain injury (mTBI) and/or post-traumatic stress disorder (PTSD): Cognitive Remediation After Trauma Exposure trial.”

Contact: Terry Ainsworth, 919-684-4607

David H. Harpole Jr., MD, Professor, Division of Cardiovascular and Thoracic Surgery, was awarded a grant from Astellas Pharma Global Development Inc. for “An investigation of the incidence and possible prognostic significance of fusion events in NSCLC.”

Contact: Marybeth Moore, 919-681-2249

G. Chad Hughes, MD, Associate Professor, Division of Cardiovascular and Thoracic Surgery, was awarded a grant from Cook Inc. for “Zenith TX2 low-profile TAA endovascular graft clinical study.”

Contact: Dana Giangiacomo, 919-681-1092

Alexander T. Limkakeng Jr., MD, Assistant Professor, Division of Emergency Medicine, was awarded a grant from University of Pittsburgh for “Protocolized care for early septic shock (ProCESS).”

Contact: Debra Freeman, 919-684-5036

Limkakeng was also awarded a grant from Roche Diagnostics for “Clinical performance of Elecsys high-sensitive troponin T in subjects with chest pain.”

Contact: Weiying Drake, 919-613-6543

Randall P. Scheri, MD, Assistant Professor, Division of Surgical Oncology, was awarded a grant from the John Wayne Cancer Institute for “Multicenter selective lymphadenectomy for melanoma trial II: A phase III multicenter randomized trial of sentinel lymphadenectomy and complete lymph node dissection versus sentinel lymphadenectomy alone in cutaneous melanoma patients with molecular or histopathological evidence of metastases in the sentinel node.”

Contact: Grechan Sanders, 919-684-8132

Debra L. Sudan, MD, Professor and Chief, Division of Abdominal Transplant Surgery, was awarded a grant from Life Cycle Pharma for “A phase III double-blind double-dummy multicenter prospective randomized study of the efficacy and safety of LCP-Tacro tablets, once daily, compared to Prograf capsules, twice daily, in combination with mycophenolate mofetil.”

Contact: Chrissy Walters, 919-668-5499

Dennis A. Turner, MD, Professor, Division of Neurosurgery, was awarded a grant from the National Institutes of Health for “Realistic human perception of spatio-temporal thalamic microstimulation.”

Contact: Dennis Turner, MD, 919-684-6706

For an up-to-date listing of Duke Surgery research, visit surgery.duke.edu/research.
HONORS

Francis Ali-Osman, DSc, Margaret Harris and David Silverman Distinguished Professor of Neuro-Oncology and Professor of Surgery, was appointed for a five-year term to serve on the Board of Scientific Advisors of the National Cancer Society.

Heatherlee Bailey, MD, Assistant Professor, Division of Emergency Medicine, was elected to a three-year term on the Council of the Society of Critical Care Medicine (SCCM). The SCCM is a professional organization devoted to the advancement of multi-professional intensive care through excellence in patient care, education, research, and advocacy.

Joshua S. Broder, MD, Associate Professor, Division of Emergency Medicine and editor of the recently published **Diagnostic Imaging for the Emergency Physician**, was awarded the 2011 PROSE Award for Clinical Medicine by the American Publishers Awards for Professional and Scholarly Excellence.

Bryan M. Clary, MD, Associate Professor, Division of Surgical Oncology, was elected as a member into the American Surgical Association (ASA) during the Spring 2011 Apple Awards recognize educators who have excelled and inspired learners in the discovery of knowledge.

Detlev Erdmann, MD, PhD, MHSc, Associate Professor, Division of Plastic, Maxillofacial, and Oral Surgery, was appointed to a two-year term on the Scientific Program Committee at the annual meeting of the Southeastern Society of Plastic and Reconstructive Surgeons.

Raymond M. Esclamado, MD, Richard H. Chaney, Sr. Professor and Chief, Division of Otolaryngology – Head & Neck Surgery, has been appointed to the Board of Directors for the American Board of Otolaryngology (ABO). Dr. Esclamado will serve a 10-year term and will help the Board's mission of assuring that diplomats certified by the ABO to have met the professional standards of training and knowledge in otolaryngology – head and neck surgery.

Brant A. Inman, MD, Assistant Professor, Division of Urology, has accepted a Consulting Editor appointment with European Urology, a prestigious 35-year journal currently read by more than 20,000 urologists around the world.

Danny O. Jacobs, MD, MPH, David C. Sabiston Jr. Professor and Chair, Department of Surgery, has accepted an invitation to join the Editorial Board of *ISRN* (International Scholarly Research Network) *Surgery*. *ISRN Surgery* is a peer-reviewed, open-access journal that publishes original research articles, review articles, and clinical studies in all areas of surgery.

Dr. Jacobs was also recently appointed as a member of the Board of Directors for the *Surgical Section of the National Medical Association*. In addition, he was recently interviewed as a surgery expert for the *New England Journal of Medicine*'s 200th Anniversary Documentary. Dr. Jacobs is highlighted in a 30-minute film discussing changes and challenges in surgery including his viewpoint on the topic of surgery vs. medical therapy.

Dr. Jacobs has also been appointed by Dr. Victor Dzau, Duke Medicine's Chancellor, as Co-Chair of the Program of Distinction Team. The committee's goal is to identify transformative programs that cross disciplines and are at or rapidly approaching a truly unique level with the capacity of delivering superior clinical care that is tightly integrated with cutting-edge research and innovation.

Martha Ann Keels, DDS, PhD, Associate Professor of Surgery and Chief of Pediatric Dentistry at Duke Children's Hospital, was recently awarded the Oral Health Service Award by the American Academy of Pediatrics, which recognizes Dr. Keels as having made significant contributions to the advancement of pediatric oral health through activities within the Academy.

Paul Mosca, MD, PhD, MBA, Associate Professor, Division of Surgical Oncology and Vice Chair of Network General Surgery, was the recent recipient of a “Superhero Award” from the Durham VA Hospital Administration. Dr. Mosca was applauded for going above and beyond the call of duty and for personally saving the lives of two of our veterans.

Judd W. Moul, MD, James H. Semans, MD, Professor of Surgery, Division of Urology, and Director of the Duke Prostate Center, has been reappointed to a second term for the American Joint Committee on Cancer (AJCC). The AJCC is a charitable, scientific, and educational organization which provides worldwide leadership in the development, promotion, and maintenance of evidence-based systems for the classification and management of cancer in collaboration with multidisciplinary organizations dedicated to cancer surveillance and to improving care.

Theodore N. Pappas, MD, Distinguished Professor of Duke Innovative Surgery and Chief, Division of General and Advanced Gastrointestinal Surgery, was presented with the Excellence in Clinical Care Award at the Society of American Gastrointestinal and Endoscopic Surgeons (SAGES) Education and Research Foundation annual meeting.

Cynthia Shortell, MD, Professor and Chief, Division of Vascular Surgery, has been appointed as Chair for the Society for Vascular Surgery's Education Council. Founded in 1947, the organization's mission is to promote, encourage, and improve the dissemination of knowledge concerning all aspects of vascular disease and health. She has also recently accepted an invitation from the *Journal of Vascular Surgery* to be a member of the journal's Editorial Board.

Ranjan Sudan, MD, Associate Professor, Division of Metabolic and Weight Loss Surgery, and Vice Chair of Education for Surgery, was selected as Co-Chair of the Joint Steering Committee for the newly created ACS-ASE Medical Student Core Curriculum Committee. The directive of the committee is to jointly develop and launch a core curriculum for all Duke medical students in the first three years of medical school including the Duke Surgery Clerkship. The curriculum will be offered through the American College of Surgeons' website. Dr. Sudan was also...
The Department of Surgery announces the following new Division Chiefs (additional details can be found on page 2):

**Gregory S. Georgiade, MD**
Division of Plastic, Maxillofacial, and Oral Surgery

**Theodore N. Pappas, MD**
Division of General and Advanced Gastrointestinal Surgery

**Glenn M. Preminger, MD**
Division of Urology Gastrointestinal Surgery

**Joshua Broder, MD**
Associate Professor, Division of Emergency Medicine, has been appointed Program Director for the Emergency Medicine Residency Training Program.

**Jeffrey Lawson, MD, PhD**
Professor, Division of Vascular Surgery, has been appointed Program Director for the Institutional Committee for Graduate Medical Education General Surgery Research Fellowship Program.

**Paul J. Mosca, MD, PhD**
MBA, Associate Professor, Division of Surgical Oncology, has been named Associate Vice Chair of Network General Surgery. He will be responsible for the oversight of the general surgeons based at Duke Raleigh Hospital and Durham Regional Hospital.

**Charles Murphy, MD**
Assistant Professor, Division of General and Advanced Gastrointestinal Surgery, was appointed the Medical Director of Duke Patient Care Units 3100, 3200, and 3300. Dr. Murphy is board certified in thoracic surgery, surgery, and surgical critical care. An accomplished surgeon and critical care specialist, Dr. Murphy is transitioning his clinical responsibilities from Durham Regional Hospital to Duke University Hospital where he will help with the transition to the Duke Medicine Pavilion and expansion of services.

**Cynthia K. Shortell, MD**
Division of Vascular Surgery

**Debra L. Sudan, MD**
Division of Abdominal Transplant Surgery

**Alfonso Torquati, MD**
Metabolic and Weight Loss Surgery

**Georgia D. Tomaras, PhD**
Associate Professor, Division of Surgical Sciences, has been appointed to the National Institute of Allergy and Infectious Diseases (NIAID) Advisory Council for the term of November 2011–October 2015. She will participate in performing second-level reviews, advising the NIAID on policy, reviewing programs, and developing and clearing concepts for PAs, RFAs, and RFPs.

**David C. White, MD**
Assistant Professor, Division of Cardiovascular and Thoracic Surgery, has been selected as an at-large member of Duke Raleigh Hospital’s Medical Executive Committee.

**David L. Witsell, MD**
Professor, Division of Otolaryngology – Head & Neck Surgery, has been selected as the 2012 Jerome C. Goldstein MD Public Service Award by the American Academy of Otolaryngology – Head and Neck Surgery (AAO-HNS). Dr. Witsell was recognized for his dedication, passion, and longstanding commitment to patient-centered research in addition to his extensive contributions to evidence-based patient care in otolaryngology – head and neck surgery in the United States.

**Dana Portenier, MD**
Assistant Professor, Division of Metabolic and Weight Loss Surgery, has been appointed Program Director of the Minimally Invasive and Bariatric Surgery Fellowship Training Program.

**Cary N. Robertson, MD**
Associate Professor, Division of Urology, has been reappointed Practice Director of Duke Urology of Raleigh effective July 1, 2012. He will assist Duke Surgery leadership in developing and implementing policies and procedures for the practice, located on the Duke Raleigh Hospital campus.

**Ranjan Sudan, MD**
Associate Professor, Division of Metabolic and Weight Loss Surgery, has been appointed Medical Director for the Surgical Education Programs (SELP) and Activities Laboratory (SEAL). In this role, Dr. Sudan will lead Duke Surgery’s program activities including lab administration, curriculum development, grant acquisition, and facility support in conjunction with the requirements for maintaining a Level I accreditation status with the American College of Surgeons.
NEW FACULTY

Obinna Adibe, MD
Division of Pediatric General Surgery
Clinical interests include advanced pediatric minimally invasive surgery, neonatal surgery, anorectal malformations, inflammatory bowel disease, prenatal counseling, fetal therapy, and pediatric outcomes research.
919-681-5077

Richard E. Cooper, MD
Division of General Surgery
Duke General Surgery of Alamance County
Clinical interests include thyroid and parathyroid surgery, breast surgery, and hernia surgery.
919-304-1081

Calhoun D. Cunningham III, MD
Division of Otolaryngology-Head and Neck Surgery
Clinical interests include treatment of disorders of the ear in adults and children including skullbase tumors, acoustic neuromas, glomus tumors; surgical and medical management of chronic ear infections, cholesteatoma and eardrum perforations; management of sensorineural and conductive hearing loss including cochlear implantation, BAHA implants, implantable hearing aids, otosclerosis; dizziness and balance disorders; and management of Meniere’s disease.
919-684-3834

Robert Honea, MD
Duke General Surgery of Danville
Clinical interests include basic general surgery – abdominal surgery (especially hernia, gallbladder, colon), breast, skin, and soft tissue.
434-792-5964

Bruce L. Kihlstrom, MD
Division of Neursurgery
Clinical interests include spinal cord neuromodulation, intrathecal baclofen infusion and pump implantation.
919-479-4120

Nandan Lad, MD, PhD
Division of Neursurgery
Clinical interests include movement disorders, deep brain stimulation, medically refractory pain, spinal neurosurgery, peripheral nerve surgery, and general adult neurosurgery.
919-681-4986

Matthew G. Hartwig, MD
Division of Cardiovascular and Thoracic Surgery
Clinical interests include thoracic oncology with an emphasis on minimally invasive approaches to lung and esophageal cancer; video-assisted thoracic surgery (VATS) and robotic-assisted thoracic surgery (RATS); benign and malignant diseases of the lung, esophagus, mediastinum, and chest wall; surgical treatment of end-stage lung disease, including lung volume reduction and lung transplantation; ex vivo lung perfusion; donation after cardiac death; and extracorporeal life support for respiratory failure.

Aaron C. Lentz, MD
Division of Urology
Clinical interests include reconstructive urology with a specific focus on minimally invasive approaches to urethral stricture disease, urinary incontinence, ureteral obstruction, fistula repair, genitourinary trauma, sexual dysfunction, prostate enlargement, and videourodynamic evaluation.
919-862-5600

Catherine A. Lynch, MD
Division of Emergency Medicine
Clinical interests include trauma and injury care and health disparities research in injury and emergency care in both the US and in low and middle income countries.
919-684-5537

Paul J. Mosca, MD, PhD, MBA
Division of Surgical Oncology
Clinical interests include general surgery and surgical oncology with special interest in melanoma, liver and pancreatic tumors, upper and lower gastrointestinal tumors, breast tumors, and skin/soft tissue tumors.
919-660-2244
The Duke Endosurgery Center

The Duke Endosurgery Center is a multidisciplinary center with highly skilled surgeons and state-of-the-art technology dedicated to training surgeons and allied health professionals using the latest surgical techniques and innovative approaches to minimally invasive surgery.

To get more information, visit us at endo.surgery.duke.edu/courses.

UPCOMING CME COURSE

Masters of Minimally Invasive Thoracic Surgery

September 20–22, 2012
Waldorf Astoria Orlando
14200 Bonnet Creek Resort Lane
Orlando, Florida

COURSE DIRECTOR
Thomas D’Amico, MD
Professor of Surgery
Duke University Medical Center
New Acute Care Surgery Service Opens at Duke University Medical Center

The Duke Department of Surgery is pleased to announce the creation of a new Acute Care Surgery Service at Duke University Hospital. The service opened on July 1, 2012.

The Acute Care Surgery Service encompasses trauma, surgical critical care, and emergency general surgery. The service was designed to foster numerous synergies and to benefit patients, Duke University Hospital, and attending physicians of all specialties. The Acute Care Surgery Service will provide a more efficient and timely management of surgical patients, improved continuity of care of in-patient consultations, and increased throughput in the operating room.

Mark L. Shapiro, MD, Associate Professor, Division of Trauma and Critical Care Surgery, has been named the medical director of the newly established service under the direction of Steven N. Vaslef, MD, PhD, Associate Professor and Chief, Division of Trauma and Critical Care Surgery.

For more information on the service, contact Mark Shapiro, MD, at 919-681-9361.
Mission

The Department of Surgery is committed to excellence, innovation, and leadership in meeting the health care needs of the people we serve and fostering the very best medical education and biomedical research.

Vision

As one of the leading national and international academic departments of surgery, we will assemble and integrate a comprehensive range of health care resources providing the very best in patient care, medical education, and clinical research. As the health care providers of choice in the region, we will improve the health of the communities we serve through the development of new and better models of health care. Through careful stewardship of our resources, we will preserve and promote our core missions of outstanding clinical care, discovery research, and improved health for the communities we serve.

Partners in Philanthropy

A gift to the Duke Department of Surgery is a gift of knowledge, discovery, and life. Every dollar is used to further our understanding of surgical medicine, to develop new techniques, technology, and treatments, and to train the surgeons and researchers of the future.

If you would like to make a philanthropic investment in Duke Surgery, visit surgery.duke.edu/gift.

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800-MED-DUKE (for referring physicians)
888-ASK-DUKE (for patients)
surgery.duke.edu