The young woman came into Duke University Medical Center’s Emergency Department (ED), complaining of severe abdominal pain and some vaginal bleeding. It was clear her case was dire.

Another patient arrived with shortness of breath, an irregular heartbeat, and severe fatigue. He said the symptoms were new.

In both cases, physicians could have been relegated to a wait-and-see approach. They might not have had access to the patient’s medical history or one patient could have been unconscious and unable to answer any questions. Getting CT scans or MRIs might have taken too long. Any one of these stumbling blocks would’ve made a quick, accurate diagnosis much more challenging.

But, not at Duke. Duke Surgery recently added an invaluable tool that allows its emergency medicine physicians to provide the best bedside care available in the fastest timeframe possible – the emergency medicine ultrasound program. With these machines in place, Duke is one of the growing number of medical centers using bedside ultrasound to reduce, from hours to minutes, the time of arrival to bedside therapy.

“We’ve made some great patient care catches using bedside ultrasound in the ED,” says Brianne Steele, MD, Assistant Professor, Division of Emergency Medicine, who spearheaded the ultrasound program. “We’ve diagnosed ruptured ectopic pregnancies and several new heart failure cases among others. The impact we’ve made on the patients and on faster diagnosis times because of the scanning has been incredible.”

What Is Duke’s ED Ultrasound Program?

Duke’s Emergency Department patients are the most acutely-ill who enter the hospital, so having a toolkit that can provide rapid assessments is key, Dr. Steele says.

“Ultrasound has really revolutionized the way we make emergent diagnoses of our sickest patients,” Dr. Steele says. “It’s done by the doctor taking care of the patient – that’s especially valuable since radiology studies aren’t always immediately available at the bedside. You know your patient better than anyone else, and it saves a lot of time. We’re able to discover what’s wrong and make a diagnosis within minutes.”

Point-of-care ultrasound has also improved patient safety, Dr. Steele says. Having the machines readily available reduces unintended complications, such as arterial punctures or collapsed lung.

The Duke Surgery ultrasound program is already a few years old, and it recently expanded to include five new ultrasound machines for bedside use, as well as two simulation models that train students and residents. In fact, Dr. Steele says, training workshops are already ongoing for residents from many specialties in the Department of Surgery. There’s also a research project underway to determine whether simulation models – and if so, which one – can properly prepare residents for treating ED patients.

Getting Students and Residents Ready

Many physicians make a strong case for students and residents learning with actual
Welcome to the spring 2015 issue of the Duke Department of Surgery Newsletter. Spring is a predictably great time to be at Duke — flowers are blooming in the Sarah P. Duke Gardens, National Championship banners are being hung in Cameron Indoor Stadium… Indeed, there is a general atmosphere of renewal and accomplishment that is felt at this time of year, and many items stand out for Duke Surgery.

Firstly, I would like to welcome our new Chancellor for Health Affairs, A. Eugene Washington, MD. Dr. Washington’s engagement with the clinical departments during his first few weeks at Duke has been exceptional, making walk rounds to every clinical department on his first day. Thus, I feel confident that superb hands will turn this new page in Duke Medicine’s future.

Two additional arrivals are worth highlighting. The first is the recruitment of Stuart Knechtle, MD, as Executive Director of the Transplant Center. Stuart trained at Duke under Dr. Sabiston, has held leadership roles in transplantation both at the University of Wisconsin and at Emory University, and is widely regarded as an international leader in the field. He joins an exceptional exciting clinical and research team, and with them will be orchestrating the development of transplantation for the Duke University Health System. This relates well to the article highlighting 50 years of transplantation at Duke. Clearly, there is a great past and a bright future.

Next is Susan Schnellfer, MD. Susan comes to us fresh from a fellowship in EHS and Disaster Medicine and SUNY Upstate Medical University, and will assume a critical role in coordinating our integration with the Durham Emergency Medical Services. Her appointment highlights a number of important developments in our Division of Emergency Medicine — to improve our service to the Durham community. The Emergency Medicine Division is also featured in our cover story on the diagnostic and educational developments in bedside ultrasound being driven by Brianne Steele, MD. You will no doubt enjoy reading of the exceptional research advances emerging from Duke Surgery. From Neurosurgery comes a remarkable story (featured this past month scientifically in Nature, first authored by John Sampson, and, journalistically on the television program 60 Minutes) of the development of an oncolytic virus therapy for brain cancer. This is a real success story of the merger of surgical acumen and scientific rigor. Another piece that has attracted considerable lay-interest has been the Duke Early Recovery After Surgery (ERAS) program, led by Dr. Julie Thacker and featured in the Wall Street Journal. In all, there is a lot growing this spring at Duke.

Sincerely,

Stuart trained at Duke under Dr. Sabiston, has held leadership roles in transplantation both at the University of Wisconsin and at Emory University, and is widely regarded as an international leader in the field. He joins an exceptional exciting clinical and research team, and with them will be orchestrating the development of transplantation for the Duke University Health System. This relates well to the article highlighting 50 years of transplantation at Duke. Clearly, there is a great past and a bright future.

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Duke Surgery held a special event on February 21 to celebrate 50 years of organ transplantation at Duke and to honor Del Stickel, MD, the surgeon who performed the first Duke transplant. The evening was marked by comments from many of the Duke surgeons, past and present, who pioneered organ transplants at Duke.

Dr. Stickel, who had recently completed his surgical residency at Duke, performed the first transplant surgery on February 26, 1965. A man received a brother’s kidney to replace his failing one. It was the first organ transplant performed south of Virginia.

“This event allowed us to reflect on the seminal contributions to the field of transplantation made by Duke faculty members and to reaffirm our commitment to a scientific basis for surgical advancement, “ says Allan D. Kirk, MD, PhD, David C. Sabiston, Jr. Professor and Chair, Department of Surgery. “It is important to remind ourselves, on occasion, how our modern practice has evolved, and that it is still in evolution. Duke’s contributions to immunosuppression, histocompatibility testing, and organ sharing all helped transplantation become the practice it is today.”

“Dr. Stickel led our effort in organ transplantation, was head of the service as the transplantation program expanded from kidney into bone marrow and heart, and made many other significant contributions in the field,” says Hilliard F. Seigler, MD, Professor of Surgery. “He was the driving force behind North Carolina passing the Uniform Anatomical Gift Act, which was very important and which established that individuals could donate their organs. He also worked with neurologists and neurosurgeons to redefine the traditional concept of death to include brain death, which also furthered the cause of organ transplantation and led to uniform national and international criteria.”

Duke’s initial successes also grew from the work of D. Bernard Amos, MD, a young British immunologist who had spent the previous seven years at the Roswell Park Memorial Institute in Buffalo investigating the possibility of using the immune system to fight tumors in mice. At Duke, he was to use knowledge gained identifying genetic markers in cancer cells of mice for a completely new enterprise, improving outcomes for kidney transplant patients.

Amos’s contribution to transplantation biology was the identification of a group of genes that came to be known as the major histocompatibility complex (MHC). These genes code for proteins called antigens found on the surface of cells that determine how the immune system will respond. Since the MHC contains more than 50 genes, the more matches between a donor and recipient, the better. Dr. Amos died in 2003.

Through the decades since 1965 Duke Surgery has continued to play a prominent role in organ transplantation. Drs. Seigler, Stickel, and Amos worked with the Medical College of Virginia in Richmond to establish the first organ-sharing program to help ensure that suitable organs were available in timely fashion to transplantation sites that needed them. The program worked well, growing from six area institutions into a network spanning the South and ultimately into UNOS, the national organ-sharing program.

“That was a very important step in ensuring that no organs suitable for transplantation went to waste,” says Dr. Seigler.

Gertrude Elion, a research professor at Duke who also had an appointment at the drug company Glaxo, developed the first immuno-suppressive drug, which was in use for many years and allowed transplantation to move forward. She also developed many other important drugs for illnesses including leukemia, gout, and malaria. Her work won her a Nobel Prize in 1988.

“She was a dynamo,” says Dr. Seigler. “She gave real prominence to the Medical Center.”

Since that pioneering kidney transplant, Duke has earned a well-established reputation as one of the nation’s top transplant centers, delivering care to hundreds of adults and children each year. Duke’s survival rates among organ transplant recipients rank among the best in the United States.
Bewildered after GBM diagnosis

Nancy Justice of Valdosta, Georgia, had just started taking classes in preparation for heading back to work when she began having trouble concentrating and reading. On a Friday in June, 2012, a CT scan revealed a tumorous mass growing on her brain. “We were bewildered,” says her husband Greg, about learning the news.

After undergoing surgery to remove what was later diagnosed as an aggressive glioblastoma multiforme (GBM), Justice went through radiation and chemotherapy. During that time, she says, “I started hearing from friends who knew somebody who had been diagnosed with a GBM. All three people from different areas of the country had ended up at Duke. They were doing great. I told my husband, ‘we need to get to Duke.’”

With a referral from her local oncologist, Justice contacted neuro-oncologist Henry Friedman, MD, Professor, Division of Neurosurgery and Deputy Director of the Duke Preston Robert Tisch Brain Tumor Center. “I gave him the low-down,” Justice recalls. “He says, ‘you’re in.’ I’ve since learned he’s that bottom-line kinda guy. Duke became my primary cancer doctors, and I went there every two months. They told my local oncologist what to do.”

Bad news becomes good news

Justice learned her tumor had grown back after a routine MRI in September 2014. It’s a day she’ll never forget.

When the MRI came back bad, Justice recalled the Duke doctors saying, “that’s the bad news, but here’s the good news.”

Justice learned she was a candidate for a clinical trial testing an infusion of the modified poliovirus. Matthias Gromeier, MD, Associate Professor, Division of Neurosurgery, pioneered the investigational approach. He found that the poliovirus could kill cancer cells while leaving healthy cells unharmed.

“I was ecstatic,” Justice says of hearing news about the poliovirus therapy and her eligibility to participate in the clinical trial.

The power of hope

Justice says the hope the doctors gave her that day remains indescribable.

“Each one of them was so positive. I can’t tell you what the hope they gave me meant to me. It was huge to have each of them tell me they had my back. It went from being a horrible 24 hours to the best news I could get.”

Doing great

Justice received the one-time modified polio infusion in late October. Five months later, her tumor looks like it has been punched full of holes, indicating that the therapy is working to attack and eradicate it.

“I still have some hiccups with my speech, but I’m doing great,” Justice says who plans to return to work as a technical writer very soon. “That’s what I’m shooting for.”

For more information visit the Preston Robert Tisch Brain Tumor Center at cancer.duke.edu/btc.
New Duke-UNC Collaboration Applies Cystic Fibrosis Therapies to Heart Disease

Given sufficient time, many forms of cardiovascular disease turn into heart failure, our nation’s number one killer. The disease affects six million Americans and costs a whopping $39 billion a year. Despite intense efforts to discover new heart medications, none of the current therapies have been able to halt its relentless progression.

As a result, researchers have begun looking to other diseases for inspiration. Cystic fibrosis, for instance, is experiencing a golden age of drug development. Several new drugs are in the pipeline to correct specific disease-causing defects in the cystic fibrosis transmembrane regulator (CFTR), a protein needed to keep airways hydrated. These advances are so noteworthy that President Obama even mentioned them in his recent State of the Union address, saying “in some patients with cystic fibrosis, this approach has reversed a disease once thought unstoppable.”

These drugs have the potential to alleviate conditions other than cystic fibrosis because their target is present not only in the lungs, but also other tissues and organs. Recently, Duke cardiovascular researcher Dawn Bowles, PhD, Assistant Professor, Division of Surgical Sciences and University of North Carolina at Chapel Hill (UNC) cystic fibrosis researcher Martina Gentzsch, PhD, Assistant Professor, Department of Cell Biology and Physiology, received a $50,000 grant to explore the feasibility of repurposing CFTR drugs for the treatment of cardiovascular disease. The award is part of an effort by the neighboring CTSA to combine resources and expertise to tackle problems that impact human health.

As director of the CFTR Correction Core within the Marsico Lung Institute at UNC, Dr. Gentzsch has spent years studying how defects in the CFTR protein can cause the lungs to clog up with thick, sticky mucus that is prone to infection. CFTR is an ion channel, a type of molecular expressway that allows tiny chloride ions to move across the surface of the lungs. Mutations in the CFTR gene either block the chloride highway or lock it deep inside the cells, resulting in an imbalance of salt and water that dehydrates the airways. Understanding the mechanisms of this dysfunction has enabled the development of new therapies that specifically target these genetic defects to either open up the channel or push it to the surface.

“CFTR is so well studied in the airways that we can start thinking about how defects in the protein might affect other organs, such as the heart,” says Dr. Gentzsch. “There is suspicion that the protein normally plays a protective role in the heart, but more evidence is required.”

So when Dr. Bowles asked to borrow some antibodies, specific reagents that can be used to measure the levels of the CFTR protein in heart tissues, Dr. Gentzsch gladly handed them over. Dr. Bowles co-directs the Duke Human Heart Repository, one of the largest heart repositories in the United States and home to 500 hearts and 40,000 specimens of heart tissue. Using the antibodies from UNC, she found that the CFTR protein was significantly diminished in tissues from heart failure patients as compared to healthy individuals.

“Essentially, we discovered that this protein is somehow disrupted in failing hearts,” says Dr. Bowles. “Now the question is can we reverse that defect, and is it even important in the disease process? We want to determine whether we modulate it with existing CFTR drugs, or if we have to design different drugs to target different aspects of the protein.”

The CFTR protein might behave completely different in the heart than in the lungs. Drs. Bowles and Gentzsch will use the grant to perform a number of molecular studies to investigate whether specific changes in the CFTR gene and protein are associated with cardiovascular disease and heart failure. The researchers will also conduct a number of biochemical and electrophysiological experiments on human heart cells and tissues to determine how the CFTR channel functions in the framework of the cardiovascular system, particularly after treatment with CFTR therapies.

“I think that our research will give us a better understanding of the biology of this molecule in the context of the human heart,” says Dr. Bowles. “We hope to collect the preliminary data needed to study the role of CFTR in heart disease in pre-clinical models. Ultimately, the therapies that stem from this and similar efforts could make a significant impact in the treatment of cardiovascular disease and heart failure.”

The new team of Drs. Bowles and Gentzsch are one of four to recently receive collaborative grants from the North Carolina Translational and Clinical Sciences (NC TraCS) Institute and the Duke University Translational Medicine Institute (DTMI). The awards place the researchers in an enriched environment across specialties, institutes, the health system, and university.

UNC cystic fibrosis expert Martina Gentzsch (left) and Duke cardiovascular researcher Dawn Bowles examine a preserved heart in the Duke Human Heart Repository.

Duke Surgical Center for Outcomes Research

WHO: Health services and outcomes researchers working together to conduct research in world class facilities shaping patient care

WHAT: Centralized resources including meeting and work space; easy access to large administrative and clinical databases, software, and hardware; methodologic, statistical, and administrative support for online and in-person sessions geared to trainees with clinical and methodologic faculty feedback; support for research presentations and professional development

HOW: Transdisciplinary research and mentorship teams growing knowledge and collaborative opportunities in an enriched environment across specialties, institutes, the health system, and university

Core Faculty
Julie Ann Sosa, MD, MA
Director, Health Services Research
Leila Mureebe, MD, MPH
Vascular Surgery
Chuck Scales, MD, MSHS
Otolaryngology – Head and Neck Surgery
Betty Tong, MD, MHS
Cardiovascular and Thoracic Surgery
David L. Witsell, MD
Otolaryngology – Head and Neck Surgery

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Basic and Translational Research
Carlos A. Bagley, MD, Associate Professor, Division of Neurosurgery, was awarded a grant from Medtronic, Inc. for “Extent of Resection and Spinal Stabilization and Reconstruction in Spinal Tumors.”
Linda C. Cendales, MD, Associate Professor, Division of Plastic, Maxillofacial, and Oral Surgery, was awarded a grant from Emory University for “Allotransplantation Research Program.”
Eun-Sil S. Hwang, MD, Professor, Division of Advanced Oncologic and GI Surgery, was awarded a grant from the Department of Defense for “Genomic Diversity and the Microenvironment as Drivers of Progression in DCIS.”
Stephen T. Keir, DrPh, Associate Professor, Division of Neurosurgery, was awarded a grant from Pediatric Brain Tumor Foundation for “Establishment and Maintenance of Pediatric Cancer Stem Cell Lines and Xenografts.”
Allan D. Kirk, MD, PhD, Professor and Chair, Department of Surgery, was awarded a grant from Bristol-Myers Squibb for “CD20+CD19+ B cells in Belatacept-resistant Renal Allograft Rejection.” Dr. Kirk was also awarded a grant from Benaroya Research Institute at Virginia Mason for “ITN056 ST Optimal Co-Chair Protocol.”
James Koh, PhD, Assistant Professor, Division of Surgical Sciences, was awarded a grant from the National Institutes of Health for “Single cell analysis of intratumoral heterogeneity in parathyroid neoplasia.”
Herbert K. Lyeah, MD, Professor, Division of Surgical Sciences, was awarded a grant from the Department of Defense for “A Molecular Framework for Understanding DCIS.”
Carmelo A. Milano, MD, Professor, Division of Cardiovascular and Thoracic Surgery, was awarded a grant from Mount Sinai School of Medicine for “for Safety & Efficacy of Intramyocardial Injection of Mesenchymal Precursor Cells on Myocardial Function in LVAD Recipients.”
Robert D. Pearlestein, PhD, Assistant Professor, Division of Neurosurgery, was awarded a grant from Loma Linda University for “Radiation Medicine Central Nervous System Studies Phase II.”
John H. Sampson, MD, PhD, Professor and Chief, Division of Neurosurgery, was awarded a grant from the Pediatric Brain Tumor Foundation for “PBIT Institute Grant.”
John Wiener, MD, Professor, Division of Urology, was awarded grants from Centers for Disease Control and Prevention for “National Spina Bifida Patient Registry and Urologic Management of Young Children with Spina Bifida - Duke Project” and Urologic Management to Preserve Renal Function Protocol - Duke Project.
He Xu, MD, Assistant Professor, Division of Surgical Sciences, was awarded a grant from Roche Organ Transplantation Research Foundation for “Differentiation Influence of Belatacept/Kapamycin Maintenance Immunosuppression on Allo- and Viral-Specific Memory Cell Rats.”
Clinical Trials
Matthew G. Hartwig, MD, Assistant Professor, Division of Cardiovascular and Thoracic Surgery, was awarded a grant from the University of Pennsylvania for “Prospective Registry of Outcomes in Patients Electing Lung Transplantation.”
Jeffrey H. Lawson, MD, HCMS, PhD, Professor, Division of Vascular Surgery, was awarded a grant from Humacyte, Inc. for “What Are the Health Economics of Vascular Access Creation and Management.”
Alexander Limkakeng, Jr, MD, Associate Professor, Division of Emergency Medicine, was awarded a grant from Abbott Industries for “Abbott Stress-Delta Biomarkers for ACS Risk Stratification.” Dr. Limkakeng was also awarded a grant from Siemens AG for “Assessment of Clinical Performance of Troponin Assays.”
Carmelo A. Milano, MD, Professor, Division of Cardiovascular and Thoracic Surgery, was awarded a grant from Tanax Therapeutics, Inc. for “Study of Lacosamide in Patients with Left Ventricular Systolic Dysfunction.” Dr. Milano was also awarded a grant from Heartware, Inc. for “Clinical Study to evaluate the thoracotomy implant technique.”
Erin Piker, PhD, Medical Instructor, Division of Otolaryngology – Head and Neck Surgery, was awarded a grant from Med El for “Vestibular Function Study.”
Dana D. Portenier, MD, Assistant Professor, Division of Metabolic and Weight Loss Surgery, was awarded a grant from Cerebral Ltd. for “Single-arm study of the Stomach, Intestinal and Pylorus Sparing procedure.”
Debra L. Sudan, MD, Professor and Chief, Division of Abdominal Transplant Surgery, was awarded a grant from Bristol-Myers Squibb Co. for “Evaluation of Acute Rejection Rates in de novo Renal Transplant Recipients.”
For an up-to-date listing of Duke Surgery research, visit surgery.duke.edu/research.

Surgery Research Grant Activity
Dr. Kirk was also awarded a grant from Benaroya Research Institute at Virginia Mason for “ITN056 ST Optimal Co-Chair Protocol.”

New Faculty
Stuart Knechtle, MD
Division of Abdominal Transplant Surgery
Clinical interests include adults and children who need surgery of the liver and biliary tract, liver vascular surgery, or kidney transplantation. Research to reduce the risk of rejection of organ transplants is also a focus.
919-684-8716

Susan Schroffler, MD
Division of Emergency Medicine
Clinical interests include prehospital and disaster medicine with a specific focus on mobile integrated healthcare-community paramedicine, event medicine, and International EHS Development.
919-684-5537

Julia Kravchenko, MD, PhD
Division of Surgical Sciences
Research interest include Medicare, Medicare-linked, and clinical data-based analyses of disease risks and treatment effectiveness, analysis of the role of comorbidities in cancer treatment choice and patients’ survival, and patient-oriented prognosis of cancer progression and patients’ survival, the role of environmental exposures, behavioral risks, and access to medical care in geographic disparities in disease risk, mortality, and life expectancy; cancer epidemiology and population-based biologically motivated models of carcinogenesis.
919-684-6809

Jean Kuesen, DVM, PhD
Division of Abdominal Transplant Surgery
Research interests include humoral tolerance to organ transplants in animal models and humans, developing a clinically relevant animal model to study the mechanisms of antibody-mediated rejection (AMR), and establishing a conceptual basis that will translate into therapeutic intervention of AMR.
919-681-5022

FACULTY PROMOTIONS
Scott T. Hollenbeck, MD
Division of Plastic, Maxillofacial, and Oral Surgery
was promoted to Associate Professor

Dan G. Blazer III, MD
Division of Advanced Oncologic and Gastrointestinal Surgery
was promoted to Associate Professor

Thomas L. Novick, MD
Division of Advanced Oncologic and GI Surgery
Clinical interests include minimally invasive surgery, emergent general surgery, hernia repair, and gallsbladder disease.
919-660-2282

Jeff Vista, MD
Division of Emergency Medicine
Clinical interests include emergency medicine and urgent care.
919-373-1800

Jun Wang, MD, PhD
Division of Plastic, Maxillofacial, and Oral Surgery
Interests include training in microsurgery techniques and research in transplantation.
919-660-7114

John Yi, PhD
Division of Surgical Sciences
Research interests include comprehensive immune profiling to identify biomarkers/immune signatures that predict disease outcomes in transplantation, autoimmune diseases, and viral infections. Other interests include the characterization of T cell exhaustion in viral infections and cancer.
919-684-4846

Scott T. Hollenbeck, MD
Division of Plastic, Maxillofacial, and Oral Surgery
was promoted to Associate Professor

John Migaly, MD
Division of Advanced Oncologic and Gastrointestinal Surgery
was promoted to Associate Professor

Michael E. Lipkin, MD
Division of Urology
was promoted to Associate Professor

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**New Duke University Chancellor for Health Affairs**

A. Eugene Washington, MD, became Duke University’s new Chancellor for Health Affairs and President and Chief Executive Officer of the Duke University Health System on April 1, 2015. Washington comes to Duke from the University of California at Los Angeles (UCLA), where he served as Vice Chancellor for Health Sciences, Dean of the David Geffen School of Medicine, and Chief Executive officer of the UCLA Health System, as well as a Distinguished Professor of gynecology and health policy.

**Duke Hospitals Earn Top Performer Status for Third Consecutive Year**

Duke University Hospital, Duke Regional Hospital, and Duke Raleigh Hospital have earned top recognition for outstanding patient care in 2013 from The Joint Commission, the leading accreditor of health care organizations in the U.S. Each of the three Duke University Health System hospitals has been named a “Top Performer on Key Quality Measures” in the areas of heart attack, heart failure, pneumonia and surgical care.

The designation is based on accountability measures that show patients are treated using evidence-based methods that increase their chances of healthy outcomes, and that the hospitals continue to improve patient care each year. Duke University, Duke Regional, and Duke Raleigh hospitals are three of 1,224 hospitals in the country to earn the 2013 “Top Performer” distinction, and among just 314 hospitals to be top scores for hospital safety from The Leapfrog Group, an independent national nonprofit organization run by employers and other large purchasers of health benefits.

The Joint Commission announced the honors as part of its 2014 annual report. The award honors a faculty member who displays both a dedication to compassionate patient care and excellence in the teaching and mentoring of young physicians.

**Duke University Health System Hospitals Maintain Top Patient Safety Scores**

Duke University Hospital, Duke Regional Hospital, and Duke Raleigh Hospital have earned top scores for hospital safety from The Leapfrog Group, an independent national nonprofit organization run by employers and other large purchasers of health benefits. Washington comes to Duke from the University of California at Los Angeles (UCLA), where he served as Vice Chancellor for Health Sciences, Dean of the David Geffen School of Medicine, and Chief Executive officer of the UCLA Health System, as well as a Distinguished Professor of gynecology and health policy.

The “A” scores are part of the group’s Hospital Safety Score, which issues letter grades to hospitals every six months. The three hospitals in the Duke University Health System have all earned and maintained the highest score since fall 2012. The Leapfrog Group’s Hospital Safety Score grades hospitals on a scale of “A” to “F” based on their overall performance in keeping patients safe from preventable medical errors, injuries, accidents and infections. The Hospital Safety Score is compiled under the guidance of patient safety experts and is designed to inform patients about facilities when faced with hospitalization.

To produce a single score representing a hospital’s safety performance, The Leapfrog Group’s rating system uses 28 measures of publicly available hospital safety data, including data from the Agency for Healthcare Research and Quality, the Centers for Disease Control and Prevention, the Centers for Medicare and Medicaid Services, The Leapfrog Hospital Survey and the American Hospital Association’s annual survey.

More than 2,500 U.S. hospitals were assigned scores in fall 2014, with approximately 31 percent receiving an “A” grade. Comparisons of hospital scores locally and nationally are available at www.hospitalsafetyscore.org.

**DUKE SURGERY HONORS**

Julie K. Thacker, MD, Assistant Professor, Division of Advanced Oncologic and GI Surgery, was interviewed by the Wall Street Journal and appeared in the March 2015 publication in an article entitled “Patients Bounce Back Faster from Surgery with Hospital’s New Protocol.” Dr. Thacker is the Medical Director for the Enhanced Recovery After Surgery Program (ERAS) at Duke. ERAS is a standardized approach to surgical care which allows for a faster recovery time for colorectal patients as well as reducing hospital stays and costs.

Alexander C. Allori, MD, Assistant Professor, Division of Plastic, Maxillofacial, and Oral Surgery, was the featured researcher in the March issue of Plastic Surgery News.

Linda C. Candales, MD, Associate Professor, Division of Plastic, Maxillofacial, and Oral Surgery, was appointed as an American Society of Transplant Surgeons representative to the American Transplant Congress Planning Committee.

The Duke Weight Loss Team—Alfonso Torquati, MD; Dana Portenier, MD; Ranjan Sud, MD; and Philip Ometoshi, MD, traveled to Shanghai, China last fall as part of a partnership with Shanghai Pudong Hospital. The Duke Surgeons were helping Chinese surgeons introduce surgery for diabetics as an option for patients with type-2 diabetes. They also were faculty at the 2014 East-Sea International Forum on Metabolic Surgery and the 2nd Duke University Shanghai Pudong Masters of Minimally Invasive Bariatric Surgery Conference where they taught the principles and most recent innovations in metabolic and bariatric surgery.

Steve B. Bowers, MD, Associate Professor, Division of Cardiothoracic Surgery, and Chief of Thoracic Surgery, has agreed to serve as the Society of Thoracic Surgeons representative on the VEITH Symposium vascular meeting in the world.

**DUKE News and HonorS**

The Duke Weight Loss Team—Alfonso Torquati, MD; Dana Portenier, MD; Ranjan Sud, MD; and Philip Ometoshi, MD, traveled to Shanghai, China last fall as part of a partnership with Shanghai Pudong Hospital. The Duke Surgeons were helping Chinese surgeons introduce surgery for diabetics as an option for patients with type-2 diabetes. They also were faculty at the 2014 East-Sea International Forum on Metabolic Surgery and the 2nd Duke University Shanghai Pudong Masters of Minimally Invasive Bariatric Surgery Conference where they taught the principles and most recent innovations in metabolic and bariatric surgery.

Detlev Erdman, MD, PhD, Associate Professor, Division of Plastic, Maxillofacial, and Oral Surgery, was elected to Active Membership in the American Association for Hand Surgery.

Stephanie A. Eucker, MD, PhD, Assistant Professor, Division of Emergency Medicine, was named Senior reviewer for the Annals of Emergency Medicine. This elite status is great reflection of her hard work and dedication to academic emergency medicine.

**HONORS :: AWARDS :: ACCOMPLISHMENTS**

Sandhya Lagoo-Deenadayalan, MD, PhD, Associate Professor, Division of Advanced Oncologic and GI Surgery, along with Mitch Helfin, MD, Associate Professor, Department of Medicine, have received a three-year award from the Office of Academic Affiliations for creating a Safety Care Center of Excellence at the Durham VA Medical Center. This is a new initiative for care of high risk surgical patients and is modeled after an ongoing program at Duke – the POSH Program. This multidisciplinary clinic will manage elderly patients throughout the perioperative period and will engage Surgery, Geriatric Medicine, Anesthesiology, Psychology, Physical Medicine and Rehabilitation, Nursing, Pharmacy, and Social Work, as well as offering a multidisciplinary educational platform for Duke trainees.

Carmelo A. Milano, MD, Professor, Division of Cardiovascular and Thoracic Surgery and Surgical Director for Duke’s Heart Transplant and LVAD program, was named one of the Triangle Business Journal’s 2015 Health Care Heroes.

Theodore Pappas, MD, Professor and Chief, Division of Advanced Oncologic and GI Surgery, received the 2015 Leonard Palumbo Jr., MD Faculty Achievement Award. The award honors a faculty member who displays both a dedication to compassionate patient care and excellence in the teaching and mentoring of young physicians.

Glenn M. Preminger, MD, James F. Glenn, MD Professor and Chief, Division of Urology, received the 2015 Robert C. Flanigan Education Award from the American Urological Association.

Cynthia K. Shortell, MD, Professor and Chief, Division of Vascular Surgery, has agreed to serve as the Society of Vascular Surgery representative on the VEITH Symposium Scientific Committee. The VEITH meeting is the largest vascular meeting in the world.

Julie A. Soza, MD, Professor, Division of Advanced Oncologic and GI Surgery, was appointed Deputy Editor of JAMA-Surgery. JAMA Surgery (formerly Archives of Surgery) began publication in 1920. It is an international peer-reviewed journal published online every Wednesday with complete issues published 12 times a year.

**Duke Weight Loss Team—Alfonso Torquati, MD; Dana Portenier, MD; Ranjan Sud, MD; and Philip Ometoshi, MD, traveled to Shanghai, China last fall as part of a partnership with Shanghai Pudong Hospital. The Duke Surgeons were helping Chinese surgeons introduce surgery for diabetics as an option for patients with type-2 diabetes.**
**HONORS :: AWARDS :: ACCOMPLISHMENTS**

**HONORS**

**Debra L. Sudan, MD**, Professor and Chief, Division of Abdominal Surgery, had her manuscript, “Predictors of Enteral Autonomy in Pediatric Intestinal Failure: A Multicenter Cohort Study,” accepted for publication in *The Journal of Pediatrics*.

**Bruce A. Sullenger, PhD**, Joseph W. and Dorothy W. Board Professor, Division of Surgical Sciences, became a Fellow of the American Association for the Advancement of Science. Dr. Sullenger was recognized for his contributions to the field of translational medicine and research including the development of RNA aptamers as controllable ways to prevent blood clotting.

**Lisa Tolnitch, MD**, Clinical Associate, Division of Otolaryngology – Head and Neck Surgery, received the Sisters Inspiring Sisters award as well as the Living Legacy award for her dedication to community service and for compassionate patient care and support she provides.

**Eileen Raynor, MD**, Assistant Professor, Division of Otolaryngology – Head and Neck Surgery, was elected to the Duke Academic Council for a two year term. As an elected member of Duke’s university-wide faculty governance body, Dr. Raynor will have the opportunity to provide input on major decisions that impact the University.

**Peter K. Smith, MD**, Professor and Chief, Division of Cardiovascular and Thoracic Surgery, has been appointed as Chair of the AMA/Relative Value System Update Committee also known as the RUC. The RUC is a 31 member AMA committee with 300 specialty society advisors that develop recommendations for the relative value of all CPT codes, which are widely adopted by CMS and most private and public payers. It develops recommendations for all new CPT codes as well as periodic refinements for the more than 8,000 codes that comprise the physician fee schedule. The RUC is the primary vehicle for organized medicine’s communication with CMS regarding payment policy issues and proposed rule-making. In his new role, Dr. Smith will interact on behalf of the AMA with CMS, the Medicare Payment Advisory Committee (MedPAC), and members of Congress. Dr. Smith is charged to serve as a strong, unifying, national voice for all physicians, health care providers, and patients.

**Philip J. Walther, PhD**, Professor, Division of Urology, was nominated to serve on the National Surgery Office’s Urology Surgical Advisory Board.

**Rebekah R. White, MD**, Associate Professor, Division of Advanced Oncologic and GI Surgery and John Scarborough, MD, Associate Professor, Division of Trauma and Critical Care, were elected to the Southern Surgical Association.

**Blake S. Wilson, BSEE**, Adjunct Professor, Division of Otolaryngology – Head and Neck Surgery, was awarded the 2015 Russ Prize from the National Academy of Engineering (NAE) for his pioneering work in “engineering cochlear implants that enable the deaf to hear.” Wilson shares the award with global collaborators Graeme Clark, Ingeborg J. Hochmair-Desoyer, Michael Meridith and Erwin S. Hochmair, who together have profoundly impacted the lives of hundreds of thousands of hearing-impaired adults and children worldwide. The Russ Prize is given every two years for bioengineering achievements that significantly improve the human condition. It is one of the three highest honors bestowed by the NAE and is considered the top prize in the world for bioengineering.

**Sabiston Surgical Society to Meet**

The next meeting of the David C. Sabiston Surgical Society will be held July 10-12, 2015, in Durham, North Carolina. There will be an opportunity for members to tour the operating rooms, including those in the new Duke Medical Pavilion, observe cases, and meet current faculty and residents. A Scientific Program featuring speakers from Members of the Society will also be included and will focus on extraordinary experiences and achievements outside of Durham. The meeting will be directed by the current Sabiston Surgical Society President, Thomas A. D’Amico, MD. Gilly Froh Professor of Surgery, Division of Cardiovascular and Thoracic Surgery.

For more information and registering, please contact Peg Grossman at peg.grossman@duke.edu.

Duke Surgery Education Summit

Duke Surgery education leaders and key institutional officials gathered in February for an educational summit. The goals of the summit were to develop an understanding of the current state of the educational program, discuss the needs of the educators and the trainees, and develop priorities to elevate Duke Surgery’s programs to the highest standards. More than 80 educators and trainees attended the summit.

The Department of Surgery offers nine programs recognized by the Accreditation Council for Graduate Medical Education (ACGME) with a total of 157 trainees and 11 non-ACGME programs that train 34 trainees and educate around 100 medical students. Duke Surgery is also dedicated to advancing the practice of surgery through Continuing Medical Education (CME).

The Department’s commitment to education supports an administrative infrastructure that provides resources and funding for state-of-the-art training tools and initiatives. As part of the training program, trainees use the Surgical Education and Activities Lab – a state-of-the-art simulation center designed to provide advanced and innovative training in a risk-free environment.

Ranjian Sudinan, MD, Associate Professor of Surgery and Vice Chair of Education states, “Our training programs provide each physician the highest level of education and training as they prepare to become tomorrow’s medical leaders.”

For additional information on Duke Surgery’s educational programs, contact Dr. Sudan at 919-470-7000 or visit surgery.duke.edu/education.
Mission

Through sustainable, multidisciplinary teams Duke Surgery will:

• Provide insight regarding the fundamental nature of patient health and disease
• Empower all patients, trainees, and colleagues with knowledge
• Provide safe and high quality care based on an advanced understanding of and respect for our patients’ needs and guided by best practices

Vision

Duke Surgery: United for all Patients

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.

For Duke Surgery appointments, call:
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