Heart Transplant Program Offers a New Lease on Life

Russell Cerminara is not someone you would readily identify as a patient in a hospital, let alone someone on the heart donor list. Casually dressed and exceedingly well groomed, he lounges comfortably in the waiting area outside his room on the 5th floor of the Gibbon Building – the Cardiac Unit – at Jefferson University Hospital. If it weren’t for the IV stand, and the small black Jansport backpack that holds a device pumping his heart, you’d never know he’d spent the last decade battling a life-threatening heart condition and been in the hospital since April.

Every bit the image of a successful television producer, Mr. Cerminara takes calls on his blackberry when not doing physical therapy or interacting with other patients and family members. He’s working to gain enough strength to go home while he waits for a heart, which could be a while given his O blood type.

Medicare Certified...the highest quality indicator for a transplant program, based on the number of transplants and clinical outcomes

On May 24, 2007, he received a Jarvik 2000® Heart Assist System while he waits for a donor heart.

Thanks to Jefferson surgeons, television producer Russ Cerminara now benefits from a portable Jarvik 2000® Heart Assist System while he waits for a donor heart.

In this issue

CLINICAL INTEGRATION
Comprehensive Breast Program Sets Trend

CHANGING LIVES
THROUGH RESEARCH
More Veggies, Less Breast Cancer - Page 3

ON THE JOB
Meet Lara Allan Goldstein
Page 3

Published by Jefferson Digital Commons, 2007
Women who visit Jefferson-Honickman Breast Imaging enjoy personalized, state-of-the-art care that is tailored to the unique issues and concerns of their particular age group.

Comprehensive Breast Program Continues to Set the Trend

Jefferson continues to set the trend in breast care with the opening of Jefferson-Honickman Breast Imaging, located on the 4th floor at 1100 Walnut Street, in January 2007. This is the first phase of a three phase facility project that will provide our patients with the most advanced expertise and technology as well as personalized patient care in a warm and comfortable environment.

The remaining phases of the Jefferson Breast Care project include breast screening, an MRI and a center for clinical, educational and support services.

With the growth of a comprehensive breast care program, Jefferson Surgeons continue to be at the forefront of care. The surgical practices of Drs. Gordon Schwartz, MD, MBA, Anne Rosenberg, MD, and Kristin Brill, MD are dedicated to breast surgery. Several general surgeons also specialize in breast surgery including Adam Berger, MD, Karen Chojnacki, MD, Melvin Mosen MD, Remadette Frenuta, MD, and Gary Rosato, MD.

Dr. Brill explains that we are planning the new Jefferson Breast Care Facility to create an easy, stress-free experience for patients. “The program emphasizes communication between patient and doctor, but also among surgeons, radiologists, nurses, technologists, and other healthcare providers,” she says. “The art of what we do is to reassure women that treatment can be customized to suit their particular situation, lifestyle, and stage of life.”

Thanks to the skills of our plastic surgeons, James Fox, MD, John H. Moore MD, Stephen Copit, MD, and Gary Tuma, MD, Jefferson leads national trends relating to mastectomy and reconstruction, including LAT Flap (Latissimus Dorsi Myocutaneous Flap) reconstructions. “LAT Flaps” can be much easier for women to live with than the more traditional TRAM Flap reconstruction that requires taking skin, muscle and fat from the abdomen. Nationally, 30 to 35 percent of women have breast reconstruction immediately following a mastectomy. Jefferson’s rate for patients over the age of 65 is even higher than that. “We show no age bias,” says Dr. Brill, “and equally encourage our older and younger patients to take advantage of the excellent team of plastic surgeons.”

Jefferson surgeons are educators and leaders in the field. Dr. Schwartz organizes a highly respected biennial international breast cancer Consensus Conference. “We do this to bring together the best experts to discuss and debate a chosen topic and ensure that the latest treatments are available to patients worldwide,” explains Dr. Schwartz. The Jefferson program also offers one of only 30 breast surgery fellowships across the country. Visit www.jeffersonhospital.org/breast for more information.

Overview

Women who visit Jefferson-Honickman Breast Imaging enjoy personalized, state-of-the-art care that is tailored to the unique issues and concerns of their particular age group.

Clinical Integration

Thanks to the skills of our plastic surgeons, James Fox, MD, John H. Moore MD, Stephen Copit, MD, and Gary Tuma, MD, Jefferson leads national trends relating to mastectomy and reconstruction, including LAT Flap (Latissimus Dorsi Myocutaneous Flap) reconstructions. “LAT Flaps” can be much easier for women to live with than the more traditional TRAM Flap reconstruction that requires taking skin, muscle and fat from the abdomen. Nationally, 30 to 35 percent of women have breast reconstruction immediately following a mastectomy. Jefferson’s rate for patients over the age of 65 is even higher than that. “We show no age bias,” says Dr. Brill, “and equally encourage our older and younger patients to take advantage of the excellent team of plastic surgeons.”

Jefferson surgeons are educators and leaders in the field. Dr. Schwartz organizes a highly respected biennial international breast cancer Consensus Conference. “We do this to bring together the best experts to discuss and debate a chosen topic and ensure that the latest treatments are available to patients worldwide,” explains Dr. Schwartz. The Jefferson program also offers one of only 30 breast surgery fellowships across the country. Visit www.jeffersonhospital.org/breast for more information.

MEET OUR SURGICAL INTERNS

Jefferson surgeons are currently assisted by an exceptional group of categorical interns. These doctors, who recently matched with Jefferson, started on June 20, 2007 (shown left to right):

Allison Goldberg, MD; Albert Einstein College of Medicine; Adam Boden, MD; Boston University School of Medicine; Joshua Marke, MD, Jefferson Medical College; Annie Bues, MD, Dartmouth Medical School; Chandan Kunduwaran, MD, University of Arizona College of Medicine; Vanessa Tabott, MD, George Washington University School of Medicine.

We are also pleased to welcome back the following Jefferson graduates as preliminary interns: James Etzioni, MD and Roman Politi, MD in General Surgery, Rohan Chitale, MD in Neurosurgery and Daniel Sackett, MD in Urology.
Dr. Susan Lanza-Jacoby and her team lead groundbreaking studies on the links between dietary elements and breast tumors.

**More Veggies, Less Breast Cancer: Unlocking One Secret to Prevention**

We all know that eating a balanced diet is good for us. Susan Lanza-Jacoby, PhD, the Principal Investigator of the Cancer Biology and Nutrition Laboratory in the Department of Surgery, is taking this conventional wisdom to new scientific heights. She investigates molecular abnormalities involved in the development of breast cancer and aims to identify novel strategies using food components for prevention and treatment. “We’re striving to show how dietary supplements can slow down — or even stop — the incidence of breast cancer, and also improve the effectiveness of chemotherapy,” Dr. Jacoby explains, “so that a woman can take lower doses and also minimize the side effects.”

Learning how to prevent or treat tumors in the human breast requires working in her lab with “transgenic” mice — those with compromised immune systems that receive implanted tumor cells. The mice are made to overexpress a cancer-causing gene (HER-2/neu), which inevitably results in them developing mammary tumors. (This is the laboratory equivalent of being genetically predisposed to getting breast cancer.)

“Breast tumors that overexpress this gene are aggressive,” says Dr. Jacoby. “They account for between 20 and 25 percent of all breast cancer in women, and do not respond well to standard treatments, which results in a poor prognosis for the patient.”

Her research suggests that a number of dietary factors can have cancer-fighting properties. Diindolylmethane (DIM) is a component of certain vegetables, called cruciferous (such as broccoli, cauliflower, cabbage, and Brussels sprouts), and members of Dr. Jacoby’s lab have been observing that it can decrease growth and even kill breast cancer cells that result from overexpression of the HER-2/neu gene.

She explains that mice fed our Western diets took about 6 to 7 months to develop breast tumors, whereas when they fed DIM to the transgenic mice, it took over a year to develop the tumors. “This is a significant delay,” she explains, “Consider the potential for helping genetically predisposed adolescent girls delay the onset of cancer until well into their 50s or 60s.”

Dr. Jacoby is also investigating how to develop combined therapies that will prevent the development of breast tumors. A multitargeted approach based on the characteristics of the individual tumor has provided more effective prevention and treatment. “We measured the growth of tumors in the mice, and when we used a combination of the DIM supplement and doxetaxel, a chemotherapeutic another agent, there was a significantly slower rate of tumor growth.” She is also finding that a COX-2 inhibitor, used in combination with other agents, can prevent the incidence of breast tumors altogether.

In July Dr. Jacoby was awarded a research grant from the Pennsylvania Department of Health to continue her study of the role of the ErbB and COX-2 signaling pathway in HER-2 breast cancer. Thanks to a grant from the U.S. Department of Agriculture, she is developing a teaching module about the role of nutrition and cancer prevention, which will mean her exciting findings to date will have a direct path into patients’ lives.

**Lara Allan Goldstein**

Lara Allan Goldstein is the Director of Development for the Department of Surgery. A Jefferson employee since 2003, she joined the department in November 2006. Previously, she served as the Director of Regional Giving for the Jefferson Foundation.

How do you define your role?

I meet with patients, families, and friends of the Department and help to find a match between what they want to support and what the various divisions and physicians need to make their programs most successful, whether it’s to expand programs, pursue innovative research, or enhance patient care.

What do you like about your position?

I enjoy working with individuals who are so committed to Jefferson and want to make a difference by giving back in some way. It’s exciting to learn from the patients and their families about the great impact our Jefferson staff and surgeons have had on their lives.

What’s a common misconception about development?

I’m not sure people realize there are many different ways to give, beyond an outright cash gift. Appreciated stock, real estate, and bequests are options, as well as charitable gift annuities and charitable trusts, which provide income during a donor’s lifetime. Congress has provided a temporary opportunity for those 70 years of age to make a gift directly from their IRA. These can be attractive options for a donor who may want to earn income, reduce capital gains or estate taxes, or provide for their heirs.

What is most satisfying about the work you do?

It’s gratifying to see how pleased the donors are when they see the difference their generosity makes. It’s great to help facilitate a process that strengthens the Department in achieving its mission.

For an appointment with a Jefferson Surgeon, call 1-800-JEFF-NOW
In Gratitude for Exceptional Care

Anna Hotz, a Medford, NJ, native, has made a gift to the Jefferson Breast Care Center in honor of her doctors Anne Rosenberg, MD, and Stephen Copit, MD. The commitment became a family affair when her son Jack, Steven, and Chuck matched her contribution with winnings from a Cape May, NJ, fishing tournament in April 2006.

Mrs. Hotz is grateful for the excellent care she received and the personal relationships she developed with her physicians.

"Dr. Rosenberg, for all of her accolades and reputation in the field of breast cancer, is a very regular, low-key person," says Mrs. Hotz. "And Dr. Copit is very passionate with his patients and about his practice. He treated me like one of my own sons would treat me."

The Hotz family gift supports the new Jefferson Breast Care Center, where patients can receive information, counseling, and other support throughout their care in one location.

To make a gift to the Department of Surgery, please contact Lara Allan Goldstein at 215-955-8797 or Lara.AllanGoldstein@Jefferson.edu.

Making a Difference One Donation at a Time

Not all gifts to Jefferson Surgery come from a single philanthropic individual. Sylvia Berman, of Marblehead, Massachusetts, is working tirelessly to encourage others to make a difference. Her daughter, Susan Sillars, has been a patient of Charles J. Yeo, MD, for many months now, having been diagnosed with pancreatic cancer. Tragically, Mrs. Berman was already familiar with the disease, which claimed the life of her husband 14 years ago.

Last March, Dr. Yeo removed a portion of Susan’s tumor so that it could be studied as part of the progressive research being done by Jonathan Brody, PhD. His laboratory has run countless assays on DNA purified from her cancer cells in search of identifying a genetic defect. Such studies will lay the ground work for tailored adjuvant therapy for pancreatic cancer patients.

During this difficult time, Mrs. Berman has taken it upon herself to raise funds to support Dr. Brody’s research. So far she has raised over $32,000. "Because of this support, we have been able to scrutinize Mrs. Sillars’ tumor on the molecular level. Our hope is that this information will aid her family and other pancreatic cancer patients," says Dr. Brody.

"The information that is out there can be overwhelming, and finding a surgical team who saw things differently and could offer us a new alternative has been profoundly helpful," says Mrs. Berman. "It’s inspiring to see that our network of family and friends has offered so much kindness and compassion as well as financial support. It goes to show that combining the generosity of many — no matter how small the amounts — can make a big difference."

To make a contribution to the Susan Sillars Fund for Pancreatic Cancer Research, please visit http://www.jefferson.edu/surgery/giving.cfm.

Glenn Whitman, MD has joined the Department of Surgery’s Divisions of Acute Care Surgery and Cardiothoracic Surgery. He comes to Jefferson from Temple University where he served as Associate Hospital Director of Perioperative Services and Director of Transplantation. Dr. Whitman will head Jefferson’s Surgical Cardiac Care Unit.

Pankaj Patel, MD (JMC Class of 1991), has joined the Division of Acute Care Surgery. Dr. Patel is returning to Jefferson from Penn State College of Medicine. He specializes in Trauma and Surgical Critical Care.

Vincent Armenti, MD, PhD (JMC Class of 1982), has returned from Temple University to teach and continue his work as Principal Investigator of the National Transplantation Pregnancy Registry which he founded at Jefferson in 1991. He holds a primary appointment in the Department of Pathology, Anatomy and Cell Biology.

Paul DiMuzio, MD has been named Director of the Division of Vascular Surgery and the Measey Professor of Surgery.

Cataldo Deria, MD, PhD has been named Director of the Division of Transplant Surgery.

Thomas Tulenko, PhD Director of the Division of Surgical Research, received the Dean’s Citation for Outstanding Faculty Mentoring and was also recently awarded Diplomate status with the Accreditation Council for Clinical Lipidology.

Gerald Isenberg, MD has been named an Honorary Fellow of the Puerto Rico Chapter of the American College of Surgeons.

Kate Vindin a first year JMC student, has been awarded a national one-year Student Research Fellowship by the American Vascular Association. Her project, “Differentiation of Amniotic Fluid Stem Cells”, will proceed under the direction of Dr. Paul DiMuzio.