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JEFFERSON Surgical Solutions

A publication for
friends and
colleagues of
Jefferson's Department
of Surgery

May/June 2006

Volume 1, Number 1

Eleanor Nadolski: Renewed Appetite for Life

When you can't eat my husband Joe's cooking, you know there's something really wrong with you!"

Eleanor Nadolski of Northeast Philadelphia looked forward to coming home from her job at an area bank to dinner prepared by her retired husband. But in October 1996, she started feeling a little pain, which she ignored, hoping it would go away. Her appetite diminished as the pain grew progressively worse and fear settled in. When, in January 1997, she finally got the courage to see a doctor, she learned she had colon cancer.

Intuitively, Eleanor felt a teaching hospital would be the best place for treatment. Her gynecologist referred her to Thomas Jefferson University Hospital, where she underwent a colonoscopy, CAT scan and MRI, revealing that her cancer had spread to both lobes of her liver.

The turning point came when Eleanor met Scott Goldstein, MD, Director of Jefferson's Division of Colorectal Surgery. Because Eleanor, at age 64, was otherwise in excellent health, Dr. Goldstein decided upon a then-unconventional surgical approach in collaboration with Ernest Rosato, MD, Director of the Division of General Surgery. This involved excising the tumors from Eleanor's colorectal area, followed by cryoablation, or freezing, of the cancerous lesions in her liver.



Colon cancer survivor Eleanor Nadolski has been cancer-free for more than eight years.

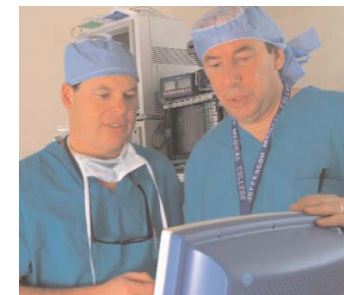
Eleanor was impressed with Dr. Goldstein's compassion as well as his professionalism. "He was so kind to me and gentle with me. He didn't even know me, yet he took me under his wing and made me feel so comfortable!"

"I can't stop telling everyone exactly what Jefferson did for me."

Following pre-operative chemotherapy and radiation therapy, Eleanor underwent the procedure on February 21, 1997. It took several hours and required a temporary colostomy, and was followed by 13 days of inpatient recuperation and six months of

postoperative chemotherapy and checkups until September 29, 1997, when Dr. Goldstein officially pronounced her cancer-free. Eleanor has remained so ever since.

Now retired, Eleanor enjoys sharing the cooking with Joseph, as well as their excursions to Atlantic City and time with their grandchildren. Her three adult sons, Joe, Tom and Kevin, each of whom she has referred to Dr. Goldstein for screenings, have participated with her in a radio spot for Jefferson. "I can't stop telling everyone exactly what Jefferson did for me," she says. "My family and I hope it inspires other people to seek treatment promptly if they feel pain."



The Surgeons Speak

Eleanor was the first patient at Jefferson – and among the nation's first – to benefit from the application of cryoablation technology in conjunction with resection. She had Stage IV cancer; her primary, colorectal cancer had spread into both halves of her liver. That was ordinarily considered an inoperable, incurable situation. But because she was an otherwise healthy 64-year-old woman, we took an aggressive approach.

First, we performed a partial proctectomy. After removing a large portion of her rectum, we focused on several lesions in her liver. We excised the smaller ones near the surface; we killed the larger, deeper tumors by freezing them. It took several hours, during which we very carefully managed Eleanor's fluids and body temperature.

This procedure demonstrated that new technologies like cryoablation and radiofrequency ablation could help patients whose disease may not fit the classic models for standard resection. Since Eleanor, we have performed it successfully on several other patients.

- **Scott D. Goldstein, MD**, (shown right) and **Ernest L. Rosato, MD**

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 **Jefferson**
University and Hospital

Overview



CHARLES J. YEO, MD
Samuel D. Gross Professor and
Chair, Department of Surgery

I'm energized to be leading Jefferson's outstanding Department of Surgery. Moving forward, my vision includes:

- Nurturing a culture of continuous clinical excellence through team building, selected recruitments and Centers of Excellence for various clinical programs
- Increasing scholarly output, facilitated by the electronic medical records system, implementation of critical pathways and our department Web master
- Organizing a clinical research center to improve our clinical database capabilities, beginning with implementation of the American College of Surgeons' National Surgical Quality Improvement Program
- Fostering improved basic science and translational research by taking advantage of Jefferson's Center for Translational Medicine and the Kimmel Cancer Center at Jefferson, facilitated by Tom Tulenko, PhD, being named Director of our new Division of Surgical Research
- Enhancing residents' education and learning environment
- Maintaining high-quality medical student teaching and mentoring, with additional support for a surgical skills laboratory
- Creating a regional and national network to improve patient outreach, education and fundraising through collaboration with the Jefferson Foundation and regular publication of this newsletter.

Clinical integration



Dr. DiMuzio and residents Lauren Fischer, MD, and Negar Golesorkhi, MD, prepare the detergent that removes foreign cells from blood vessels donated for grafting.

Building a Better Bypass Graft

Jefferson vascular surgeon obtains three research grants.

Vascular surgeon Paul DiMuzio, MD, FACS, Assistant Professor of Surgery and Radiology, Jefferson Medical College (JMC) of Thomas Jefferson University, has been awarded grants from the National Institutes of Health (NIH), American Vascular Association and American Heart Association totaling \$975,000. These funds will further his team's research to use tissue engineering and stem cell technology to develop a novel bypass graft for patients who lack autogenous tissues for vascular procedures such as coronary and peripheral artery bypass and hemodialysis access.

"Today, the gold standard for creating these grafts is using the patient's saphenous vein or another artery," Dr. DiMuzio says. "When those are unavailable because they are diseased, too small or have been previously used for surgery, the current alternative is plastic grafts, which typically clog up quickly. Our goal is to create a new, readily available graft starting with saphenous vein taken from tissue transplantation donors."

Recipients may reject blood vessel transplants; Dr. DiMuzio, however, has developed a novel two-step process to get around this problem. First, the foreign cells

are removed from the donated blood vessels, leaving a "skeleton" of the vessel that has a much-reduced chance of rejection. Second, this skeleton is repopulated with the patient's own cells to form the new graft. Dr. DiMuzio and his team are now conducting in vitro and in vivo studies – the latter using animals – to develop methods of using the patient's own stem cells for this purpose.

"Ultimately, over the next several years, our work is designed to translate into

clinical use, primarily as a hemodialysis conduit," Dr. DiMuzio explains. "With success in this area, we hope to expand our work to cardiac, peripheral and microsurgical reconstructions."

"Our goal is to create a new, readily available graft starting with saphenous vein taken from tissue transplantation."

Dr. DiMuzio's collaborators include his JMC mentors, Thomas N. Tulenko, PhD, Professor, Department of Surgery, Biochemistry and Molecular Pharmacology, and Director, Division of Surgical Research, and Irving Shapiro, PhD, Professor of Orthopedic Surgery. In turn, he is mentoring several Jefferson residents and students assisting him.

Dr. DiMuzio received a mentored five-year/\$500,000 grant from the NIH's National Heart, Lung and Blood Institute, a five-year/\$375,000 grant from the American Vascular Association, and a two-year/\$100,000 grant from the American Heart Association, all beginning this year, concurrent with the final year of a three-year/\$150,000 grant from Pacific Vascular Research Foundation.

Please welcome



MEET OUR SURGICAL INTERNS

The staff of the Department of Surgery at Jefferson is currently assisted by an exceptional group of interns. Pictured left to right, they are:

Hamid Abdollahi, MD, Jefferson Medical College (JMC), Class of 2005; **Lisa Harris, MD**, State University of New York (SUNY) Downstate Medical Center, Brooklyn, Class of 2005; **Matthew Rosen, MD**, JMC, Class

of 2005; **Jennifer Sullivan, MD**, University of Maryland, College Park, Class of 2005; **Nikolai Bildzukewicz, MD**, JMC, Class of 2001 (followed by military service as a flight surgeon in the United States Navy); and **Daniel Lefebvre, MD**, SUNY Upstate Medical University, Syracuse, Class of 2005. We are proud to have them as an integral part of our team.

Changing Lives Through Research

Thomas N. Tulenko, PhD, left, shown conferring with transplant surgeon Cataldo Doria, MD, regularly participates in Grand Rounds and keeps up to date clinically. “The era of the stand-alone scientist is dwindling; applicable research now requires clinicians and scientists to work hand in hand.”

Coming of Age: Surgical Research Gains Division, Preps for Expansion

One of Dr. Charles J. Yeo’s first initiatives as the new Samuel D. Gross Professor and Chair of Surgery was to establish a Division of Surgical Research and to appoint Thomas N. Tulenko, PhD, Professor of Surgery, Biochemistry and Molecular Pharmacology, Jefferson Medical College of Thomas Jefferson University, as Director. Along with Dr. Tulenko, the new division is composed of researchers Susan Lanza-Jacoby, PhD, Professor of Surgery; Yi Shi, MD, PhD, Research Associate Professor of Medicine; and Hwyda Arafat, MD, PhD, Assistant Professor of Surgery and Pathology, Anatomy and Cell Biology, as well as vascular surgeon Paul DiMuzio, MD, FACS, Assistant Professor of Surgery and Radiology, who is currently devoting most of his time to surgical research.

“We’re looking forward to improved communication and more collaborative efforts between surgeons and researchers.”

“All of us were already conducting funded research at Jefferson,” Dr. Tulenko says, “but now, as a division, we also have a voice in

establishing the direction of the department. As Director, I sit on the executive committee that advises on department policy, and can bring matters up to the committee on behalf of the research staff. This also puts us in better touch, through other division directors, with the clinical surgeons. We’re looking forward to improved communication and more collaborative efforts between surgeons and researchers as a result.”

Surgical research at Jefferson falls into three broad areas: cardiovascular, diabetes and cancer. As for specific research currently in progress, Dr. DiMuzio is developing designer blood vessels for arterial grafting (see article on page 2 of this issue of *Jefferson Surgical Solutions*). Along with work in vascular disease and cardiac disease, Dr. Tulenko is conducting a National Institutes of Health-funded study of Smith-Lemi-Opitz Syndrome, a fetal metabolic disease that causes multiple birth defects. Dr. Shi’s research centers on atherosclerosis, Dr. Arafat’s largely on pancreatic biology, and Dr. Lanza-Jacoby’s on breast cancer; the latter two scientists are also conducting research in the area of pancreatic cancer.

Speaking of which, Dr. Yeo’s arrival at

Patricia Kal Sauter, RN, MSN, ACNP, NCTMB, Gastrointestinal Surgery, Department of Surgery

Since graduating from the University of Maryland School of Nursing, Pat Sauter had worked at the Johns Hopkins Hospital in Baltimore –the last 15 years with Charles J. Yeo, MD, whom she accompanied when he was appointed in 2005 as the Samuel D. Gross Professor and Chair of Surgery at Jefferson Medical College of Thomas Jefferson University and at Thomas Jefferson University Hospital. She works four days a week and spends the others on her farm near York, Pennsylvania, with children Kate, age 14, and Jack, 11.

Describe your work with Dr. Yeo.

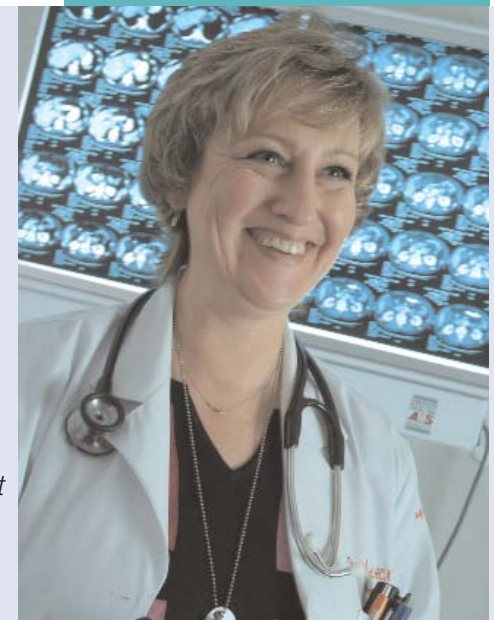
I assist Dr. Yeo with his clinical practice. We treat patients primarily with hepatobiliary and pancreas cancers. We hope to continue some of the clinical research projects we worked on at Johns Hopkins.

Any other responsibilities?

Nationwide networking and collaborative research are significant portions of my job. I also do quite a lot of teaching, to patients, families and staff, and precept students from the nurse practitioner program.

Jefferson has also paved the way for expanded research in pancreatic cancer, his primary area of interest. “He’s putting together an exciting multidisciplinary research team, involving both clinical and basic research,” Dr. Tulenko reports. “One component of this program will be development of better surgical protocols. But a larger part will focus on the genetics of the disease to develop effective screening of patients with an eye toward slowing or even preventing pancreatic cancer.”

Dr. Tulenko is confident that the blended research between basic scientists and clinicians that characterizes both the new

On the job

What are your impressions of Jefferson?

Everyone is incredibly friendly and helpful. We have a very talented house staff and a bright, intelligent nursing staff. They are fundamental to the department’s development.

Such as?

I’d like Jefferson to develop centers of excellence using a collaborative, multidisciplinary approach. We’re now using the National Comprehensive Cancer Network’s Category 1 concept of multidisciplinary practice. It’s highly evidence-based and requires uniform consensus so therapies are safe and patient outcomes are efficient, traceable and cost effective.

Division of Surgical Research and pancreatic cancer research program will further strengthen Jefferson’s competitive position for obtaining grants and attracting talent (the department hopes to recruit at least two new researchers in the near future). “As a world-class surgeon, Dr. Yeo will bring a lot of attention and resources to Jefferson. His influence, as well as the recent establishment of the Center for Translational Medicine and the recruitment of Dr. (Richard) Pestell as Director of the Kimmel Cancer Center, make this an exciting time for researchers at Jefferson.”

Honoring Dr. Herbert Cohn



Mae Gelb, center, with her nephew, Dr. Herbert Cohn, and his wife, Natalie.

Herb was waiting for me when the ambulance arrived, and I had my surgery almost immediately. Herb observed as Dr. Rosato performed the procedure. Both of them were wonderful.”

In January 1994, Mrs. Gelb was able to resume her active schedule of charitable and civic work. She has made generous donations to organizations ranging from Hadassah to Jefferson, through the Gelb Foundation, founded by her late husband, attorney Morris B. Gelb.

“Morris emigrated from Hungary to the United States in 1912, when he was 8 years old,” Mrs. Gelb says. “Although his family was poor, he worked hard and graduated in 1929 from the University of Pennsylvania Law School. He couldn’t wait to pay back the world for his good fortune.”

Now overseen by Mrs. Gelb’s daughters and sons-in-law, Sondra and Morey Myers and Beverly and Jerry Klein, the Gelb Foundation donated generously to the Department of Surgery’s Herbert E. Cohn, MD, Residents’ Library for the purchase of computers and educational materials, as well as to the Jefferson Breast Care Center, out of gratitude for the care Mrs. Gelb received as well as family pride in Dr. Cohn.

“So many physicians I know have been taught by Herb, and so many people I know have been helped by him,” Mrs. Gelb declares. “He’s a fine, charming man with a big heart!”

To make a gift to the Department of Surgery, please contact Diane Calder at **215-955-4126** or Diane.Calder@Jefferson.edu

On March 28, Mae Gelb of Scranton, Pennsylvania, celebrated her 100th birthday with close friends and family, including her nephew, Herbert E. Cohn, MD, Anthony Narducci Professor and Vice Chair of Surgery, Jefferson. Mrs. Gelb’s life has been nearly as healthy as it is long. Aside from giving birth, her only experience as an inpatient was when, in October

“So many physicians I know have been taught by Herb.”

1993, at Thomas Jefferson University Hospital, she underwent a major operation performed by then-Samuel D. Gross Professor and Chair of Surgery Francis E. Rosato, MD, with moral support from Dr. Cohn.

“Although I didn’t have cancer, I felt quite ill,” Mrs. Gelb recalls. “My doctor in Scranton – who Herb had once taught – contacted Herb, who said, ‘Get her down to Jefferson by ambulance tomorrow morning!’ I was frightened out of my wits, but

Jefferson’s Department of Surgery has been accepted to participate in the American College of Surgeons’ National Surgical Quality Improvement Program (NSQIP). The lead surgeon for this initiative is **Herbert E. Cohn, MD**. Developed by the United States Department of Veteran Affairs, NSQIP is one of the first outcomes-based, risk-adjusted, peer-controlled programs designed to measure and enhance the quality of surgical care. The program collects data on 133 variables, including preoperative risk factors, intraoperative variables and 30-day mortality and morbidity outcomes data – the latter entered by **Kathleen Hartman, RN, BSN**, the department’s new Surgical Clinical Nurse Reviewer. It will enable Jefferson to compare outcomes and risk profiles with those of other medical centers and with national averages.

Surgical Oncologist **Eugene P. Kennedy, MD**, has joined the Department of Surgery and been named Assistant Professor of Surgery, Jefferson Medical College of Thomas Jefferson University. Dr. Kennedy previously served at Louisiana State University Health Sciences Center, New Orleans, and Johns Hopkins. He specializes in gastrointestinal disorders.



Eugene P. Kennedy, MD

- Thomas Jefferson University Hospital has received a three-year approval with commendation for its cancer program from the American College of Surgeons Commission on Cancer, its highest possible recognition. The Commission on Cancer approval is based on factors such as the ability to provide comprehensive state-of-the-art services and equipment, a multidisciplinary, team approach for the coordination of cancer care, and a cancer data management system, or cancer registry.
- Visit www.JeffersonHospital.org/surgery/news for a list of recent publications by members of Jefferson’s Department of Surgery.

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