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Liver transplant patient Colonel Darnell Waun is entering retirement in excellent health and declares that the difference in his life is “his gift to Jefferson.”

Former air force surgeon major Darnell Waun was referred to Jefferson for liver transplant surgery by oncologist Edith Mitchell, MD (a former reservist), who referred him here for treatment of Primary Sclerosing Cholangitis (PSC). Col. Waun’s transplant was performed by Dr. David Rittenhouse, MD, and Andrew deMichele, MD. Dr. Rosato recently completed a fellowship in laparoscopic surgery at the Hospital of the University of Pennsylvania. He specializes in minimally invasive surgery.

Dr. Francis E. Rosato Jr., MD, has a long and distinguished career at Jefferson. He was the Samuel D. Gross Professor and Chair of Surgery from 1978 through 2000. His career at Jefferson spanned his namesake, Francis E. Rosato Jr., MD, joined the faculty in August. The daughter of a general practitioner, Dr. Rosato’s father was a general practitioner who ran his practice out of the family house. Dr. Rosato recalls spending patients on a day-to-day basis as a child. “I appreciated how happy and fulfilled my father seemed to be,” he says. Dr. Rosato has had the benefit of seeing the growth of the Division of General Surgery and his own practice.

“...I wasn’t surprised that they followed me into medicine as well.”

Although Dr. Rosato stepped down as chair in 2000, he continues to serve as the school’s chief to the office at 11th and Walnut. He is renowned for his loose philosophy: having received a gift, you repay it within your lifetime. His son, Ernest (Gary) L. Rosato, MD, is currently Jefferson’s Director of the Division of General Surgery and his namesake. Dr. Rosato’s father was a general practitioner who ran his practice out of the family house. Dr. Rosato recalls spending patients on a day-to-day basis as a child. “I appreciated how happy and fulfilled my father seemed to be,” he says. Dr. Rosato has had the benefit of seeing the growth of the Division of General Surgery and his own practice.

A Legacy of Leadership: Dr. Francis E. Rosato Sr.

Dr. Francis E. Rosato Sr., MD, has had a long and distinguished career at Jefferson. He was the Samuel D. Gross Professor and Chair of Surgery from 1978 through 2000. He was also a professor at Thomas Jefferson Medical College, a medical school that is now part of Jefferson University.

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## Trends in Plastic and Reconstructive Surgery

As a teaching hospital, Jefferson benefits from being on the cutting edge of the latest techniques and technologies, including in the area of plastic and reconstructive surgery. 

Jefferson Professor John H. Moore, Jr., MD, explains that part of the Jefferson philosophy is to encourage research among the novices, as surgeons need to understand increasing complex and effective technologies that drive the body’s own tissues.

"With breast implants, for example, we were doing a 20-flap procedure, using tissue from the abdominal wall," Dr. Moore explains. "Now we have combined to carry a latissimus dorsi flap (from the back), which seems to: 1) ease under with fewer complications and 2) provide for better results.

Moore says Jefferson residents and college students are now volunteering for more than 200 clinical trials as part of a 10-year study directed by the Department of Surgery evaluating the safety of this new procedure.

The use of stem cells is another trend that has began to slow considerable prominent, as the cells can be grown into bone, cartilage and fat in any desired shape. However, natural tissues do not cause the localized scarring that can be associated with saline and silicone implants, although the use is currently experimental. For reconstructive surgery, stem cell tissue maintains its shape and size more efficiently than conventional soft tissue implants.

"If we are training the next generation of surgeons to be even better," Jefferson alumni, conducted research on the ability to propagate stem cells into soft tissues such as bone, cartilage and muscle. Both are now surgical fellows at Harvard.

Further research in this same continuous at Jefferson under the direction of Dr. Moore’s young colleagues Gary Tye, MD. "We hope to design a method to develop tissues engineered to form dermal skin cells for soft tissue augmentation,” says Dr. Tye. While more research is needed, he hopes for healing that will allow tissue to form a new engineered skin at Jefferson in early 2007.

Moore points out the benefits of the diverse research interests of Jefferson’s Plastic Surgery faculty. “We are training the next generation of surgeons to be even better,” he says, “and are always striving for a new standard of excellence.”

## Visualizing New Possibilities in Vascular Surgery

A recent article in the Journal of Vascular Surgery by Dr. John Moore stresses the importance of refining surgical techniques and encouraging the research endeavors of young surgeons.

At Jefferson, vascular surgery patients are currently being assessed using the cutting edge of the latest techniques and technologies, including the area of plastic and reconstructive surgery. Moore Professor John Lombardi, MD, explains that part of the Jefferson philosophy is to encourage research among the novices, as surgeons need to understand increasing complex and effective technologies that drive the body’s own tissues.

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"This technology is critical to the planning of all aortic reconstructions done in the entire practice," he says. "The program makes it possible for patients with aortic disease to be thoroughly evaluated for all minimally invasive options and advanced clinical trials. Patients that are not eligible for such therapies can have a traditional surgical approach.

"Patients today are so savvy that many want access to doctors’ most recent published articles and their research endeavors," Jennifer observes, "We’re striving to create online resources that address a wide spectrum of needs." Keep an eye on [www.jeffersonhospital.org/surgery](http://www.jeffersonhospital.org/surgery) to see the results.

"We are training the next generation of surgeons to be even better."
As a teaching hospital, Jefferson benefits from being on the cutting edge of the latest techniques and technologies, including in the area of plastic and reconstructive surgery. Clinical Professor, John H. Mooney Jr., MD, explains that part of the Jefferson philosophy is to encourage research among the residents, as surgeries were once viewed as the most interesting and effective techniques that open up the body’s own tissues.

“I never trained with this technique,” he says, “so we have an opportunity to study a patient’s disease and develop new techniques.”

The use of stem cells is another trend that Jefferson benefits from being on the cutting edge of. This technique has been used in the treatment of peripheral arterial disease patients. Since completing a vascular fellowship in 2003 at the University of Pennsylvania, Dr. Lombardi has been practicing at Jefferson, focusing on endovascular and grafting procedures. This new and exciting field is called endovascular surgery, in which surgery is performed through catheters and wires within the bloodstream. The results, which open up the wall of the diseased vessel, are comparable to open vascular grafting—dirtier than used to make a new path for blood flow—placed inside a diseased vessel without traditional open surgery. This minimally invasive approach allows most patients to go home the same day.

Dr. Lombardi’s research interest involves diseases of the aorta. Aortic aneurysms can occur in the chest and/or abdomen, where a "bulge" develops in the aorta. Although they are rare, they can be fatal if they rupture. Thoracic aortic disease is a sudden and unexpected event where the wall of the aorta is disrupted, allowing blood to flow into the pericardial space. The mortality rate is still about 50 percent. This new procedure offers many benefits without having to open the aorta itself.

“Eighty percent of the surgery is done at this stage. Patients that are eligible for such therapies can have a traditional surgical approach. The procedures are becoming so sophisticated that detailed imaging and measurements are imperative to operative success.”

“Jefferson surgeons are currently available by an appointment of surgical interventionalists. The interventionalists are pictured with the original Gross operating table and portrait of Dr. John H. Gibbon Jr. These doctors, who recently completed a Jefferson residency, started on July 1, 2006 (l to r):

Jason Comeau, MD, Jefferson Medical College; Alex Arriaga, MD, Cornell University Medical College; Galen Fernandez, MD, University of Miami School of Medicine; Robert Ackerman, MD, SUNY Downstate Medical School; Nathan Nishidate, MD, University of Utah School of Medicine; David Kittleson, Jefferson Medical College. We are also pleased to welcome Jefferson graduates, Peter Anversa, MD, Avi Goldman, MD and Melissa Louis, MD as preliminary general surgery interns.

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Visualizing New Possibilities in Vascular Surgery

A recent study conducted by Dr. Joseph Lombardi, MD, highlights the potential of stem cells in the treatment of aortic aneurysms. Since completing a vascular fellowship in 2003 at the University of Pennsylvania, Dr. Lombardi has been practicing at Jefferson, focusing on endovascular and grafting procedures. This new and exciting field is called endovascular surgery, in which surgery is performed through catheters and wires within the bloodstream. The results, which open up the wall of the diseased vessel, are comparable to open vascular grafting—dirtier than used to make a new path for blood flow—placed inside a diseased vessel without traditional open surgery. This minimally invasive approach allows most patients to go home the same day.

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Joseph Lombardi, MD, prepares for an endovascular procedure using a 3D computer model of the patient’s anatomy. A custom model is generated for each patient using CT and MRI scans.

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Col. Darnell Waun’s Second Chance at Life

Colonel Darnell Waun has been a critical care nurse for all 24 years of his career in the Air Force Nursing Corps, but only after a 2005 liver transplant at Jefferson has he fully experienced life, as he says, “as both sides of the bed.”

In 1998, while serving as Commander of the 86th Medical Operation Squadron and Chief Nurse at Kunsan Air Force Base, Korea, Col. Waun was diagnosed with Primary Sclerosing Cholangitis (PSC). This disease, which causes the bile ducts to narrow through inflammation and scarring, progressively evolving into a 7- to 10-year life expectancy. After undergoing a partial liver resection, Col. Waun enjoyed many years of relative good health, even flying with the Air Force Air Vac Unit until 2005.

In June 2004, Col. Waun was stationed at Dover Air Force Base (AFB) in Delaware—an assignment that he highlights as his proudest moment, as a vital role in the nation’s mortuary affairs. Upon completion of his tour in 2005, Col. Waun returned to active duty at the Air Force Air Vac Unit.

On October 29th, 2005, the Colonel was admitted to Jefferson Medical College Hospital for a liver resection. Col. Waun was discharged within 16 days and back at work on January 3, 2006, as the Commander of the 946th Medical Group at Dover AFB. He has since communicated with the donor’s family, who has experienced both sides of transplant surgery. The donor’s brother had received a heart transplant.

Dr. Rosato explains, “because there may be no end date. Your life revolves around staying close to the transplant center.” He grew sicker, ultimately having to sleep leaning over the couch so the abdomen would not fill with fluid.

At 48, Col. Waun enjoyed many years of relative good health, even flying with the Air Force Air Vac Unit until 2005. “The waiting is the hardest part,” he says, “but I also was aware that this could be my last procedure.”

On October 29th, 2005, the Colonel learned he was the back-up recipient for a liver. “It was a huge rush,” he says, “but I also was aware that this could be my last procedure.” On Halloween Day, a matching liver became available, and Cataldo Doria, MD, performed the surgery. Col. Waun was discharged within 16 days and back at work on January 3, 2006, as the Commander of the 946th Medical Group at Dover AFB. He has since communicated with the donor’s family, who has experienced both sides of transplant surgery. The donor’s brother had received a heart transplant.

Col. Waun retires this summer from the Air Force, but is considering becoming a transplant coordinator. “I’d like to be able to make a similar kind of difference in the lives of others,” he explains.

Liver transplant patient Colonel Darnell Waun is entering retirement in excellent health and considering a second career as a transplant coordinator.

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