Koniaris Heads Expanding Multi-disciplinary Surgical Program at Methodist Hospital

Leonidas Koniaris, MD, FACS, is the newly appointed Chief of Surgery at Methodist Hospital in South Philadelphia, an affiliate of Jefferson that now has the strongest presence of full-time Jefferson faculty surgeons to date. One of the oldest hospitals in the Philadelphia region, Methodist has been treating patients continuously since 1892. Professor of Surgery and Vice Chair of the Department of Surgery at Jefferson Medical College, Dr. Koniaris is leading the effort to help what he describes as “an already great local hospital become an even more essential and integral part of this vibrant community.”

Dr. Koniaris replaces Melvin Moses, MD, FACS (see Those Who Give) who was Chief of Surgery for more than two decades. Author of more than 140 scientific papers, Dr. Koniaris came to Jefferson following six years as an Associate Professor of Surgery at the University of Miami School of Medicine. He graduated from Johns Hopkins University School of Medicine, where he remained for surgical residency training and clinical and research fellowships. He is joined by two additional full-time Jefferson faculty members, both graduates of the Jefferson Surgical Residency Program: Robert McCairns, MD, FACS, and Francesco Palazzo, MD, FACS (see News in Brief).

Dr. Koniaris’ mission is to continue the ongoing improvements to the clinical and academic programs at Methodist. Thanks to the assistance of the hospital leadership at Methodist, a new outpatient office will open at 1300 Wolf Street this December, right on the hospital grounds. This office will replace the office in the St. Agnes facility and expedite physician and patient flow between our outpatient and inpatient areas.

“We will complement the work at the Kimmel Cancer Care Center and expand our capabilities by opening a multi-disciplinary breast cancer clinic this fall,” says Dr. Koniaris. This clinic will provide patients access to all of Jefferson’s services – surgery, medical oncology, radiation therapy, and patient advocates – in one convenient location. “The end result will be optimal personalized therapies for patients,” says Koniaris.

With a newly renovated endovascular suite, Methodist now has state-of-the-art capabilities to treat a variety of vascular disorders, including major aortic disease, renal stenosis (a narrowing of the blood supply to the kidneys), and advanced wound care with hyperbaric oxygen therapy treatment. Dr. Koniaris hopes to add colorectal and lung cancer capabilities in the spring of 2012.

“All the pieces are here for an integrated, multi-disciplinary surgical care program,”... “We are putting on the final touches and are excited about the improvements.”

Vascular surgeon, Dr. Joshua Eisenberg in the new endovascular suite at Methodist.
Charles J. Yeo, MD, FACS  
Samuel D. Gross Professor and Chair, Department of Surgery

The academic year 2011/2012 is now four months old, and we are off to a splendid start! We (a) have welcomed several new faculty members and a bolus of categorical interns (see below), (b) had a leadership transition at our Methodist Hospital, (c) are in growth mode at Methodist with initiatives in General Surgery, Vascular Surgery, Wound Care and Surgical Oncology (see the cover story), and (d) with the leadership of Dr. Nicholas Cavarocchi have seen remarkable growth in our adult ECMO program with outstanding clinical results and several research projects brought to fruition. Exciting times again this year at Jefferson!

I want to take this opportunity to also praise the Jefferson Foundation and particularly Lara Goldstein who returned from her recent maternity leave at full throttle. As Director of Development for the Department of Surgery, Lara has been instrumental in the tripling of philanthropic support to the Department between 2006 and 2011. She has partnered well with our researchers to assist with grant submissions and with our clinicians in building relationships with our grateful patients. Lara’s efforts have also culminated in a recent estate gift to the Department (see Those Who Give) directed towards the support of our surgical fellowships. It is important that we all redouble our efforts to bring support to the Department, as we grow our volumes and our footprint in the Delaware Valley.

Addendum:
Just prior to going to press, we learned of the passing of our esteemed colleague, Dr. John H. Moore, Jr., on September 26, 2011. Just a few months into their Jefferson surgical residency, we have all noticed their dedication to patient care, their energy and their excitement in joining the Jefferson community.

Surgeon-led ECMO Treatment Improves Survival Rates in Surgical Cardiac Care Unit

Four board-certified thoracic surgeons, Drs. Cavarocchi, Haddad, Pitcher and Hirose, staff the Surgical Cardiac Care Unit at Jefferson – the only service in the nation led by cardiothoracic surgeons.

The Jefferson Surgical Cardiac Care Unit (SCCU), reorganized in July 2010, delivers the best survival rates in Pennsylvania for patients plagued by serious lung and/or heart dysfunction. Nicholas Cavarocchi, MD, FACS, FCCP, the SCCU Director and Associate Professor of Surgery, leads a highly trained team that uses extracorporeal membrane oxygenation (an ECMO machine) to provide respiratory and cardiac support to patients whose lungs and/or hearts cannot function on their own. Because of the excellent outcomes – 70 to 80 percent survival rates for patients with life-threatening situations, up from a previous zero-based survival rate – Dr. Cavarocchi believes the Jefferson SCCU model will ultimately be adopted by all hospitals.

“Our SCCU model brings together the ECMO technology and a team of cardiac physicians, nurses and mid-level providers all trained in complex critical care,” Dr. Cavarocchi says. “We have implemented standardized management of patient care using established protocols built with evidence-based medicine.” Jefferson’s SCCU is currently the only service in the nation led by cardiothoracic surgeons, rather than anesthesiologists or other medical doctors. The team physicians, who are all board-certified in thoracic surgery, also include Harrison Pitcher, MD, Hitoshi Hirose, MD, PhD, FACS, and Michel Haddad, MD. The rest of the team is comprised of physicians assistants Angela Kelley, PA, Tamara Boucher, PA and Sarah Langan, PA-C, and nurse practitioner Megan McCullough, CRNP.

Meet Our Surgical Interns

We have welcomed an amazing new group of categorical interns, selected from over one thousand applicants to our program. These doctors, who recently matched with Jefferson Medical College (JMC), started on June 20, 2011. Just a few months into their Jefferson surgical residency, we have all noticed their dedication to patient care, their energy and their excitement in joining the Jefferson community.

Please welcome (from left to right): Christine Feldmeier, MD, JMC  
James Crawford, MD, New York University  
Kate Holoyda, MD, University of Wisconsin  
Vishen Sooppan, MD, SUNY Upstate - Syracuse  
Caitlyn Johnson, MD, JMC  
Jonathan Sarik, MD, JMC

Based on the principles of a machine that was invented in the 1950s and first used successfully in humans at Jefferson Hospital by John Gibbon, Jr., MD, ECMO takes a patient’s blood, gives it oxygen, warms it and returns it to the patient. Today’s ECMO machine, with its innovative circuitry, newer membrane oxygenator and centrifugal pump is a completely different machine but the concept is the same. Complemented by the SCCU team’s comprehensive approach, ECMO treatment helps avoid serious complications such as bleeding and hemolysis (the breakdown of red blood cells) and allows the heart and/or lungs to recover. At Jefferson, patients are placed on ECMO earlier than usual, ideally before the patient has organ failure. This improves their chances of either being successfully weaned from ECMO or having surgery with fewer complications, and that reduces costs for both the hospital and the patient.

The SCCU currently treats about 30 patients annually but that number is expected to increase by 50% this year with referrals from within and out-of-state. “Our team has been trained to deliver a level of complex critical care that is sophisticated and consistent,” notes Dr. Cavarocchi. “Our patients are benefiting and our colleagues are noticing.”
National Transplantation Pregnancy Registry Celebrates 20th Anniversary

This year marks the 20th anniversary of the National Transplantation Pregnancy Registry (NTPR). Established at Jefferson, this unique registry is a voluntary study, in which transplant recipients (both men and women) report their experiences with conception, pregnancy, childbirth, and the health of the recipient. The NTPR was founded by Principal Investigator Vincent Armenti, MD, PhD, a Jefferson alumnus and former transplant fellow with a dual faculty appointment as Professor in the Department of Surgery (Transplantation Division) and the Department of Pathology, Anatomy, and Cell Biology.

Dr. Armenti’s interest was sparked two decades ago when a transplant recipient told him she had terminated a pregnancy after transplant. “I realized then that if our goal after transplant was to restore recipients to health as fully as possible, we needed reliable data to provide better counseling,” he says.

Dr. Armenti and his staff, which includes research coordinators Faith R. Carlin, Lisa A. Coscia, RN, BSN, CCTC, and Carolyn H. McGrory, MS, RN, and data coordinator Dawn Armenti, analyze a number of variables to identify risks factors of pregnancy, which vary according to what kind of organ has been transplanted. “After a kidney transplant, recipients facing graft failure (loss of transplant function) can go back on dialysis, if necessary,” Dr. Armenti explains. But for liver, heart, and lung recipients, he says, the consequences are more severe given that the only alternative therapy is retransplantation. High blood pressure and diabetes, which can develop during pregnancy, also pose threats for the pregnancy, in addition to rejection.

By collecting and analyzing information on all types of solid organ transplant recipients, the Registry can use these data to help provide guidelines for counseling. According to the NTPR, many transplant recipients are able to maintain pregnancy, with the majority resulting in a healthy live birth, and continue with stable transplant function. However, exposure to the immunosuppressive mycophenolic acid (MPA) products during pregnancy was associated with a pattern of structural birth defects, an observation reported to the FDA and responsible for the required “black box” warning about the drug.

“I realized then that if our goal after transplant was to restore recipients to health as fully as possible, we needed reliable data to provide better counseling.”

On May 7, 2011, the NTPR held a 20th anniversary celebration for 100 members of the Registry—transplant recipients and their families—in conjunction with the Gift of Life Donor Program here in Philadelphia. Nobel laureate Dr. Joseph Murray, 92, who performed the world’s first kidney transplant in 1954, surprised the attendees by video conferencing into the event from Massachusetts, to address the group and answer questions—a real “full circle moment.”

Dr. Armenti commented that the event was “a wonderful opportunity to bring all of these people together for the first time, to meet the children and talk about our plans to follow these children as they mature. The more data we can collect and measure, the greater difference we can make for future generations.”

For more information about the NTPR, visit www.jefferson.edu/ntpr.

For an appointment with a Jefferson Surgeon, call 1-800-JEFF-NOW
The Department of Surgery is the grateful beneficiary of $100,000 from the estate of Mrs. Maida M. Wichern to establish the Homer E. Wichern, MD, Class of S’44 Surgical Fellowship Fund, in honor of her late husband.

Dr. Wichern graduated from Jefferson Medical College in the second of two classes for the year 1944, known as the Class of September 1944. During World War II, Jefferson students were placed on an accelerated curriculum in an effort to provide 500 to 600 new doctors by 1945. Students during these years completed medical school in three years instead of four.

Dr. Wichern practiced surgery at Iowa Health - Des Moines for many years. He passed away in 1988. His widow, and wife of 46 years, Maida, died in December 2010.

The Wichern’s endowed gift to Jefferson will remain in perpetuity with income from the fund supporting the surgical fellowship program each year. The fund will support the department’s well qualified post graduate trainees as they acquire advanced knowledge and skill in their particular fields of specialty. The department currently offers fellowships in transplant surgery, colorectal surgery, vascular & endovascular surgery, minimally invasive surgery and hepatopancreaticobiliary surgery, and will be initiating a bariatric surgery fellowship in July 2012.

For additional information about planned giving, or to make a contribution to the Department of Surgery, please contact Lara Goldstein in the Jefferson Foundation at 215-955-8797 or lara.goldstein@jefferson.edu.