Shift in general surgery residency leadership

After much discussion, Dr. Chris Larsen and Dr. Tom Dodson have announced that Dr. Dodson’s position as General Surgery Residency Program Director will be assumed by Dr. Keith Delman, who has been Associate Program Director since 2006, bringing to a close Dr. Dodson’s twenty-year tenure leading the program.

"I feel melancholy about this step, but Dr. Larsen has asked me to assume a leadership role in the Division of Vascular Surgery as the official chief, and we both thought that this would be an appropriate transition time," says Dr. Dodson, who has been serving as the interim vascular surgery chief since 2010. "Keith has my complete confidence and respect. His interactions with the residents and med students have been impeccable, and he has the mix of authority and empathy it takes to be a fine program director."

Prior to enrolling in Emory’s vascular surgery fellowship in 1987, Dr. Dodson was an Assistant Professor of Surgery and Coordinator of the Third-Year Surgical Clerkship at Harvard Medical School and Associate Director of the Surgical Intensive Care Unit at New England Deaconess Hospital. Upon completion of his fellowship, Dr. Dodson had a strong desire to continue his involvement in surgical education. At the direction of Department of Surgery Chair Dr. Dean Warren, he coordinated the visiting medical students’ rotations in surgery and began assisting Dr. Dick Amerson, then Program Director of the Department of Surgery, in reading and reviewing applications.
Dr. William Wood came aboard as Department Chair in 1991 and also began directing the residency. Coincidentally, Dr. Wood had been Dr. Dodson's chief resident when he was an intern at MGH in 1973. Shortly after his arrival at Emory, Dr. Wood appointed Dr. Dodson associate program director, an arrangement that lasted until he was appointed full director in 1997.

The residency thrived during Dr. Dodson's tenure — a period in which he trained approximately 200 residents — and was continuously recognized as one of the top programs in the country. In 1995 Dr. Dodson established the administrative chief resident position, an appointment elected by the resident's peers, with Dr. William H'Doubler being the department's first official administrative chief resident (please see the list of all administrative chief residents to date at the end of this feature).

"Probably the biggest challenge I faced was implementing the 80 hour work week mandate for residents in 2003," says Dr. Dodson. "The culture was rooted in 100-to-110 hours, so it was a difficult adjustment, but we managed to adhere to the ruling without affecting the quality of the residency."

Dr. Dodson and Dr. Delman's relationship essentially began over a dinner at the American College of Surgeons' Communications Course and evolved into that of a true mentor and mentee. Working closely with Dr. Dodson and his administrative staff during the past five years, Dr. Delman has gradually assumed greater involvement and responsibility for the program and learned its complicated workings. In addition to becoming acclimated to the intricacies of the program and garnering a thorough understanding of Emory's complex healthcare network, Dr. Delman benefited from the wisdom and guidance of Dr. Dodson's experience in conjunction with his even-tempered approach to challenges.

"By gentle support and well-selected advice, Tom has allowed me to grow and prepare for my new responsibilities," says Dr. Delman. "Most significantly, as a role model, his behavior and his respectful, dignified demeanor have afforded me a mentor whose character I seek to emulate. While the success of this program is the result of an uncountable number of people, the driving force behind the outstanding reputation of Emory's surgical residency is wholly attributable to Tom Dodson."

Dr. Larsen echoed these sentiments in a written announcement to Emory Surgery faculty. "We are grateful to Tom for his dedication and leadership, for all he has done to advance the residency, and for the groundwork he has laid for this transition," wrote Dr. Larsen."Given Keith's commitment to the residents and faculty as well as his continued interest in surgical education at both a local and national level, we believe that he will continue to propel our program forward as we strive to be the best surgical residency program in the country."

Since the early 1990s, Dr. Chris Larsen and Dr. Thomas Pearson have been searching for ways to promote immune tolerance of a transplanted organ. They played a leading role in discovering belatacept and driving its development, in collaboration with other investigators at Emory, including the Yerkes National Primate Research Center, as well as researchers at Bristol-Myers Squibb. Their inspiring and tireless work paved the way for the FDA's approval on June 15, 2011, of the drug Nulojix (belatacept) for the prevention of graft rejection after kidney transplants.

"This is an exciting new development which we hope will significantly improve the lives of our patients," Dr. Pearson says.

"Our goal is to achieve a normal life span for kidney transplant patients and have them survive dialysis-free," Dr. Larsen says. "We believe belatacept can help us move toward that goal."

This is the first time a new class of drugs has been developed for transplant since the 1990s. Belatacept has the potential to improve and simplify the medication regimens of kidney transplant recipients and could be a less toxic alternative to calcineurin inhibitors, the drugs most transplant patients now rely on to inhibit their immune systems but which can damage the kidneys and lead to high blood pressure and diabetes. The drug is now being tested in experimental clinical trials for liver transplant and pancreatic islet transplant.

In two parallel studies with more than 1,200 participants over two years, patients taking belatacept had similar graft survival rates to those taking the calcineurin inhibitor cyclosporine, while maintaining higher kidney function and lower blood pressure and cholesterol. In addition, belatacept can be given every few weeks, in contrast to calcineurin inhibitors, which must be taken twice a day. Drs. Larsen and Pearson were leaders in designing and conducting the clinical trials, along with Flavio Vincenti, MD, University of California, San Francisco; Bernard Charpentier, MD, Bicetre Hospital, Paris; and scientists from Bristol-Myers Squibb.

While this is a giant leap, further refinement is necessary. Compared with cyclosporine-treated patients, belatacept-treated patients had a higher rate of early acute rejection — a temporary flare-up of the immune system against the donated kidney. In most cases, however, the acute rejection was successfully treated with drugs and did not lead to graft failure. The Emory Transplant Center team is researching approaches to reduce this risk.

Nulojix will carry a Boxed Warning for an increased risk of developing post-transplant lymphoproliferative disorder (PTLD), a type of cancer where white blood cells grow out of control after an organ transplant. PTLD is associated with the Epstein-Barr virus (EBV), which most humans have as a low-level controlled infection. The risk of PTLD can be reduced by avoiding use of belatacept in Epstein-Barr-naïve patients. The FDA is requiring a blood test showing immunity to EBV before treatment with belatacept.

Video of Dr. Larsen discussing how belatacept works, what it could mean to kidney transplant patients, and the process of developing the drug.
Dr. Halkos receives NHLBI K-23 award

Dr. Michael Halkos has been awarded a Mentored Patient-Oriented Research Career Development K-23 Award from the National Heart, Lung, and Blood Institute to fund his study "Operative Strategies to Reduce Cerebral Embolic Events During Coronary Artery Bypass Surgery." K-23 awards provide support for supervised study and research for clinically trained professionals who have the potential to develop into productive, clinical investigators focusing on patient-oriented research.

Dr. Halkos' study will compare different strategies used during coronary artery bypass graft surgery (CABG) to determine which method is associated with the lowest incidence of cerebral embolic events.

"The use of cardiopulmonary bypass to provide circulatory support while the heart is arrested is the current standard of practice for performing CABG, though it also carries the highest risk for cerebral embolic events due to aortic clamping and cannulation," says Dr. Halkos. "However, various components of off-pump coronary artery bypass (OPCAB) enable the surgeon to perform distal coronary anastomoses without the use of cardiopulmonary bypass and to often minimize or completely avoid aortic manipulation during proximal anastomoses. Theoretically, these maneuvers may reduce the incidence of cerebral embolic events by reducing the generation of aortic atheroemboli."

Outcomes measures will include Transcranial Doppler-detected embolic events, postoperative stroke, and neurocognitive dysfunction. The primary hypothesis of the study is that an off-pump approach using facilitating devices to perform clampless proximal anastomoses will result in the least amount of aortic manipulation and therefore the lowest incidence of TCD-detected cerebral emboli.

New arrivals

STAFF

(Program Business Manager, General Surgery Residency Program) Susan Ratliff earned a BS in Managerial Sciences with concentrations in Operations and HR Management from Georgia State University. She previously managed the activities of the Geriatric Medicine and Hospice/Palliative Medicine educational programs of the Emory Department of Medicine and was a program coordinator in the DOM Office of Education. Working closely with Dr. Delman and Jennifer Peters, Susan's duties include the administration of rotation schedules, evaluations, case logs, application reviews, recruitment and orientation, and maintenance of credentialing and appointment agreements.

FACULTY

Division of Cardiothoracic Surgery

(Assistant Professor of Surgery) Bradley G. Leshnower, MD, joins us after
Bradley Leshnower completing his Emory cardiothoracic surgery residency. He also completed a fellowship in aortic surgery at the Hospital of the University of Pennsylvania in 2011 as well as a fellowship in endovascular surgery at the Arizona Heart Institute. He earned his MD from the University of Texas Southwestern Medical School and did his general surgery residency and cardiac surgery research fellowship at the University of Pennsylvania. His clinical specialties are thoracic aortic surgery, endovascular aortic surgery, aortic valve replacement, mitral valve repair/replacement and coronary artery bypass, and his research interests are clinical outcomes in high risk valve-sparing aortic root replacement and cerebral protection in aortic arch surgery.

Division of General and GI Surgery

(Assistant Professor of Surgery) Among other responsibilities, Carla I. Haack, MD, will assume Dr. Jon Pollock’s administrative and clinical duties at the Acute and Critical Care Surgery service of EUH when he leaves Emory to begin laying the foundation for Emory Surgery’s Global Surgery Initiative in Ethiopia. Dr. Haack received her MD from the University of Puerto Rico School of Medicine in 2006 and completed her general surgery residency at Emory in June 2011. During her chief residency, she was named a Grady Healthcare Hero by the Grady Health Foundation and received the David V. Feliciano Teaching Award.

Division of Transplantation

(Assistant Professor of Surgery) Prior to coming to Emory, Joseph F. Magliocca, MD, was the Surgical Director of Adult and Pediatric Liver Transplantation, Surgical Director of Pancreas Transplantation, and Director of both Resident Education and Medical Student Education, Transplant and Hepatobiliary Surgery, of the University of Florida College of Medicine. He received his MD at Mount Sinai School of Medicine in 1999, completed his general surgery residency at the University of Michigan Health System in 2004, and did his research and clinical fellowships in transplant surgery at the University of Wisconsin Hospital and Clinics from 2004-2007. His clinical interests are liver transplant, pancreas transplant and live donor nephrectomy, and his research specialty is the management of immunosuppression in patients following transplantation.

Division of Vascular Surgery

(Assistant Professor of Surgery) Luke P. Brewster, MD, PhD, MA, RVT, completed his vascular surgery fellowship at Emory. He earned his MD with a distinction in research at Saint Louis University Medical School in 2001 and completed his general surgery residency, received his MA in bioethics and health policy, and earned his PhD in cell biology, neurobiology and anatomy at
Loyola University Medical Center. His practice is focused on general vascular surgery with clinical research interests in the use of ultrasound to diagnose and treat vascular disease, the patient and surgeon perspective in surgical decision-making, selection and outcomes of carotid artery stenosis therapy, and optimal therapy for limb salvage. His translational research focuses on the characterization of the blood vessel wall's deformity in diseased states and how this impacts both surgical and endovascular therapies.

(Assistant Professor of Surgery) In addition to also completing his vascular surgery fellowship here, James G. Reeves, MD, received his MD at Emory and completed his cardiothoracic surgery research fellowship at Carlyle Fraser Heart Center of EUH Midtown. His clinical specialties are endovascular treatment of abdominal and thoracic aortic aneurysms, carotid stenting, laser angioplasty, hemangiomas, venous diseases, Marfan's syndrome, and thrombotic disease, while his primary research area is minimally invasive treatment of thoracic dissections and aneurysms.

In brief

Atlanta magazine's 2011 "Top Doctors" issue, an annual listing compiled by the New York-based research firm Castle Connally Medical Ltd., included 20 of our faculty. Congratulations to Drs. Tim Buchman, Linda Cendales, David Feliciano, Seth Force, Sheryl Gabram, John Galloway, Robert Guyton, T. Roderick Hester, Kirk Kanter, Stuart Knechtle, Chris Larsen, Albert Losken, Daniel Miller, Ken Newell, Richard Ricketts, Charles Staley, John Sweeney, Collin Weber, William Wood and Mark Wulkan. More than 100 of the 318 physicians who were recognized practice at one of Emory’s facilities.

The symposium portion of the 10th Annual Emory Surgery Research Day on June 16 showcased oral presentations and posters in basic and clinical science categories by our medical students, postdocs, residents and fellows. Posters and presentations were ranked, resulting in the following winners from the 2010-2011 class. Best basic science presentations: William Kitchens, Jr., MD (First Place, Oral), Michael Lowe, MD (Second Place, Oral), and Alesandrina Freitas, MD (First Place, Poster). Best clinical science presentations: John Zink, MD (First Place, Oral), Sameer Patel, MD (Second Place, Oral), Andrew Page, MD (First Place, Poster).

Yasmin Ali, Senior Research Financial Analyst for the Pre-Award Section of the Surgery Research Administration Team, recently attained certification in Research Administration at Emory (cRAE). A comprehensive and highly concentrated training program, the cRAE provides Emory research administration staff with the knowledge base required to meet their professional responsibilities and involves multiple online modules, three-days of classes, numerous in-person training sessions, and an exam with a mandatory passing score of 80% or higher.
Save the date: Emory Surgery ACS Reception

The Department of Surgery will host an Emory Surgery Alumni Reception at the American College of Surgeons 97th Annual Clinical Congress, October 23-27, 2011, in San Francisco. The reception will be held on October 25 from 6:00 to 8:00 PM in the Borgia Room of the Westin St. Francis Hotel. Former and recent graduates are encouraged to attend.

Upcoming

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<tr>
<th>EVENT</th>
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<tr>
<td>SURGICAL GRAND ROUNDS</td>
<td>7:00-8:00 AM, July 14, 2011</td>
<td>Auditorium, EUH</td>
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<td>Current Limitations to Healing after Vascular Interventions and Potential Inroads</td>
<td>7:00-8:00 AM, July 14, 2011</td>
<td>Auditorium, EUH</td>
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<tr>
<td>Presented by Luke P. Brewster, MD, PhD</td>
<td>7:00-8:00 AM, July 14, 2011</td>
<td>Auditorium, EUH</td>
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<tr>
<td>— Assistant Professor of Surgery, Division of Vascular Surgery, Department of Surgery, Emory University School of Medicine</td>
<td>7:00-8:00 AM, July 14, 2011</td>
<td>Auditorium, EUH</td>
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<tr>
<td>SURGICAL GRAND ROUNDS</td>
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<td>Nanotechnology in Surgery</td>
<td>7:00-8:00 AM, July 21, 2011</td>
<td>Auditorium, EUH</td>
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<tr>
<td>Presented by Max Yezhelyev, MD</td>
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<td>Auditorium, EUH</td>
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<td>— Chief Resident, Department of Surgery, Emory University School of Medicine</td>
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<td>Auditorium, EUH</td>
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<td>Surgery Faculty Meeting</td>
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<td>CANCELED</td>
<td>7:00-8:00 AM, July 28, 2011</td>
<td>Auditorium, EUH</td>
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<td>EUH Surgical Services Performance Day</td>
<td>7:00-8:00 AM, July 28, 2011</td>
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