DEAR COLLEAGUES,

I am pleased to present to you the current issue of the Operative Word, an electronic newsletter brought to you by the University of Chicago Medicine Phemister Society. In this e-newsletter, you will read about exciting updates and developments from the Department of Surgery.

In this issue of the Operative Word, we are thrilled to announce plans to establish a Level I trauma center and expand emergency medicine services in partnership with Sinai Health System. The trauma center will be built at Holy Cross Hospital, near some of the highest incidence of trauma injury and gun violence in Chicago. We are proud to be part of a collaboration that brings such a highly needed service to our neighboring communities.

Additionally, the University of Chicago Medicine has been designated a National Pancreatic Foundation Center. Our institution’s strong clinical collaborations and innovative research efforts uniquely position us to care for patients with complex pancreatic conditions, and this important designation is a testament to our excellence in pancreatic clinical care and research.

Within this newsletter, we also provide an overview of our faculty’s clinical and academic achievements, as well as their educational endeavors, over the last several months.

If ever you would like to learn more about our department’s clinical, academic or educational efforts, please don’t hesitate to reach out to us. We look forward to communicating and engaging with our alumni around the globe.

Sincerely,

JEFFREY B. MATTHEWS, MD, FACS
Dallas B. Phemister Professor of Surgery
Chairman of the Department of Surgery
The University of Chicago Medicine was named a National Pancreas Foundation Center, one of only 30 facilities in the country to receive the prestigious designation from the National Pancreas Foundation (NPF), a nonprofit group that works to provide education and hope for patients with pancreatitis and pancreatic cancer.

This designation makes UChicago Medicine the only NPF Center in Illinois, Indiana or Wisconsin, and it signifies an institution’s dedication to high-quality, multidisciplinary care, research, and public awareness and understanding of pancreatitis and related conditions.

Approved NPF Centers had to go through an extensive auditing process and meet the criteria developed by a task force made up of clinical specialists and patient advocates. The criteria included having required expert physician specialties, along with more patient-focused programs such as a pain management, psychosocial support and more.

“Patients with pancreatic disorders need comprehensive care provided by a multidisciplinary and integrated team of experts,” said Andres Gelrud, MD, an associate professor of medicine and director of the University of Chicago Medicine’s Center for Pancreatic Disorders. “We’re particularly proud to be recognized as one of the nation’s premier health care facilities for treating these patients and helping them improve their quality of life.”

UChicago Medicine: Excellence in pancreatic care

The UChicago Medicine pancreatic disease care team includes specialists who are recognized leaders in pancreatic disease care and can offer diagnostic and treatment options that are not available at most hospitals.

UChicago Medicine is one of only a handful of centers in the nation to offer comprehensive surgical options for pancreatitis, including islet autotransplantation. This specialized procedure is performed by Jeffrey B. Matthews, MD, chairman of the Department of Surgery, and Piotr Witkowski, MD, PhD, director of the pancreatic and islet transplant program. Clinicians also perform sophisticated minimally invasive procedures that can provide a more thorough diagnosis of pancreatic cancer, chronic pancreatitis and other complex problems.

Researchers at the medical center are also working to discover new treatments for digestive diseases through the Digestive Disease Research Core Center, one of a dozen such NIH-supported research programs in the nation.

Personalized medicine in pancreatic cancer care

Considered one of today’s most deadly diseases, pancreatic cancer is associated with woefully low survival rates, even when the cancer is diagnosed at an early stage. Although pancreaticoduodenectomy lends itself as potential curative therapy for this devastating disease, more than half of all patients who undergo this procedure experience complications.

Given that pancreatic cancer is projected to become the second leading cause of cancer-related death in the United States by 2030, UChicago Medicine clinicians...
and researchers have banded together for the ultimate goal: find a cure for pancreatic cancer.

The institution’s Chicago Pancreatic Cancer Initiative in Genome-Guided Medicine is a multidisciplinary effort that aims to integrate genomics, computation and clinical care to improve current treatment of patients with pancreatic cancer. The initiative is co-led by Kevin Roggin, MD, associate professor of surgery in the Section of General Surgery; along with William Dale, MD, PhD, associate professor of medicine and chief of the Section of Geriatrics and Palliative Care; and Kevin White, PhD, James and Karen Frank Professor and Director of the Institute for Genomics and Systems Biology.

“The range of expertise represented in the pancreatic cancer initiative really makes us unique among pancreatic cancer research groups, and allows us to ask questions across the entire course of treatment—from predicting who might get sick, to operative selection, to then determining the best postoperative therapies,” Dr. Roggin said.

One avenue the Chicago Pancreatic Cancer Initiative is exploring is whether preoperative assessments can be improved in order to enhance surgeons’ prediction of patient complications following pancreaticoduodenectomy. In a study published in the Annals of Surgical Oncology, Dr. Roggin and his colleagues found the addition of radiographic sarcopenia to comprehensive geriatric assessments indeed improved surgeons' ability to predict potential adverse outcomes following the operation.

“Patients all receive CT scans prior to surgery. The ability to use these to predict surgical outcomes could be very powerful. As a surgeon, if I could do a simple calculation of muscle quality and quantity of a patient during the surgical selection process, to understand which patients were at the highest risk of complications, I could better determine if the risks of the procedure outweigh the potential benefits,” Dr. Roggin added.

In collaboration with institutions across the country, the team has also launched a herculean genome-sequencing project. Dr. Roggin and his colleagues are collecting and sequencing samples from hundreds of patients to build a repository of sequencing data matched to a patient’s medical information, designed to give clinicians a deeper grasp of the unique molecular make-up and clinical characteristics of each pancreatic cancer patient.

One such collaboration is with Andrew Mazar, PhD, and Andrey Ugolkov, MD, PhD, at Northwestern University, involving research in mouse models harboring patient tumors, called “patient derived xenografts” or PDXs. PDX models allow scientists to use DNA sequencing to discover patient-specific mutations, which can then be used to discover and test individualized therapies. As part of these studies, the group has begun testing cancer drugs in these models, allowing the team to match patient molecular profiling to drug response.

The hope is that by creating this rich data repository, as well as through building a hub to share expertise, clinicians will soon be able to identify which treatment protocols are best suited for each patient, ushering in a new era of personalized medicine and ultimately improving the prognosis for pancreatic cancer patients.
In a move to create a more comprehensive system of needed trauma and emergency care for Chicago’s South and Southwest side communities, Sinai Health System and the University of Chicago Medicine have announced a partnership to build and operate a Level 1 adult trauma center and to expand emergency services.

The UChicago Medicine and Sinai Health System’s new joint Level 1 adult trauma center will be at Holy Cross Hospital, part of the Sinai Health System. Holy Cross, at 68th Street and California Avenue, is near some of the highest incidence of trauma injury and gun violence in the city.

Under the University of Chicago Medicine-Sinai Health System partnership:

- Holy Cross Hospital will renovate and expand its emergency department and build a state-of-the-art Level 1 adult trauma center.
- UChicago Medicine will provide capital to help fund the facility improvements at Holy Cross Hospital, which are estimated to be in the range of $40 million.
- Sinai Health System, which operates a trauma center at Mount Sinai Hospital, will provide specialists dedicated to trauma care, including emergency department physicians, anesthesiologists and nursing staff, along with trauma care support services.
- UChicago Medicine will provide specialists at the new trauma center dedicated to trauma care, including general trauma, neurological, orthopedic and plastic surgeons, urologists, and other areas.

In addition to the new trauma center at Holy Cross, UChicago Medicine plans to increase access to emergency services on its Hyde Park campus by expanding and building a state-of-the-art adult emergency department.

Both institutions bring significant experience and expertise to the partnership. Holy Cross Hospital, which serves communities including Englewood, Auburn Gresham and Marquette Park, is one of the largest providers of emergency care in Illinois. Sinai Health System and UChicago Medicine run high-volume emergency departments. Sinai Health System has provided Level 1 trauma
care for more than 25 years. UChicago Medicine has had dedicated Level 1 pediatric trauma and burn units at its Comer Children’s Hospital for over a decade.

“We are bringing together the best to do the most,” said Sinai Health System President and CEO Karen Teitelbaum. “Since Holy Cross became part of our health care network in 2013, we have been seeking ways to expand its reach, especially when it comes to acute care and violence prevention. Bringing the expertise and resources of the University of Chicago Medicine and Sinai Health System together, we can do exponentially more for all of the communities on the South and Southwest side of the city.”

Sinai Health System and UChicago Medicine have a longstanding collaborative relationship, sharing the care of patients and their communities through both clinical services and dedicated programs that promote wellness and prevention. Both organizations believe collaboration and shared responsibility are critical to addressing the overarching health care needs of the South side, especially when it comes to emergency and trauma care and prevention of violence.

“This important opportunity allows us to extend our commitment to invest our resources where we can have the greatest impact on the critical health needs of our communities,” said University of Chicago Medicine president Sharon O’Keefe. “This collaborative partnership, a model for other care providers, leverages our collective experience and resources to expand access to life-saving, quality health care for the communities we serve.”

The partnership anticipates filing a Certificate of Need application with the Illinois Health Facilities and Services Review Board, and will also seek approval with the Illinois Department of Public Health. The approval processes and construction are expected to take at least two years. Both organizations will use that time to recruit additional highly trained medical staff, nurses and other healthcare professionals to work with existing specialists from both institutions at the new trauma center. Next steps also include meetings with community leaders to develop companion community programs focused on wellness and prevention.
NEWS & NOTES

The American Heart Association’s 2015 Heart Walk took place Sept. 25, and the department’s team — I Heart Surgery — had 30 walkers who worked to raise more than $7,000 for heart disease and stroke research and prevention.

Mahesh Gupta, PhD, was invited by the NIH to serve as reviewer of the Cardiac Contractility and Heart Failure study section from October 2015–Sept 2019. The members of the study section are chosen based on their achievements and leadership in their discipline as evidenced by quality of research publications and success in maintaining nationally recognized NIH funded research programs.

Marco Patti, MD, was appointed president of the International Society of Surgery on August 27 at the conclusion of the World Congress of Surgery in Bangkok. This is the oldest and the most prestigious international society of surgery. He will lead the society for the next two years, until next World Congress of Surgery, which will take place in Buenos Aires in 2017. Dr. Patti was also recognized by the Colombian Association of Surgery as an honorary fellow.

Peter Angelos, MD, and Raymon Grogan, MD, co-directed a continuing medical education event. Faculty and guest speakers spoke on a range of current and controversial issues related to the treatment of thyroid, parathyroid and adrenal disease.

Bakhtiar Yamini, MD, received a renewal of his R01 for research on malignant glioma. Malignant glioma is a devastating cancer that afflicts over 20,000 adults every year. Despite aggressive therapy, overall patient survival remains dismal. This project examines the mechanism of action of the most commonly used anti-glioma chemotherapeutic to uncover novel strategies to both identify patients who will respond poorly to treatment and elucidate rational approaches to enhance the overall therapeutic effect. Dr. Yamini is an associate professor of surgery and an active researcher in the field of neurosurgery.

Michael Gluth, MD, was promoted to associate professor on the School of Medicine Track, effective July 1, 2015. Dr. Gluth is also the director of the University of Chicago Medicine’s Comprehensive Ear and Hearing Center.

The University of Chicago’s Pediatric Extracorporeal Membrane Oxygenation (ECMO) program was designated a center of excellence by the Extracorporeal Life Support Organization. The program received the ELSO Award for Excellence in Life Support. The award was presented at the 26th Annual ELSO Conference in Atlanta in September.

Raphael C. Lee, MD, was selected to serve on the National Institutes of Health CROSS Study Section, which will perform a comparative analysis across study sections within the Bioengineering Sciences & Technologies Integrated Review Group to determine proposal and evaluation consistency. Dr. Raphael is a senior former member of the NIH Biomaterials & Biointerfaces study section.

Russell Reid, MD, PhD, had his Process Improvement Initiative selected by the Department of Surgery as part of a department-wide program to improve operating efficiency and work settings. Dr. Reid’s “Don’t Go with the Flow” initiative will promote water conservation and eliminate waste in clinical settings. Signs encourage personnel to keep the scrub sink turned off during scrub, kick on the scrub sink only when ready to rinse hands and report leaks or other problems immediately.

The Section of Plastic & Reconstructive Surgery hosted its fifth annual Chicago Breast Reconstruction and Lymphedema Symposium. The symposium drew more than 250 attendees from around the world.

A Celebrity Golf Classic took place in August to support the Fresh Start Caring for Kids Foundation. The foundation was formed to provide no-cost plastic and reconstructive surgeries to children from low-income families. All proceeds and sponsorships supported this cause. This year’s celebrity host was Jermaine Dye, retired major league baseball player and World Series MVP with the 2005 White Sox.

Christopher Skelly, MD, and Trissa Babrowski, MD, began working with other University of Chicago Medicine and nearby clinicians to prevent limb amputation through the creation of the Hyde Park Limb Salvage Center.

The Hepatobiliary Surgery and Manuscript Writing Symposium took place at the University of Chicago Center in Beijing on September 25–26. Jeffrey Matthews, MD, chair of the Department of Surgery, and J. Michael Millis, MD, vice chair for global surgery, served as event co-chairs, along with Yilei Mao, MD, PhD.

The 6th Annual Pediatric Robotic Urology Update and Live Case Demonstration took place on July 25. Mohan S. Gundeti, MD, chief of Pediatric Urology, served as the course director, and Arieh L. Shalhav, MD, professor and chief of Section of Urology, served as the event host.

At the American Society of Plastic Surgeons annual meeting in October, David Song, MD, MBA, was sworn in as the 2016 president and gave his presidential address. Dr. Song served as the president-elect for 2015.
At the 2015 Society of Surgical Chairs annual meeting on Sunday, Oct. 4, Jeffrey Matthews, MD, Dallas B. Phemister Professor of Surgery and chairman of the Department of Surgery, was elected as the organization’s 2016 president. Dr. Matthews served as the Society of Surgical Chairs’ vice president for 2015.

Lawrence Zachary, MD, won two awards for his recent paper, titled, “Fat Grafting to the Hand in Patients with Raynaud Phenomenon: A Novel Therapeutic Modality.” He received the Best Hand Paper Award at the American Society of Plastic Surgeons 2015 Annual Meeting this October and the Plastic and Reconstructive Surgery Society’s 2015 Best Paper Award in the hand/peripheral nerve category.

Dana Suskind, MD, professor of surgery, director of the Pediatric Cochlear Implantation Program and founder of the Thirty Million Words Initiative, published her first book, “Thirty Million Words: Building a Child’s Brain.” The book showcases Dr. Suskind’s research into how parents can close the achievement gap and build children’s vocabularies by learning to speak to their children.

In addition to his clinical and research contributions, Dr. Agrawal is an accomplished educator—teaching medical students, residents and fellows about the management of patients with head and neck cancer.

Clinical Interests
- Otolaryngology
- Head and neck cancer
- Head and neck surgery

Board Certification
Otolaryngology—Head and Neck Surgery

Medical School
Johns Hopkins Hospital, Baltimore

Internship and Residency
Johns Hopkins Hospital, Baltimore

Fellowship
Memorial Sloan Kettering Cancer Center, New York (Head and Neck Surgical Oncology)
Johns Hopkins University School of Medicine, Baltimore (Molecular Genetics)

Memberships
American Academy of Otolaryngology—Head and Neck Surgery
American Association for Cancer Research
American College of Surgeons
American Head and Neck Society
American Medical Association
American Society of Clinical Oncology
American Thyroid Association
IN MEMORIAM

THOMAS J. KRIZEK, MD
1932–2015

Thomas J. Krizek, MD, a former interim dean of the Division of Biological Sciences, chairman of surgery, chief of plastic and reconstructive surgery and Maurice Goldblatt Distinguished Service Professor at the University of Chicago, died at his home in Whittier, NC, on August 5th after a struggle with cancer. He was 82.

Dr. Krizek was known and respected as a talented and innovative surgeon, a charismatic and inspiring teacher and a mentor and friend to students, residents and colleagues.

He held many leadership positions in national surgical societies, including the American College of Surgeons. He was president of the American Association of Plastic Surgeons and the American Association for Hand Surgery, and held important roles in the American Burn Association and the American Society of Maxillofacial Surgeons. He also served as a director of the American Board of Surgery and the American Board of Plastic Surgery.

Thomas Joseph Krizek was born December 1, 1932, in Milwaukee, Wisc. He graduated from Marquette University in 1954 and Marquette Medical School (now Medical College of Wisconsin) in 1957. He completed his general surgery and plastic surgery residencies at Case-Western Reserve University in 1966, after spending two years as a physician with the Naval Reserve and the Marine Corps.

He began his academic career in 1966 at the University of Maryland and Johns Hopkins University. During this period he served as chief of plastic surgery at Baltimore City Hospitals, where he was founding director of what became the Maryland Regional Burn Center.

At Yale-New Haven Hospital from 1968 to 1978, he served as chief of plastic surgery, director of the trauma program and associate dean for graduate and continuing medical education.

In 1978, he moved to Columbia-Presbyterian Medical Center, where he was professor and chief of plastic and reconstructive surgery and director of the trauma program. In 1981, he moved to the University of Southern California School of Medicine, where he established the plastic surgery training program.

Krizek was recruited to the University of Chicago in 1984 as chief of plastic and reconstructive surgery. In 1986 he was named assistant director of the Center for Clinical Medical Ethics and in 1987, he was appointed chairman of surgery. During that time, he established the medical center’s physician’s assistance program. From January 1 to August 31, 1988, he also served as interim Dean of the Biological Sciences Division.

He left the University of Chicago in 1992, to help build a fledgling plastic surgery program at the University of South Florida where he became vice chairman of surgery, director of plastic surgery, and director of the Tampa Bay Regional Burn Center. He retired from his surgical role in 1999 but continued to teach as a professor of religious studies and medical ethics at USF until 2002. In 2010, he and his second wife, Claudette, moved to Whittier, NC.

Krizek is survived by Claudette; three children from his first marriage, to Marilyn Bayline Krizek: Thomas Jr., Kelly Ann Criscuolo, and Mary Ellen Burgard; two children from Claudette’s previous marriage: Clifton Lee Cannon and Timothy Clay Cannon; two sisters, Elizabeth Harwood and Kathryn Flynn; and six grandchildren.

A funeral mass was held at Our Lady of Guadalupe Church, in Cherokee, NC, on Friday, August 21. A private service of interment will follow in the fall at Mepkin Abbey, South Carolina.
As one of the premier academic medical centers in the country, the University of Chicago Medicine frequently serves as a participating or leading site for innovative clinical trials. Through these unique trials, our investigators and patients contribute to groundbreaking research into treatment for some of today’s most challenging diseases, including bladder cancer.

The Section of Urology is currently accepting patients for two open clinical trials:

A Phase 1/2, Placebo-Controlled, Randomized Study to Evaluate the Safety, Immune Response and Clinical Activity of HS-410 in Patients with Non-Muscle Bladder Cancer Who Have Undergone Transurethral Resection of Bladder Tumor

The purpose of this study is to test an experimental vaccine called vesi-genurtacel-L (HS-410) given either after standard BCG regimens or at the same time as standard BCG to determine if HS-410 can reduce or delay bladder cancer recurrence. BCG is an FDA-approved vaccine for the treatment of bladder cancer.

In Phase I, patients received up to a total of 15 low doses of HS-410. The vaccine was administered once a week in two six-week cycles and then once a month for three months. This phase is now complete.

In Phase II, patients continuing to receive BCG therapy will receive up to 21 doses of low dose HS-410, high dose HS-410 or placebo. Patients not receiving BCG therapy will receive 21 doses of high dose HS-410. The vaccine or placebo will be administered on a regimented schedule over a period of 29 weeks, followed by three weekly doses four months later.

This clinical trial provides travel reimbursement to patients. The lead investigator in this trial at UChicago Medicine and the national principal investigator is Gary Steinberg, MD. Norm Smith, MD, is a co-PI at UChicago Medicine.


The main purpose of this research study is to evaluate whether CG0070, a conditionally replicating oncolytic adenovirus (serotype 5) designed to preferentially replicate in and kill cancer cells and also selectively expresses the human cytokine GM-CSF to induce a systemic anti-tumor immune response, is safe and effective.

This treatment is for patients with high-grade, non-muscle invasive bladder cancer who have recurrent disease despite traditional BCG therapy and refused cystectomy may qualify for this trial.

As a single-arm open-label study, all participants will receive CG0070. The drug will be administered weekly by bladder instillation for six weeks and potentially for up to one year in patients with a good response.

The lead investigator in this trial at UChicago Medicine is Gary Steinberg, MD.

To learn more about these clinical trials or refer one of your patients for screening, please call 773.702.3080.

For more information on our other clinical trials, please refer to surgeryresearch.uchicago.edu/clinical-trials.