STROKE CARE DESIGNATION MAKES UPSTATE FIRST IN CENTRAL NEW YORK

Upstate University Hospital has earned Comprehensive Stroke Center certification from DNV (Det Norske Veritus) Healthcare Inc., a hospital accreditation organization with some of the most rigorous standards in health care. DNV notified Upstate of the designation Jan. 16.

The designation as a Comprehensive Stroke Center reflects the high level of care and treatment for the most complex stroke cases at any time of day, all year long. It is the highest-level designation available.

Upstate is the only hospital in Central New York to earn such a designation from DNV for its stroke care. Kaleida Health in Buffalo is the only other hospital in New York that is designated by DNV as a Comprehensive Stroke Center.

Since 2006, Upstate has been designated as a Primary Stroke Center by New York state and has received numerous accolades for its stroke care from the American Heart Association and American Stroke Association.

"This designation reflects the outstanding clinicians, medical technology and facilities that are available at Upstate to treat patients with stroke, from mild to most severe," said John McCabe, MD, Upstate University Hospital chief executive officer. "But most importantly, this comprehensive designation underscores the team approach that Upstate takes to treating stroke. From EMS providers to nurses, to pharmacists to surgeons, to technicians and social workers, all of these highly trained medical professionals mobilize at the first notification that a patient is en route with a possible stroke."

Yehuda Dror, president of DNV Healthcare, congratulated Upstate on its achievement. "Accreditation and certification in health care provide much more than recognition," he said. "These programs help establish standards of excellence and best practices that directly impact patients' lives."

Learn more about stroke services at Upstate at www.upstate.edu/stroke



Hospitals must meet dozens of guidelines in order to receive the Comprehensive Stroke Center designation from DNV, including:

- Must document rapid assessment of stroke patients in emergency department
- Must administer clot-busting drugs within specific time frame
- Must have specific stroke team in place, consisting of neurologists and neurosurgeons, diagnostic radiologists, and other critical care specialists within short time frame
- Must complete diagnostic tests within 60 minutes of patient's arrival to emergency department and complete computerized tomography scans within 45 minutes for candidates treated with the drug, tissue plasminogen activator.
- Must have a dedicated intensive care unit for patients with neurological issues, with board certified physicians in neurocritical care.
- Must provide rehabilitation, physical therapy and speech services.
- Must maintain community programs to educate the public on stroke prevention efforts and warning signs and symptoms of stroke.
- Must participate in clinical research aimed at improving stroke care of patients.



UPSTATE UNIVERSITY HOSPITAL NEWS

UPSTATE IS CENTRAL NEW YORK'S... FIRST AND ONLY COMPREHENSIVE STROKE CENTER



Several members of the Upstate Stroke Center's multidisciplinary team

Choosing a hospital with comprehensive stroke certification means patients receive the highest possible level of stroke care.

UPSTATE STROKE CENTER OFFERS:

Multidisciplinary approach to care that includes

- 24/7 board-certified stroke neurologists
- 24/7 on-site neurosurgery
- 24/7 specialists in neurointerventional radiology
- 24/7 neurocritical care specialists
- 24/7 board-certified emergency physicians
- Specialized neuroscience nurses
- Access to clinical research trials

An entire hospital floor dedicated to brain care with three levels of specialized care: Neuroscience Intensive Care Unit; Specialized Neuroscience Unit; and Neuroscience Step-Down Unit.

Clot-busting tPA treatment for ischemic stroke patients.

Catheter-based therapy for those who don't respond to tPA, extending the window of treatment to 8 hours of onset of stroke symptoms.

State-of-the-art neurovascular and endovascular procedures for repair of aneurysms and other causes of hemorrhagic strokes.

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DIFFERENCES BETWEEN A PRIMARY STROKE CENTER AND A COMPREHENSIVE STROKE CENTER INCLUDE:

PRIMARY	COMPREHENSIVE (UPSTATE)
• Takes care of most cases of ischemic stroke.	 Cares for all types of stroke patients, ischemic and hemorrhagic.
 No requirement for a separate ICU for stroke patients. 	 Has a dedicated neuroscience ICU for stroke patients.
 Sends complex patients to a Comprehensive Stroke Center. 	 Receives patients from Primary Stroke Centers.
• Access to neurosurgery within 2 hours.	• On site neurosurgery 24/7, with the ability to perform complex neurovascular procedures, such as brain aneurysm clipping, vascular malformation surgery and carotid endarterectomy.



IMPROVED SHOULDER IMPLANT DESIGNED TO LAST

Patients who need shoulder replacements have a new option in a novel, improved implantable device available at Upstate Medical University. Upstate is one of two health care facilities in New York state and among six facilities nationwide to use the FDA-approved SMR TT metal back glenoid implant for should replacements.

Kevin Setter, MD, performs the surgeries through the Upstate Bone and Joint Center.

The implant allows for complex replacements to be done in a less invasive manner, and for patients to achieve a greater range of motion following surgery. A cup-shaped device replaces the glenoid and creates a secure, long-lasting bond by allowing for bone ingrowth. The device is made of a special metal, tantalum titanium (TT), which is a porous material that allows bone to grow in and around the device.

Setter said the device is significantly better than the more traditional shoulder prostheses used in shoulder replacement surgery, and it is an appealing option for younger patients. He is an associate professor of orthopedic surgery at Upstate.

"Traditional artificial glenoids use bone cement to secure the prosthesis," said Setter. "Over time, traditional cement/bone interface loosens. This may lead to pain, decreased function and possible need for revision surgery."

The SMR TT glenoid gains its fixation from a tantalum-coated peg, available in various sizes to fit anatomical needs.

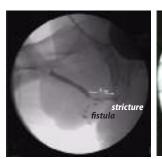
"The idea is that, with this new design, fixation will increase over time as the patient's bone grows into the implant, forming a more solid bond. This in turn hopefully will lead to an improvement in already good long-term results with shoulder replacement surgery."

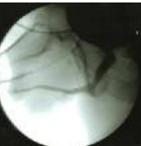
This aspect is why younger patients may well be suited for the new design.

The first of the TT glenoids was implanted in Italy in October 2013. Upstate was one of two centers in the country chosen by Lima Corporate for implantation of this special prosthesis. Setter has performed complex shoulder replacement surgery in Italy, Germany, Switzerland and England and has both trained with and taught some of the most well-respected shoulder surgeons in the world.

To learn more about the SMR TT metal back glenoid, contact the Upstate Bone and Joint Center at 315-464-8634.

UPSTATE UNIVERSITY HOSPITAL NEWS





Stricture and Fistula after Trauma (before repair)

After Stricture and Fistula Repair

URETHROPLASTY CAN REPAIR URETHRAL STRICTURE

Men and women who suffer from urinary retention caused by urethral stricture may be candidates for a definitive surgical solution.

Dmitriy Nikolavsky, MD, cares for many patients whose lives have begun to revolve around the bathroom. They develop urethral obstruction from scar tissue caused by injury, inflammation, infection or prior surgery. This constriction may prevent them from emptying their bladders. Many undergo repeated painful urethral dilations or incisions before learning of othe

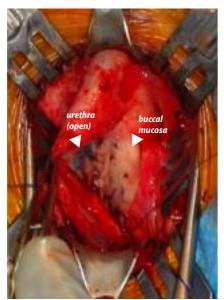


Dmitriy Nikolavsky, MD

incisions before learning of other options.

Nikolavsky, Upstate's director of reconstructive urology and female urology, says the use of dilation to treat strictures dates back 3,000 years to India, where practitioners worked with wooden or metal rods to forcefully widen the urethral narrowing. Over the millennia anything from candles to the horns of animals was used in futile attempts to cure patients with urethral stricture. Then, as now, the procedure was not effective long term, with a nearly 100 percent failure rate.

Another treatment called an internal urethrotomy originated with the barber surgeons of medieval Europe. It used a dilation device with a pop-up knife to cut internal scar tissue, but it, too, does not last and often creates an even deeper and longer scar. Contemporary modifications of the internal urethrotomy performed with endoscopic cameras fitted with blades or lasers also fail to produce good results, with failure rates from 60 to 90 percent.



Urethroplasty with buccal mucosa graft

Both dilation and urethrotomy procedures are still in use today, but Nikolavsky says urologists are beginning to favor urethroplasty, a "gold-standard" surgical procedure with a success rate of 85 to 95 percent. This is an elegant reconstructive operation routinely performed on an outpatient or short-stay basis, and with a very high patient satisfaction rate.

Nikolavsky developed an early interest in male and female reconstructive urology during residencies in surgery and urology at William Beaumont Hospital in Michigan. During that time, he traveled to Mozambique to perform female fistula repairs, and to India where he learned from one of the world leaders in genitourinary reconstruction. Nikolavsky then honed his urethroplasty skills during a Reconstructive Urology Fellowship at the University of Colorado School of Medicine. He joined Upstate in 2012.

The surgery involves Nikolavsky dissecting the urethra, removing the scar tissue and, if needed, covering the area with a graft of buccal mucosa, a tissue taken from the inside of the patient's cheek.

The surgery was first described in a medical journal more than a century ago, Nikolavsky says. It wasn't appreciated at first, but for the last several decades urologists have realized that the buccal mucosa makes for a perfect urethral graft. The tissue is moist, resistant to inflammation and doesn't grow hair – and the inner cheek heals quickly.

Reach Nikolavsky for consults by calling 315-464-1500.

STUDY: FREE ANTIBIOTICS MEANT MORE PATIENTS FILLED PRESCRIPTIONS

A study has found a connection between the promotional efforts of a retail pharmacy offering free medications and the number of prescriptions filled by patients.

A group of Upstate emergency medicine researchers compared data provided by Wegmans for its pharmacies in Onondaga County. The grocery chain headquartered in Rochester offered nine generic oral antibiotics for free starting in 2009. Researchers, led by Jeremy Joslin, MD, compared 214,892 antibiotic prescriptions from the first six months of 2008 with 221,480 from the first half of 2009.

"The promotional pricing of the antibiotics had a significant impact on the number of prescriptions

filled," Joslin wrote in a study published in September in the journal, Pharmacy Practice, with colleagues Susan Wojcik, PhD, and William Grant, PhD. The number of antibiotics filled that were included in the promotion increased by 13 percent, while the number filled that were excluded from the promotion decreased by 20 percent.

Joslin says to help ensure that patients fill their prescriptions, doctors should pay attention to promotional programs when appropriate.

Today, Wegmans sells many generics for \$4 for a 30-day supply, and several other retail pharmacies offer similar deals.

NATIONAL ALZHEIMER'S DRUG TRIAL SEEKS PARTICIPANTS IN CENTRAL NEW YORK

Upstate is participating in a national Alzheimer's disease clinical research study evaluating the potential benefits of an investigational medicine when taken by people with mild to moderate Alzheimer's disease who are already being treated with donepezil (Aricept). Called NOBLE, the trial evaluates an investigational drug, T-817MA, which may be able to modify the pace of the disease.

Participants will be screened for eligibility and must

be between the ages of 55 to 85 with mild to moderate Alzheimer's disease, currently receiving donepezil (Aricept) treatment for at least six months, not living in a nursing home, have a study partner who has regular contact and who will attend study visits, and weigh no more than 220 pounds.

For additional information on the NOBLE study, contact Andrea McGlond at mcglonda@upstate.edu or 315-464-6409, or visit http://www.NOBLEstudy.org

CASE STUDY SHOWS IMPACT OF WEIGHT LOSS SURGERY ON HEART RATE

A woman in her 40s came to Upstate University Hospital's emergency department because of bouts of lightheadedness and fainting. Five months earlier she successfully underwent weight loss surgery. At the hospital, she was found to have a slow heart rate.

Rushikesh Shah, MD, who is completing his training in internal medicine, wrote about her care in a BMJ Case Report published in July. BMJ used to be called the British Medical Journal.

After extensive tests to rule out a heart attack or other cardiac problem, doctors "concluded that her symptoms were due to an increased resting vagal tone and decreased resting metabolic oxygen demand after massive weight loss in the post-operative period," wrote Shah.

It turns out the woman was experiencing an unavoidable outcome of her surgery, her body's way of compensating for her significant weight loss. What she faced is something more and more people will face, as the number of Americans undergoing weight loss surgery continues to rise.

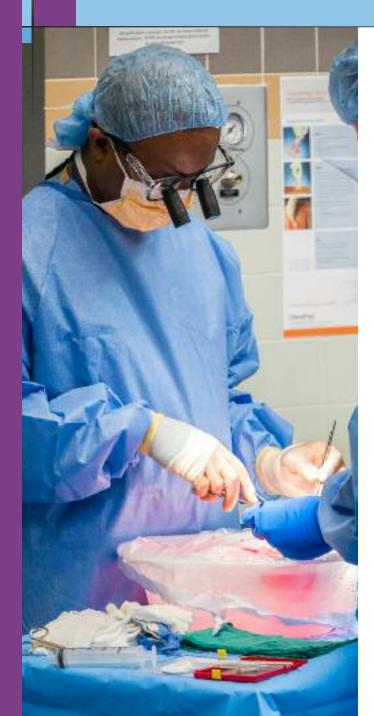
People who are obese are likely to have fast heart rates. They have high levels of adipokines, cell signaling proteins released by fat cells that can have adverse effects on the cardiovascular system. Fat cells also produce hormones including leptin, which regulates the amount of fat stored in the body and also impacts the cardiovascular system.

After bariatric surgery, leptin concentrations drop, and so does a person's heart rate.

Shah writes that this slowed heart rate usually does not produce symptoms or require any treatment. This woman, however, received medication to treat her lightheadedness and fainting.

He advises that awareness of this common "physiological compensatory change" can help avoid unnecessary diagnostic tests and medical interventions.

UPSTATE MEDICAL UNIVERSITY NEWS



Vaughn Whittaker, MD, prepares a kidney during the transplant chain surgeries.

UPSTATE ROUND UP



Transplant patients and the surgeons: Vaughn Whittaker, MD; Marilyn Secor; Deanna Freeman; Larry Secor and Keith Melancon, MD.

Patients, surgeons and other caregivers involved in Upstate University Hospital's first ever **donor kidney chain** met and celebrated their recoveries in November on what is known as Donor Sabbath.

The surgeries took place on one day in May in four operating rooms, one surgery after another. An altruistic donor, who wishes to remain anonymous, offered to donate a kidney to help someone he had never met. His kidney was transplanted into a woman whose husband was willing to donate a kidney but who was not a match for her. So he donated a kidney to another woman who was a match.

The Donor Sabbath is an annual observance held prior to Thanksgiving to raise awareness for the need of organ donation. More than 250 people are on the Upstate kidney transplant waiting list.

Get an early look at clips from the upcoming six-hour television documentary, "**The Story of Cancer: The Emperor of All Maladies**" from 6 to 8 p.m. Wednesday, March 25 at the Upstate Cancer Center. "The Story of Cancer" airs on PBS stations in the spring.

The Upstate Cancer Center, in partnership with the WCNY television station, presents the free preview event. Parking is also free in the open lot on East Adams Street across from the cancer center. Physicians and staff will make presentations during the event and attendees will learn about their risk of cancer and the newest treatments available.

"The Story of Cancer" is based on the book, "The Emperor of All Maladies: A Biography of Cancer," by Siddhartha Mukherjee, MD. The film was directed by Barak Goodman and produced by Ken Burns, who recently oversaw production of "The Roosevelts." Learn more at cancerfilms.org.

A molecular study at Upstate Medical University that could have broad implications for **stem cell research**, developmental biology and the study of human diseases has received \$161,000 in funding from the Eunice Kennedy Shriver National Institute of Child Health and Human Development. The two-year study is led by Francesca Pignoni, PhD, associate professor of ophthalmology, biochemistry and molecular biology and neuroscience and physiology.

Upstate Connect: 800-544-1605 for Physician-To-Physician Service

UPSTATE MEDICAL UNIVERSITY NEWS

Upstate Medical University has been awarded a one-year, \$49,600 grant from the St. Baldrick's Foundation to benefit the **Dr. William J. Waters Center for Children's Cancer and Blood Disorders at Upstate Golisano Children's Hospital.** The grant is one of 40 infrastructure grants awarded as part of the foundation's fall grant cycle, totaling more than \$2.5 million and surpassing last year's total awarded during this same period.

The center provides oncology care to the children, adolescents, and young adults of Central New York. By being active members in the Children's Oncology Group, Upstate is able to offer patients state-of-the-art clinical trials. The St. Baldrick's money will help support the salary and educational advancement for one clinical research assistant.

"Since there is limited and decreasing financial support supplied by federal funding and by private pharmaceutical companies, we rely more and more on private financial support," explains Karol Kerr, MD, pediatric hematology oncologist and assistant professor of pediatrics.

Upstate University Hospital has achieved a higher level designation from NICHE, Nurses Improving Care of Healthsystem Elders. The new Level 3 status, referred to as "Senior Friendly," has been achieved as a result of several initiatives now in place throughout the hospital.



Doctors, nurses and other caregivers said a happy farewell to 12-year-old Maudeline Edmond in December after she spent more than two months in Syracuse, having traveled from her homeland in Haiti to undergo life-saving **heart surgery** at Upstate Golisano Children's Hospital.

Edmond suffered from a congenital

heart defect that causes an obstruction of the pulmonary valve called pulmonic stenosis. The surgery she needed was not available in Haiti. She came to Syracuse via the Haiti Cardiac Alliance, a group founded by Central New York native Owen Robinson. George Alfieris, MD, operated in October, and Edmond was cared for by pediatric cardiologists Matt Egan, MD, and Frank Smith, MD, during her stay.



Upstate University Hospital's **vascular team** opened offices at the Community campus, in suite 3K of the Physician's Office Building North. The surgeons, physician assistants, nurses and administrative support staff will provide evaluation, diagnostic management and treatment for many diseases affecting the vascular system. Reach the team for consults by calling 315-492-5750.

Pictured: Vivian Gahtan, MD, chief, vascular surgery and endovascular services

The bachelor's and master's degree programs at Upstate's **College of Nursing** have been reaccredited by the Commission on Collegiate Nursing Education's Board of Commissioners. Also accredited is the college's post-graduate certificate program. The next review takes place in 2024.

Spencer M. Wallace Jr. has been living with Type 1 diabetes for an astounding 81 years. Wallace, the first recipient of the **Upstate Joslin Diabetes Center's** 80-year medal, donated several diabetes-related books and devices that he has collected to the center during a recent reception. The items will be displayed at the center.



The American College of Radiology has designated the Women's Imaging Department of Upstate University Hospital's Radiology Department as a **Breast Imaging Center of Excellence.** The designation recognizes the imaging center for achieving excellence by seeking and earning full accreditation in all of the college's voluntary breast-imaging accreditation programs, including mammography, breast ultrasound, stereotactic breast biopsy and ultrasound guided breast biopsy. The Women's Imaging Department is located at 550 Harrison Center in Syracuse.