



Syracuse, New York

Clinical Update

March 2009

## **Joining Forces to Address Female Pelvic Floor Disorders**

The Department of Urology adds  
Adonis Hijaz MD, former head of  
female urology at Case Western, to its  
clinical/research team.

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## **Major Upgrades to Hyperbaric Medicine Program**

University Hospital invests close to \$1 million  
in its longstanding hyperbaric medicine facility,  
which plays a unique and vital role in Central  
New York.

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SUNY Upstate  
Department of Urology

## Second Female Urologist Joins Female Pelvic Surgery

Priority: Building Bridges  
with Related Specialists

**A**nticipating an “avalanche” of patients with pelvic floor disorders, Upstate Medical University has added a second urologist to its flagship program in female pelvic medicine and reconstructive surgery.

Adonis Hijaz MD, former head of female urology at Case Western Reserve University and assistant professor of urology, has joined Upstate’s Department of Urology as an associate professor.

Based on his clinical and research record, “Dr. Hijaz is the rising star in the field of female pelvic disorders,” according to Upstate professor and chair of Urology Firouz Daneshgari MD. “He shares our goal of creating a multidisciplinary culture to improve patient care in our community.”

### Bridge-Building

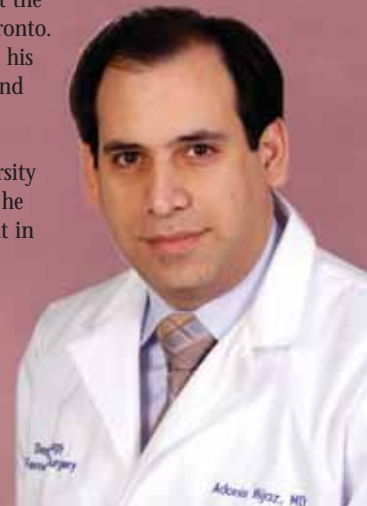
According to Dr. Hijaz, treatments for female pelvic disorders often cross the boundaries of urology and gynecology. “I trained under experts in urology and urogynecology,” he explains. “A urologist or gynecologist alone cannot solve all these problems. Our role as female urologists is to build teams of specialists. We must work together, share our wealth of knowledge and advance the field. Our common goal is to help the patient.”

Upstate Urology’s new program in female pelvic medicine and reconstructive surgery will thus be multidisciplinary – a clinical and research collaboration

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### Dual Fellowships

**A**donis Hijaz MD, associate professor of urology at Upstate, was previously head of female urology at Case Western Reserve University. Prior to his Case Western appointment, Dr. Hijaz completed a prestigious fellowship in female pelvic medicine at the Cleveland Clinic’s Glickman Urological Institute. He also completed a second fellowship – in neurourology and urodynamics – at the University of Toronto. Dr. Hijaz earned his medical degree and completed his residency at the American University of Beirut, where he was chief resident in the Division of Urology.



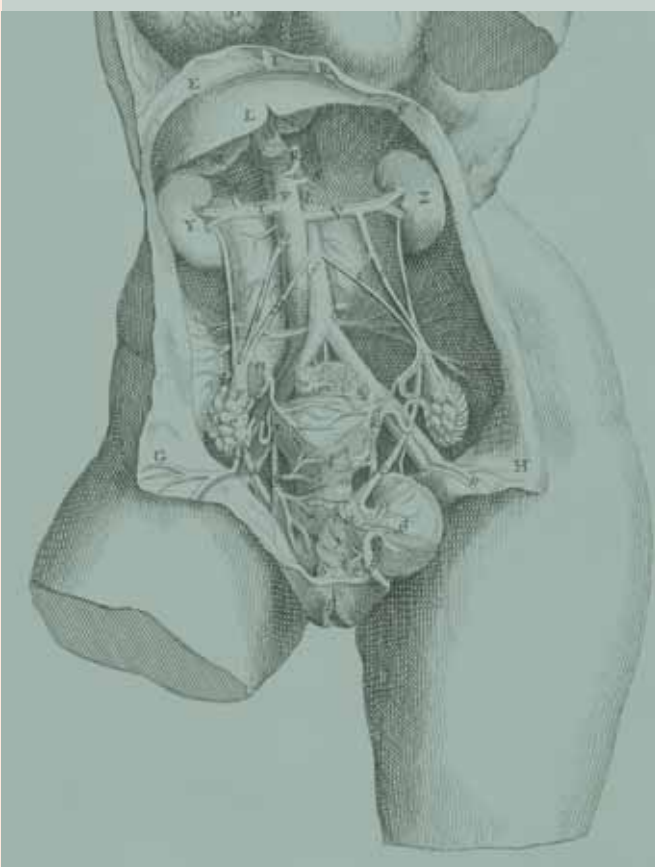
## THE ACADEMIC DIFFERENCE

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MD Direct: 800-544-1605: University Hospital’s Physician-To-Physician Service



# Female Pelvic Floor Disorders Affect One in Four Women *Incidence Doubles as Women Age*



According to a study published last fall in the *Journal of the American Medical Association*, female pelvic floor disorders affect close to 24 percent of U.S. women. The incidence soars to 40 percent for women over 60 years and to 50 percent for women over 80 years. An estimated one in 10 women will require surgery for a pelvic floor disorder.

Upstate's new female pelvic floor disorders program will address "the constellation of symptoms" associated with conditions such as urinary incontinence, fecal incontinence and pelvic organ prolapse. According to Upstate urologist Adonis Hijaz MD, associate professor of medicine, these "quality-of-life" issues merit prompt and skilled intervention.

"The earlier we see these women, the easier it is to help them," he says.

### Cultural Shift

"In previous generations," he notes, "women didn't talk – even to their physicians – about 'embarrassing' issues such as bladder and vaginal prolapse. They thought they had to live with these conditions. Today, we have a network of medical and surgical specialists to treat and even prevent these issues.

"My primary message to women," says Dr. Hijaz, "is to tell them they are not alone. These are common conditions that we can diagnose and treat with a wide range of interventions.

"As physicians," he believes, "we must empower women to have these conversations."

IN HEALTH CARE

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“Female pelvic floor disorders affect 24 percent of U.S. women... one in ten will require surgery.”

## *Female Pelvic Surgery – Continued from page A2*

involving urologists, urogynecologists, colorectal surgeons and physical therapists with pelvic floor expertise.

### **Research Factor**

In addition to his clinical expertise (see page A2), Dr. Hijaz brings to Upstate a strong research commitment. He has published more than 20 articles in the *Journal of Urology, Obstetrics & Gynecology* and other research journals.

“I am a clinician at heart,” Dr. Hijaz explains, “but I strongly believe in the role of the clinician-scientist. Clinical observations lead to excellent research questions, and those questions inspire me to design and implement basic and clinical research studies.”

Dr. Hijaz’ research interests include stem cells for urinary incontinence; prevention of pelvic organ prolapse; and tissue regeneration in female pelvic floor disorders. Dr. Hijaz and Dr. Daneshgari are also co-principal investigators on an NIH grant exploring the effects of a vaginal sling on incontinence.

### **Earlier is Better**

As with many medical conditioners, early intervention is encouraged. “We know that pelvic floor disorders are often related to aging and pregnancy, which may weaken supporting muscles in the pelvis. But other contributing factors – such as obesity, diabetes and smoking – are more controllable. Part of our mission, as female urologists, is to focus on prevention.

To learn more about SUNY Upstate’s Department of Urology and new center for female pelvic disorders and reconstructive surgery, please call MD Direct at 800.544.1605.

“Treatments for female pelvic disorders often cross the boundaries of urology and gynecology. Our role as female urologists is to build teams of specialists.”

–Adonis Hijaz MD  
Associate Professor of Urology

## THE ACADEMIC DIFFERENCE

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MD Direct: 800-544-1605: University Hospital’s Physician-To-Physician Service





“More women will suffer from a pelvic floor disorder than from asthma, heart disease and hypertension.”

—Adonis Hiyaz MD  
Associate Professor of Urology



### Female Pelvic Floor Disorders

- Voiding Dysfunction
- Pelvic Organ Prolapse
- Incontinence

### Additional Conditions

- Neurogenic Bladder Dysfunction
- Vaginal Fistulas
- Myofascial Pelvic Pain
- Urethral Diverticulum
- Interstitial Cystitis

### Upstate's Female Pelvic Medicine Program

- Encourages and embraces multidisciplinary culture
- Employs advanced technologies for surgical intervention (e.g., robotic surgery for pelvic organ prolapse)
- Practices evidence-based medicine
- Fortifies first-line therapies (e.g., pelvic-floor physical therapy)

IN HEALTH CARE

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Wendy Merritt RN, Clinical Case Manager for Hyperbaric Services, is chair of the Research Committee for the Baromedical Nurse Association.

## Major Upgrades to Hyperbaric Medicine Program

University Hospital has invested close to \$900,000 to expand its long-standing Hyperbaric Medicine Program – the only 24/7 hospital-based hyperbaric facility between New York City and Buffalo.

Accredited by the Undersea and Hyperbaric Medical Society in New York State, University Hospital's Hyperbaric Medicine Program is the first facility to earn this accreditation with distinction.

"Our hyperbaric services are available 24 hours a day and designed to treat critically ill patients as well as outpatients," notes John McCabe MD, director of hyperbaric services and professor and chair of Emergency Medicine at SUNY Upstate Medical University.

"Due to our unique designation, our patients come

from across New York state as well as Pennsylvania and Canada. Equally important, our unit is highly regarded by our patients and their families and consistently scores in the top percentile in patient satisfaction services.

"With the recent upgrades, we can provide even more comprehensive services in a much-enhanced physical space," explains Dr. McCabe.

University Hospital provides about 1,200 hyperbaric treatments annually. Its new 1,800-foot suite features a new hyperbaric chamber and numerous patient amenities – from new treatment, consult and dressing rooms to television service for patients undergoing treatment.

The previous facility was limited to 300 square feet of hospital space.

## THE ACADEMIC DIFFERENCE

A6 MD Direct: 800-544-1605: University Hospital's Physician-To-Physician Service



John McCabe MD, University Hospital's Director of Hyperbaric Medicine, is certified by the American Board of Emergency Medicine in Undersea and Hyperbaric Medicine. Dr. McCabe is Professor and Chair of Emergency Medicine at Upstate Medical University.

“Our expertise in hyperbaric medicine is acknowledged by the fact that administrators of the federal Medicare and Medicaid programs consider the hyperbaric medicine program at University Hospital to be a model for other facilities in the United States.”

#### Hyperbaric Treatment: Common Indications

- Delayed Radiation Injury
- Carbon Monoxide Poisoning
- Decompression Sickness
- Air or Gas Embolism
- Severe Crush Injuries
- Skin Grafts and Flaps
- Diving injuries

For a complete list of approved indications for hyperbaric treatment, please refer to the Undersea and Hyperbaric Medicine Society website: <http://www.uhms.org>

“Hyperbaric medicine is an important component to our clinical services,” notes Wendy Merritt RN, clinical manager for hyperbaric services. “This upgrade allows us to provide this care in the most patient- and family-centered setting possible.”

#### Benefits of Hyperbaric Medicine

Approved – and scientifically proven – to treat 13 disease categories, hyperbaric medicine promotes healing by delivering 100 percent pure oxygen throughout the body.

“We are essentially driving two to three times the usual volume of oxygen deep into the body, at higher-than-normal atmospheric pressures,” explains Dr. McCabe. “Late-effect radiation injury is the most common application, and wound care is a major focus. Oxygen is known to promote skin healing.”

#### Emergency

Typical emergency applications include carbon monoxide poisoning, acute anaerobic infections and diving injuries. “At University Hospital, we sometimes see divers who have developed ‘the bends’ while flying home from diving vacations,” reports Dr. McCabe. “We also have local lakes that are deep enough to cause the bends.”

University Hospital’s Hyperbaric Medicine Program also engages in research studies. “As a research institution, we are always collecting and publishing data and exploring other applications, under highly controlled studies,” notes Dr. McCabe. “We are currently enrolled in a study comparing our hyperbaric applications with those in China. We also have an IRB proposal to study the impact of hyperbaric medicine on migraine headaches.”

For more information, consultations and appointments, please contact: MD Direct, 1.800.544.1605.