Clinical Update July 2007

New Neurosurgery Chair

Walter Hall MD, MBA, a pioneering neurosurgeon from the University of Minnesota School of Medicine, steps in for SUNY Upstate's own pioneering neurosurgeon and chair, Charles Hodge MD.

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Physician's Oath Revisited

This year's College of Medicine graduates recited a thoughtfully revised physician's oath, "in the tradition of Hippocrates and Elizabeth Blackwell."

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Outreach Program Addresses Child Psychiatry Crisis

SUNY Upstate's child psychiatrists help primary care physicians absorb a surge of children with emotional and behavioral disorders.

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Walter Hall MD, MBA Pioneering Neurosurgeon Named New Upstate Chair

nationally recognized neurosurgeon and research scientist, Walter A. Hall MD, MBA has been named the Robert and Molly King Professor of Neurosurgery and chair of the Department of Neurosurgery at SUNY Upstate Medical University.

He succeeds Charles Hodge MD, who served as chair for 19 years. Dr. Hodge will continue to practice neurosurgery, teach and conduct research at Upstate.

Dr. Hall was most recently the Shelley N. and Jolene J. Chou Chair in Neurosurgery at the University of Minnesota School of Medicine as well as director of the Brain Tumor Center of Minnesota.

To Central New York, Dr. Hall brings extensive clinical and laboratory experience in developing new therapies for brain tumors, including stereotactic radiosurgery, fractionated stereotactic radiotherapy, blood-brain barrier disruption chemotherapy and targeted toxin therapy.

In addition, Dr. Hall has authored more

than 140 publications on brain tumors, targeted toxins and central nervous system infections.

Dr. Hall is a pioneer in the use of intraoperative MRI-guided neurosurgery. These real-time MRI images, taken as the patient undergoes surgery, enhance the accuracy and reduce the risk of brain tumor removal.

Dr. Hall is a Virginia native who earned his undergraduate and medical degrees at Columbia University. He completed his general surgery internship and neurosurgical residency at the University of Pittsburgh.

> His training included two years as a Medical Staff Fellow in the National Institutes of Health's Surgical Neurology Branch. Following his training, Dr. Hall was awarded the prestigious Van Wagenen Fellowship by the American Association of Neurological Surgeons. He spent that fellowship working in the

Intraoperative MRI scans

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Department of Tumor **Biology of the Norwegian** Radium Hospital in Oslo, Norway.

In 1991, Dr. Hall joined the faculty of the University of Minnesota School of Medicine. In 1996 he was awarded the Mahaley Clinical Research Award in brain tumors by the Joint Section of Tumors of the Congress of Neurological Surgeons and the American Association of Neurological Surgeons.

Dr. Hall received his master's degree in business administration in 1998 from the Carlson School of Management of the University of Minnesota.

University Hospital's Department of Neurosurgery treats more than 17,000 patients a year and maintains a significant research focus, including participation in numerous clinical trials.

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The Physician's Oath, in the Tradition of **Hippocrates and Elizabeth Blackwell**

I solemnly commit my life to serving humanity.

I will give to my teachers the respect and gratitude that is their due, and share my knowledge with those who follow me.

I will practice my profession with conscience and dignity.

The health of my patient will be my first consideration; may I never see in the patient anything but a fellow human in need.

I will treat all patients with compassion, no matter how much they differ from me.

I will respect the secrets patients confide in me.

I will remember that the physician's duty is both to prevent disease and to treat it.

I will work together with my colleagues as brothers and sisters in service of our patients.

I will maintain the honor and the noble traditions of the profession.

I make these promises solemnly, freely, and upon my honor. May I keep this oath and, in so doing, experience the joy of healing those who seek my help.

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his year's graduates of SUNY Upstate's College of Medicine recited a new physician's oath that includes a nod to Elizabeth Blackwell, the first American woman to graduate from medical school. Dr. Blackwell earned her medical degree in 1849 from Geneva Medical College, the forerunner of SUNY Upstate.

The new oath (which appears at left) replaces a version of the Hippocratic Oath that had been recited by SUNY Upstate medical students at commencement since the early 1990s.

"The recitation of an oath upon graduation is a ceremonial recognition that this milestone represents more than an academic credential," explained College of Medicine Dean Steven J. Scheinman MD. "Medicine is a noble profession that carries both privilege and great responsibility, and the oath reinforces this."

The decision to change the oath was inspired by student-requested changes to the White Coat Ceremony, which marks the beginning of a medical education. Those changes led to a review of medical education traditions, including the oath recited at commencement.

Upon review, the oath's language was found to be archaic and often ambiguous, making it difficult for students to understand, according to an informal poll of students.

"If the 120 or so students reciting this oath aren't sure of its meaning, then it was time to put it to rest," said Kathy Faber-Langendoen MD, chair of the Center for Bioethics and Humanities and Medical Alumni Endowed Professor of Bioethics.



Elizabeth Blackwell MD, Class of 1849. Dr. Blackwell's writings were incorporated into the physician's oath.

(Painting by Joseph Stanley Kozlowski, 1963. From the collection of SUNY Upstate Medical University, Syracuse, NY) A committee of faculty members and two medical students then crafted an oath with greater clarity and more relevance to the 21st century. Reflected in the new version are insights from historical figures in medicine, including Dr. Blackwell.

"Dr. Elizabeth Blackwell has strong meaning for this campus," said Dr. Faber-Langendoen. "It seemed important that her vision of the medical profession be incorporated in this new oath, including her belief in preventive medicine and collaboration between women and men in the medical profession.

There is no single oath that physicians take upon receiving their degrees. The Hippocratic Oath, the most well-known formulation, was derived from the 4th century BC writings of Hippocrates, a Greek physician.

"The Physician's Oath, in the Tradition of Hippocrates and Elizabeth Blackwell" is drawn from several sources. Its major source is the Declaration of Geneva, written after World War II. In the aftermath of the medical crimes of Nazi physicians, the Declaration of Geneva revised the Hippocratic Oath to state more clearly the physician's dedication to medicine's humanitarian goals.

"In very simple prose, the new oath codifies the core ethics of our profession," Dr. Faber-Langendoen said. "I think it will be helpful to our graduating physicians if, after a few years in practice, they come back to this oath to remind themselves of their fundamental commitments as physicians."

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Outreach Efforts Counter Child Psychiatry Crisis Child Psychiatry Community Consultation Education Program

The growing shortage of child psychiatrists has the makings of a perfect storm. An estimated one in five children now suffers from mental and behavioral disorders. By 2020, this figure is projected to rise by 50 percent, according to the World Health Organization.

At the same time, the number of child psychiatrists available to treat these children falls woefully short – 6,300 versus the 30,000 child psychiatrists needed. Compounding

this access crisis are insurance restrictions and the negative stigma of neuropsychiatric conditions.

The bottom line is that 80 percent of these children are untreated.

Pressure on Primary Care

Eighty percent of the children who are treated for mental and behavioral disorders are treated by primary care physicians who have little, if any, formal training in psychiatry. Yet emotional and behavioral disorders now consume about 20 percent of their office visits. And 85 percent of psychotropic drugs are prescribed by pediatricians and family care physicians.

To help address this simmering storm, SUNY Upstate's Department of Psychiatry has developed a Child Psychiatry Community Consultation Education Program, with funding from the New York State Department of Mental Health.

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SUNY Upstate child psychiatrists Wanda Fremont MD and Arun Kunwar MD "Our program is reaching out to primary care providers, schools and parents, to help increase understanding of these conditions and access to care," explains Medical Director Wanda Fremont MD, associate professor of psychiatry and behavioral sciences.

The program helps physicians identify mental health problems; evaluate the need for consultations and referrals;

and examine the risks, benefits and side effects of psychotropic medications for children.

"By default, these primary care physicians may be inheriting children who are on

a lot of medications," says Dr. Fremont. "We're helping to expand their understanding of psychotropic drugs. But we're also letting them know it's OK to say, 'I don't feel comfortable prescribing these drugs.'

"Today, a lot of patients are looking for that magic attitude pill," Dr. Fremont continues. "Physicians are feeling pressure to take out the prescription pad and provide quick fixes. But it takes time to look at emotional problems.

"We want to help decrease that pressure to prescribe," she adds.

"At Upstate, by tradition, we are not pediatric psychopharmacologists. Most child psychiatrists are very conservative about medications. At the same time, many

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insurance companies are reluctant to reimburse for nonmedication treatment.

"We agree with the National Institute of Mental Health, which states, 'Successful treatment for the most common mental health disorders (ADHD, depression, anxiety and developmental disorders) starts with early diagnosis and the provision of intensive behavioral therapies, in combination with medication," Dr. Fremont says.

Case-Based Collaborative Rounds

To assist physicians with these challenges, the program offers monthly case-based presentations, where SUNY Upstate child psychiatrists collaborate with primary care providers.

"The case-based format is very powerful," reports Dr. Fremont. "The physicians present one of their own patients, without identifying information. We provide our insights and relevant literature. The goal is to help these physicians know when to triage."

The child psychiatry case presentations for pediatricians are scheduled on the first Wednesday of each month, before the Department of Pediatrics' monthly grand rounds.

For family practice physicians, the monthly case-based presentations are scheduled on the second Wednesday of each month.

Telephone Consultations

Primary care physicians may also take advantage of 20-minute telephone consultations with Upstate's child psychiatrists. "It's a way for these physicians to discuss what's normal behavior for patients and what's not," explains Dr. Fremont.

SUNY Upstate child psychiatrists Cynthia Carter MD and Jud Staller MD Finally, there are monthly evening educational seminars on child psychopathology, diagnostic assessment and treatments.

Dr. Fremont notes that their outreach efforts – and responses – are being carefully documented, "to see if what we are doing is helping primary care physicians." The program also has ongoing input from a steering committee which represents SUNY Upstate, Onondaga County Department of Mental Health, Hutchings Psychiatric Center, St. Joseph's Hospital and community pediatricians.

For more information, please call 315.464.3265.

Editor's Note: For information on the outreach program's services to schools, families and others in the community, check the upcoming September 2007 issue of Physicians Practice.

What's the Problem?

Why are we seeing this steep rise in children with emotional and behavioral disorders? That's a question often posed to SUNY Upstate's child psychiatrists. Dr. Wanda Fremont offers multiple theories.

"We're better able today to identify childhood psychiatric disorders. There's also a lot more stress in our culture," she observes.

"There are more parents working, more families in crisis. Schools are cutting back on services. This places undue pressure on the whole community to raise these kids."

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