WHY NOT SALVAGE THE ADRENAL GLAND?

Location, size and function influence how tumors of the adrenal gland should be treated. When a tumor needs to be removed, many doctors recommend taking out the entire adrenal gland.

Gennady Bratslavsky, MD, chair of the department of urology at Upstate, says adrenalectomy is not always the best option. If one gland is removed, and then problems develop in the other, patients are subject to a lifelong reliance on hormone medications.

Bratslavsky says removing just a portion of the gland containing the tumor is a valid option for patients with a type of hereditary tumor called pheochromocytoma, since the likelihood of developing tumors in the other gland is high with this condition. In a partial adrenalectomy, the healthy portion of the gland is left behind to continue functioning.

A study he co-authored found that 80 percent of patients with hereditary pheochromocytoma developed tumors in both adrenal glands. It was published in the American Urological Association’s Urology Practice journal in November, the same month that Upstate hosted an international conference on the condition.

A woman from Pompey with a recent diagnosis of pheochromocytoma found a surgeon in Rochester who was prepared to remove one of her adrenal glands. She was doing research and learned about the conference. She attended and learned of the less invasive option.

Her tumor presented a surgical challenge, located in the center of the gland and close to the vena cava. Bratslavsky operated in a minimally invasive manner using robotic assistance, and the patient went home from the hospital within 48 hours.

Subsequent imaging scans show a healthy-looking gland, with no hint of the tumor that used to exist within. The woman now lives a normal life.

Reach Upstate’s department of urology by calling 315-464-4473.
Each year, more nurses at Upstate pursue certification in their specialty or study for advanced degrees — a drive that improves individual skills and knowledge while also improving patient care.

Nurse practitioner Archie McEvers is one example. He began his nursing career with an associate’s degree more than 40 years ago and has progressed from a regular floor nurse to providing care in the intensive care unit. He returned to school for his bachelor’s degree and then his master’s. He became a nurse practitioner. After working in cardiac surgery for many years, he recently assumed a new position as clinical coordinator for palliative care at Upstate. Other examples are registered nurses Kelly Dolan and Deb Willson.

They are two of 270 certified nurses who have pursued additional training within their areas of expertise. They trained through the largest national geriatric nursing care program for hospitals, called Nurses Improving Care for Healthsystem Elders, or NICHE. Their certification indicates a specialization in caring for people over age 65.

Then there is the team of nurses on the hospital’s SWAT team, celebrating 10 years of service this year.

Twenty seasoned critical care registered nurses at the Downtown and Community campuses are part of a team that is summoned to provide lifesaving measures when a patient’s condition suddenly deteriorates. Team members hold a variety of credentials, including Advanced Cardiac Life Support, Critical Care Nursing, Trauma Nursing Core Certification and Emergency Neurological Life Support. Ellen Anderson, the SWAT team manager, says the nurses “possess confidence in their ability to provide a quick and comprehensive assessment of an evolving situation.”

Upstate’s chief nursing officer, Nancy Page, says tuition reimbursement is one of the best benefits available to nurses at Upstate.

Through the benefit, available after six months of employment, some nursing technicians are pursuing their licensed practical nursing degrees or bachelor’s degrees, while some registered nurses are seeking master’s degrees, and some nurse practitioners are working toward doctorates.

Upstate’s College of Nursing provides education for bachelor’s and master’s degrees, post-master’s advanced certificates and doctor of nursing practice, in addition to continuing education for nurses. Learn what’s available at www.upstate.edu/con or by calling 315-464-4570.
Medical progress in the last decade or so has improved the survival chances for patients whose colorectal cancer has spread to the liver. Today, surgery may provide a cure — depending on the steps taken after diagnosis.

Up to 70 percent of patients with cancers of the colon or rectum will also develop secondary liver cancer.

The diagnosis may sound dire, and oftentimes, patients with liver metastases are offered only palliative chemotherapy with the goal of prolonging survival. But a growing body of evidence shows that some patients can survive for long periods of time or be cured by having their colorectal liver mets surgically removed.

Such surgery can be challenging, which is why patients need to find experienced doctors who frequently operate on the liver. “There is no standard definition of ‘high volume.’ One article from Yuman Fong, MD, from Memorial Sloan Kettering suggested 25 cases per year as a cutoff,” says Ajay Jain, MD, a hepatobiliary and pancreatic surgeon at Upstate who, together with Dilip Kittur, MD, performs 30 to 40 liver operations each year.

The timing of surgery in relation to other treatment is critical. “Someone who has liver mets should be seen by a surgeon before they start chemotherapy, to see whether surgery is an option now or maybe in the future,” Jain says. “Preoperative consultation allows the surgeon and medical oncologist to plan how much chemotherapy should be given and when.”

Kittur says that “too often, patients receive too much chemotherapy in advance, leaving their livers congested and in no condition for surgery. That ruins the patient’s best chances for a cure.”

Cancer experts say surgery provides up to 40 percent of patients with five or more years of survival. Radiation therapy or chemotherapy are treatment options, too, but their success rates in this area are lower.

Ideally a patient’s oncologist would collaborate with a surgeon early on, says Jain. He and Kittur work closely with oncologists throughout Central New York to develop individual treatment plans for each patient.

Reach Upstate’s hepatobiliary and pancreatic surgery program by calling 315-464-6295.
SUSPECT A STROKE?
THINK FAST, THINK UPSTATE.

The best time to learn about the region's largest neuroscience team is before you need it.

THE REGION'S LARGEST TEAM.
THE MOST RESOURCES.
THE MOST CONSISTENT CARE.

Upstate Comprehensive Stroke Center
upstate.edu/stroke
Acute Care Surgical Service
OFFERS TRAUMA, CRITICAL CARE EXPERTISE

As the region’s only nationally accredited Level One trauma center, Upstate University Hospital’s surgical team handles difficult and challenging cases from throughout its 18-county service area.

The advanced training and verification that distinguishes the trauma service also means there are always Upstate surgeons standing ready for any acute care surgery (ACS). ACS is a surgical specialty with three essential components: trauma, critical care and emergency surgery. ACS mastery is a necessary component for national trauma accreditation.

ACS surgeons play a vital role in immediately stabilizing critically ill or injured patients. At Upstate, in addition to caring for trauma patients, they also are available to perform a full range of procedures including, but not limited to, appendectomy, cholecystectomy, colon resection, bowel obstruction surgery, hernia, perforation of the stomach or intestine, internal bleeding, necrotizing skin infections and other emergency situations.

Upstate’s Acute Care Surgery program is open to referrals from physicians and other emergency departments. It offers:

- A team of surgeons who are board certified in both general surgery as well as surgical critical care. Many also have additional fellowship training.
- 24/7 anesthesia coverage
- 24/7 staffed operating rooms
- Comprehensive radiological services
- Immediate consultation access with physicians in dozens of specialty areas at Upstate.

Physicians or emergency departments referring a patient to Upstate for ACS services may contact the Upstate Transfer Center at 315-464-5449. The phone is staffed 24/7 by registered nurses.

Acute care physicians Moustafa Hassan, MD; Joan Dolinak, MD; Lucy Ruangvorawat, MD; William Marx, DO; Amie Lucia, DO; and Richard King, MD.

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Ambulatory care center receives funding
Upstate received a $70.6 million grant to build an ambulatory care center to house primary care, behavioral health and specialty services, plus a variety of other patient care services designed to support a patient’s transition from acute medical care facilities back into the community.

The project addresses a need to expand access to and integrate primary care and behavioral services into a single location. Currently, patients can access Upstate specialty services in nearly a dozen locations in and around Syracuse.

“This center will be designed to transform the way Upstate delivers its outpatient care,” said Upstate University Hospital Chief Executive Officer John McCabe, MD. “By bringing these services together under one roof, and connecting with multiple community partners, we will provide patients with access to interdisciplinary care and support services designed to promote health and decrease hospital admissions and emergency department use.”

Preliminary plans are for a center of 250,000 square feet, located across East Adams Street from the hospital’s main entrance. Once the final design plans are approved, construction could begin within 18 months.

The grant comes from New York’s Capital Restructuring Financing Program and Essential Healthcare Provider Support Program.

Café Kubal, Gannon’s to open new branch in children’s hospital
Syracuse-based coffee roaster Café Kubal plans to open its fifth Syracuse location in Upstate Golisano Children’s Hospital this spring. It will take over the space on the 11th floor that was vacated when Tim Hortons closed in November.

The restaurant will be open 24 hours a day. It will add some healthy food choices and a kid’s menu, along with serving Syracuse-based Gannon’s ice cream.

A portion of sales at the Café Kubal in the hospital will help The Advocates for Upstate Medical University support direct service projects to improve and enhance patient care services, support medical education and enhance community health.
Courses set to improve mental health awareness

The Substance Abuse and Mental Health Services Administration awarded a $375,000 grant to Upstate and Hutchings Psychiatric Center to train a diverse group of adults in Mental Health First Aid. The training, based on a nationally recognized program, is designed to help adults detect mental illness occurring in youth in Onondaga County and connect them with needed services.

It’s an eight-hour training certification course that teaches a five-step action plan to assess a situation, select and implement interventions and secure appropriate care for individuals. Participants will learn risk factors and warning signs of mental health problems, their impact and common treatments.

Organizers estimate they will conduct 70 workshops during the three-year grant period, training from 1,500 to 1,750 people. Program participants will be identified through outreach to various academic, faith-based and community organizations.

Medical students celebrate Match Day

Eighty-eight of the 155 fourth-year students from Upstate Medical University College of Medicine will remain in New York state for the first year of their residency training. Seventy are entering a primary care specialty, including internal medicine (41 students); pediatrics (19); medicine pediatrics (2); and family medicine (8).

Twenty-four students are staying in Syracuse, 21 at Upstate University Hospital and three at St. Joseph’s Hospital Health Center.

In addition to matching its students to programs throughout the country, Upstate must also fill its own residency positions. All 132 positions were filled in this year’s match.

Students celebrated Match Day with a parody of the Walk the Moon song “Shut Up and Dance.” Find it on the Upstate Medical University YouTube channel by searching for “Match Day.”

Parenting classes offer online option

Expectant parents can access prenatal, childbirth and family education online, as well as in-person, through Upstate Best Beginnings. The online option is a self-paced, interactive program that can be completed from a computer or mobile device. Topics covered include pregnancy, labor, birth stories, comfort techniques, medical procedures, cesarean birth and newborn and postpartum care.

Upstate Best Beginnings also offers classes for expectant parents and for new siblings.

The online education tool is $85. Other classes range from $55 to $95. Learn more by calling 315-464-2756. The Advocates for Upstate Medical University offer financial assistance, so expectant parents can afford the classes.