

## AMBULATORY SURGERY CENTER OPENING SOON



**S**cheduled to open in January 2001, the new Ambulatory Surgery Center at Stony Brook will be located on Loop Road at the south entrance to University Hospital and Medical Center. The spacious, state-of-the-art facility (32,000 square feet) is designed to create a comfortable, stress-free outpatient surgery experience for both adult and pediatric patients.

The Center will have six operating rooms and two minor procedure rooms—all with the latest equipment and monitors.

Consistent with the latest concepts in ambulatory surgery, the recovery area will be divided into two stages. The first-stage room will be a conventional recovery area and set up for those patients requiring more frequent observation.

But many patients will go directly to a second-stage room where they can be fed, enjoy their families, and relax before going home—thanks to new short-acting anesthetics, combined with minimally invasive surgical techniques, that are allowing more and more patients to bypass the conventional recovery process with minimal, if any, pain or nausea.

The Center's planners have paid particular attention to the needs of children and their families. There will be pediatric play areas with specially designed furniture for children, as part of our effort to make their experience as pleasant as possible.

Easy accessibility for both patients and surgeons is a high priority of the Center. Parking will be easy, plentiful, and free of charge.

The Center will also house the preoperative testing area for inpatient surgery. This area will allow patients to have their inpatient preoperative lab tests, EKGs, chest x-rays, and history / physicals all done in one easy visit.

### THE STONY BROOK CENTER FOR MINIMALLY INVASIVE SURGERY PROVIDES THESE MINIMALLY INVASIVE LAPAROSCOPIC OPERATIONS:

- **Adrenalectomy** (removal of one or both adrenal glands)
- **Anti-reflux fundoplication** (Nissen and Toupet procedures; treatment of gastroesophageal reflux disease)
- **Appendectomy** (removal of appendix)
- **Cholecystectomy** (removal of gallbladder)
- **Colectomy** (removal of part or all of the colon)
- **Common bile duct exploration** (identification and removal of bile duct stones)
- **Feeding jejunostomy** (insertion of feeding tube in small intestine, as well as cancer staging)
- **Inguinal hernia repair** (treatment of groin hernia)
- **Liver biopsy** (diagnosis of liver disease)
- **Myotomy** (Heller procedure; treatment of achalasia)
- **Paraesophageal hernia repair** (treatment of stomach hernia)
- **Peritoneal dialysis catheter placement** (abdominal catheter for dialysis)
- **Small bowel resection** (removal of part of intestine)
- **Splenectomy** (removal of spleen)
- **Ventral hernia repair** (treatment of abdominal wall hernia)

**Note: As the range of different laparoscopic operations continues to expand, more minimally invasive options will be available in the future.**

*For appointments/consultations with a surgeon of the Stony Brook Center for Minimally Invasive Surgery, please call (631) 444-4545.*

# INTRODUCING OUR NEW PLASTIC SURGEON AND DIVISION CHIEF



Dr. Alexander B. Dagum

In November, Alexander B. Dagum, MD, joined our faculty as associate professor of surgery and chief of plastic and reconstructive surgery. He comes to us from Lakeridge Health Oshawa (formerly Oshawa General Hospital) in Oshawa, Ontario, Canada, where he has been chief of plastic surgery. He received his MD (magna cum laude/gold medalist) from the University of Ottawa in 1987, and he subsequently completed his training in plastic surgery at the University of Toronto in 1993. That year he was awarded certification in plastic surgery from the Royal College of Physicians and Surgeons of Canada.

Dr. Dagum then completed two years of fellowship training in hand surgery and microsurgery, the first at the University of Toronto (St. Michael's Hospital), and the second here at Stony Brook in the orthopaedics department. Following this training, he returned to Canada where he became a lecturer at the University of Toronto.

Since 1994, Dr. Dagum has been a fellow of the Royal College of Surgeons of Canada (FRCSC), and since 1999, a fellow of the American College of Surgeons (FACS).

His special clinical interests include hand and microsurgery, breast reconstruction, craniofacial surgery, and cutaneous oncology. During the past year he was the cutaneous oncology resource physician for Cancer Care Ontario, the province of Ontario's healthcare agency dedicated to providing cancer care.

An active researcher, Dr. Dagum recently served for three years as the joint director of research in the hand program at the University of Toronto. His current research interests include evidence-based and clinical outcomes studies and biomechanics.

Dr. Dagum has published numerous peer-reviewed articles in journals, book chapters, and research abstracts. Also active in professional organizations, he recently served as president of the Ontario Society of Plastic Surgeons and as chair of the Ontario Medical Association's Section of Plastic Surgery.

For consultations/appointments with Dr. Dagum, please call (631) 444-4545.



## THE STONY BROOK LEG AND FOOT ULCER TREATMENT GROUP

*A multidisciplinary team of wound care specialists in East Setauket*

- Comprehensive patient care
- Early intervention
- Improved healing rates
- Reduced hospitalization
- Reduced amputations
- Reduced disability
- Community outreach

For consultations/appointments, please call (631) 444-4545.



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# RAPAPORT RETIRES FROM STONY BROOK



Dr. Felix T. Rapaport

In October, Felix T. Rapaport, MD, SUNY distinguished professor (now emeritus) and founder of our Division of Transplantation, retired after 23 years of service. A special convocation, planned for early December, will honor him for his diverse contributions to the University at Stony Brook as a physician, teacher, administrator, and scholar.

Until Dr. Rapaport's arrival at Stony Brook in 1977, Long Islanders in need of a lifesaving kidney transplant were forced to seek services in New York City. More than 400 transplants were performed here during his tenure as chief of the transplantation service.

Dr. Rapaport has long been recognized as a leading force in the field of organ transplantation. Among his many academic accomplishments is the historic first demonstration of tissue types in man, based upon skin grafting studies in which he characterized immunological responses to skin allografts.

In the following 17 years, working along with Dr. Jean Dausset of the University of Paris, he helped develop the human leukocyte antigen (HLA) system, and the definition of the biological laws which govern transplantation in man. For this discovery

which laid the scientific foundation for human organ transplantation, Dr. Dausset was awarded the 1980 Nobel Prize for Medicine and Physiology.

*Until Dr. Rapaport's arrival at Stony Brook in 1977, Long Islanders in need of a lifesaving kidney transplant were forced to seek services in New York City.*

Dr. Rapaport did not limit his achievements to the transplant field. He provided the original demonstration of the loss of cellular immunity in severe trauma and burns and in malignant disease. He was also the first to uncover immunological cross-reactivity between mammalian histocompatibility antigens and bacterial cell membrane antigens—a finding of great potential importance in the field of xenotransplantation.

Still another contribution of major import was Dr. Rapaport's demonstration that host resistance to thermal and radiation injury is genetically controlled and sex-linked.

## A DISTINGUISHED CAREER

Dr. Rapaport has published 20 books and more than 500 scientific articles. As editor-in-chief of *Transplantation Proceedings*, one of the most influential journals in surgery, he has been for the past three decades—and in his retirement will continue to be—a key factor in fostering the timely dissemination and sharing worldwide of new scientific advances in transplantation.

A founding officer of the Transplantation Society, the world's leading organization of experts in transplantation biology and medicine

(he served as the society's president from 1978 to 1980), Dr. Rapaport has been its permanent international secretary and historian since 1990, and will continue to serve in this capacity.

Over the years, in recognition of his professional achievements and contributions, Dr. Rapaport has received numerous high honors. Among them—to mention just a few—are the Transplantation Society's Medawar Prize, regarded as the ultimate accolade of world transplantation; the first Founders Award of the International Society for Organ Sharing; the decorations of France's Legion of Honor and Argentina's Order of May; and the first Samuel L. Kountz Award of the Howard University Transplant Center and the National Institutes of Health-National Institute of Diabetes and Digestive and Kidney Diseases.

Dr. Rapaport's distinguished career began at New York University where he graduated in 1954, did his surgical residency and subsequently joined the faculty, rising to the rank of professor and director of the transplantation and immunology division in the surgery department there. He then joined our surgical faculty at Stony Brook in 1977, and established the transplantation program.

In 1995, Dr. Rapaport was appointed to a SUNY distinguished professorship—the highest academic rank in the State University of New York, and the first at this rank in the clinical sciences at Stony Brook.

# CONTRIBUTING TO THE NEW LUNG CANCER EVALUATION CENTER

## *Offering Patients the Benefits Of Multidisciplinary Care*

This fall the Cancer Institute of Long Island at Stony Brook established a new program in comprehensive patient care called the Lung Cancer Evaluation Center. The clinical program brings together all the different specialists needed to care for patients with known or suspected lung cancer, as well as those individuals at special risk of developing lung cancer.

Our thoracic surgeons—Thomas V. Bilfinger, MD, ScD, clinical professor of surgery; Allison J. McLarty, MD, assistant professor of surgery; and Adam E. Saltman, MD, PhD, assistant professor of surgery—will be active members of the Center's multidisciplinary team.

*Now patients who have x-ray abnormalities that might represent lung cancer, or patients who have a known diagnosis of cancer, can undergo evaluation by all of the physicians involved in the diagnosis and treatment of lung cancer.*

Sharona Sachs, MD, assistant professor of clinical medicine, is the program director and principal pulmonologist. John J. Fiore, MD, associate professor of clinical medicine, is the principal oncologist in the new program.

Now at Stony Brook, patients who have x-ray abnormalities that might represent lung cancer, or patients who have a known diagnosis of cancer, can undergo evaluation by all of the physicians involved in the diagnosis and treatment of lung cancer—lung specialists, cancer specialists, thoracic surgeons, and radiation therapy specialists, all with particular interest and expertise in lung cancer.

At the conclusion of the initial visit, each patient's case has been reviewed by all of these different specialists. A plan for diagnosis or treatment is then formulated based on their combined expert opinion. Patients and their families have an opportunity to discuss their questions about lung cancer and all of the options for diagnosing and treating it with the physician who specializes in the particular option that is recommended for them.

At that same visit, all diagnostic tests that are required for treatment are scheduled, and all follow-up arrangements for care are made by our program coordinator.

## THE BENEFITS OF MULTIDISCIPLINARY CARE

The multidisciplinary approach to medical care means simultaneous assessment by all of the specialists whose expertise is required to offer the best solution to a problem. In the case of known or suspected lung cancer, there are several ways to approach diagnosis and treatment, depending on the appearance and location of the x-ray abnormalities and on the health and preferences of each individual patient.

Diagnosis might involve participation from pulmonologists, radiologists, or thoracic surgeons. Treatment might involve any combination of chemotherapy, surgery, and/or radiation.

*(Continued on Page 8)*

## FREE VASCULAR SCREENINGS

The Stony Brook Vascular Center will provide free-of-charge comprehensive vascular screenings—in East Setauket and in Hampton Bays—to evaluate members of the community for:

- Stroke risk
- Peripheral vascular disease
- High cholesterol
- Diabetes
- Abdominal aortic aneurysm

To qualify for these screenings, one must be over 60 years old and have at least ONE of the following conditions/risk factors:

- High blood pressure
- Diabetes
- Previous stroke or mini-stroke
- Current or past smoker
- High cholesterol
- History of heart attack or angina
- Family history of abdominal aortic aneurysm
- Family history of cardiovascular disease

### EAST SETAUKET

#### When:

Saturday, November 11, 2000  
Saturday, December 16, 2000  
9:00 AM to 5:00 PM

#### Where:

Stony Brook Surgical Care Center  
37 Research Way

### HAMPTON BAYS

#### When:

Saturday, December 2, 2000  
Saturday, January 6, 2001  
9:00 AM to 5:00 PM

#### Where:

Stony Brook Outpatient Services Center  
225 West Montauk Highway

*These screenings are made possible by grants from the Bristol-Myers Squibb Company and Sanofi Pharmaceuticals, Inc. To make an appointment, please call (631) 444-4393.*

# Research Focus

## New Multi-Center Study Of Carotid Endarterectomy In Coronary Bypass Surgery

In April, John J. Ricotta, MD, professor and chairman of surgery, was awarded a \$1 million grant from the National Institutes of Health to conduct a multi-center pilot study to test his hypothesis that carotid endarterectomy (CEA) reduces the risk of perioperative stroke in at-risk patients undergoing heart surgery for coronary artery bypass grafting (CABG). Stroke is the most serious non-cardiac complication of CABG surgery.

Called the CABEST study (Coronary Artery Bypass and Endarterectomy Staging Trial), this clinical research will take three years to complete, during which time Dr. Ricotta intends to collect data on 300 patients.

Stony Brook University Hospital and Medical Center is the coordinating center in this study. The other participating centers are: Sentara Norfolk General Hospital in Norfolk, VA (affiliated with the University of Virginia); New England Heart Institute at the Catholic Medical Center in Manchester, NH; Indiana University Medical Center in Indianapolis, IN; and the University of Arkansas for Medical Sciences Medical Center in Little Rock, AR.

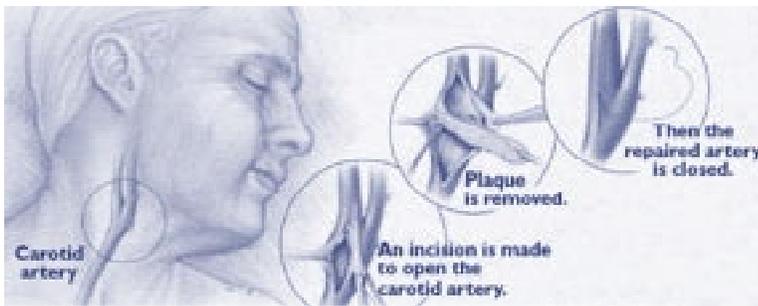
### *When is it best to perform carotid endarterectomy in order to reduce the risk of stroke during/after coronary bypass surgery?*

Patients are being randomized into one of four assignments. If the patient is symptomatic, he/she will be randomized into either a staged procedure with CEA performed first, followed by CABG, or into a combined CEA/CABG procedure. Asymptomatic patients will be randomized into either a staged procedure with CABG first, followed by CEA, or into a combined CEA/CABG procedure.

At present, there is disagreement on the optimal way to treat patients who require both CABG and CEA. Some surgeons do both operations under the same anesthetic, while others do each operation separately. Published experience in the medical literature has not shown a clear benefit for any one method of treatment.

Dr. Ricotta hopes to show that one of the methods is safer than the others, resulting in fewer strokes, heart attacks and deaths. When this pilot study is completed, he plans to go on to do an even larger study, involving more than 20 different medical centers.

For more information, please call the CABEST coordinator at (631) 444-2017.



## *Carotid Endarterectomy and Stroke Prevention*

Well established as a measure to prevent stroke, carotid endarterectomy is a vascular operation in which the surgeon removes an obstruction in the carotid (neck) artery caused by atherosclerosis, commonly known as hardening of the arteries.

The problem corrected by this operation is due to arterial disease. As we age, our arteries narrow. They lose their flexibility and the linings crack. When the arteries in the neck begin to narrow, blood clots may develop. The carotid artery may become completely blocked or a piece of clot may break off and travel to the brain. In both cases a stroke may result.

Risk of stroke increases as the artery becomes more and more narrow. The risk is particularly high after the artery is blocked more than 70%. The amount of blockage may be determined by a simple painless test called a "carotid Doppler" or "carotid ultrasound."

People at greatest risk for carotid artery narrowing are those over age 65 (particularly smokers) and those who already have poor circulation in the legs or their heart. Patients who have temporary loss of vision or speech and/or weakening of an arm or leg may have had a "mini-stroke" and should see their doctor.

Carotid endarterectomy by an experienced surgeon is a very effective way to reduce the risk of stroke. People who are considering carotid endarterectomy should ask their potential surgeon about his/her experience and results. In general, the chance of complication occurring during surgery should be less than 4% in stable patients.

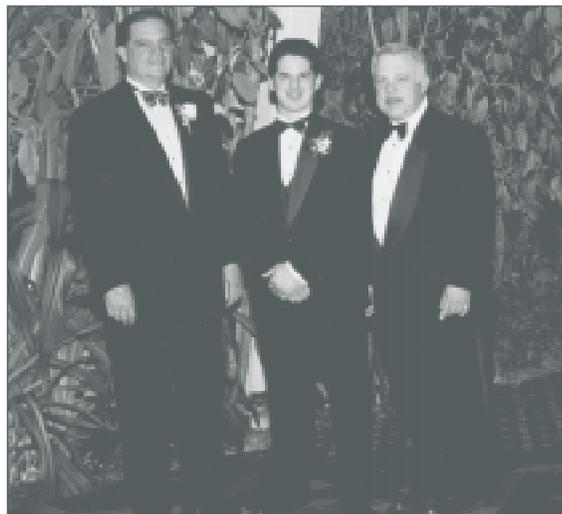
Carotid disease is only one of several types of hardening of the arteries. Our vascular surgeons perform a broad range of operations including carotid endarterectomy to correct arterial problems.

# Residency Update

*Our fully accredited five-year nonpyramidal residency program fulfills the standards for professional excellence adopted by the American Board of Surgery, and leads to Board eligibility. Our residents receive a broad-based surgical education, which includes not only the clinical but the biological aspects of surgery as well, and provides the foundation for a successful career in private practice, research, or academic surgery. Five surgical residents are selected each year through the National Resident Matching Program.*



*Dr. John Ricotta (left) and Dr. Eugene Mohan (right) with our 2000 graduating chief residents (from left to right), Drs. Luis Angarita, Jaroslaw Bilaniuk, Daniel Char, Hassan Reda, and Gustavo Torres, at the graduation banquet held on June 4.*



*Our graduating otolaryngology resident (center), Dr. Louis Sobol, with Dr. John Ricotta (left) and Dr. Arnold Katz (right).*

## 2000 Graduating Chief Residents

<u>Name</u>	<u>Medical School (Grad. Year)</u>
Luis Angarita, MD	Central U of Venezuela ('92)
Jaroslaw Bilaniuk, MD	SUNY-Stony Brook ('95)
Daniel Char, MD	SUNY-Stony Brook ('95)
Hassan Reda, MD	American U of Beirut ('95)
Gustavo Torres, MD	Francisco Marroquin U ('93)

<u>Career Direction</u>
Colorectal Surgery Fellowship at Baylor University
Critical Care Fellowship at SUNY-Stony Brook
Vascular Surgery Fellowship at SUNY-Stony Brook
Cardiothoracic Surgery Fellowship at U of Texas (Galveston)
Vascular Surgery Fellowship at U of Southern California

## New Chief Residents

<u>Name</u>	<u>Medical School (Grad. Year)</u>
Behdad Aryavand, MD	Ross U ('95)
Chad Caldwell, MD	Medical College of Pennsylvania ('96)
Jonas DeMuro, MD	SUNY-Stony Brook ('96)
Hector Dourron, MD	U of Buenos Aires ('94)
James Vosswinkel, MD	SUNY-Syracuse ('95)

## Incoming Residents/All Categorical PGY-1\*

<u>Name</u>	<u>Medical School (Grad. Year)</u>
Robert Bernstein, MD	NY Medical College ('00)
Vincent Campasano, MD	SUNY-Brooklyn ('00)
Solomon David, MD	SUNY-Albany ('00)
Mark Gelfand, MD	SUNY-Syracuse ('00)
Roger Kim, MD	Northwestern U ('00)

\* As of July 1, 2000.



*Our graduating vascular surgery resident (second from left), Dr. Michael Klyachkin, with our vascular faculty (left to right), Drs. John Ricotta, Fabio Giron, David Gitlitz, Rishad Faruqi, and Paul van Bemmelen.*

# FIRST ANNUAL DAVID J. KREIS, JR., AWARD FOR EXCELLENCE IN TRAUMA SURGERY

*At the graduation banquet held on June 4, trauma nurse coordinator Jane E. McCormack, RN, made the following presentation:*

“ I am here tonight to announce a new annual resident award, created and funded by the Division of Trauma and Surgical Critical Care in honor of Dr. David Kreis, Jr. Many of you did not have the opportunity to know him, but I did, and I am pleased tonight to tell you a little bit about him and this award.

David Kreis was the first chief in the Division of Trauma. He came to Stony Brook in 1986 with a simple mission—to build a world-class trauma center. He was well on his way to that end when his life was cut short by cancer and he passed away in 1989.



*Dr. David J. Kreis, Jr., (right) with residents on teaching rounds.*

Dr. Kreis left behind the foundation upon which the trauma center at Stony Brook rests today. He was the force behind the Medivac helicopter in the county. He created the trauma research laboratory. He brought the ATLS [Advanced Trauma Life Support] course to the region. He had a hand in many other programs too numerous to mention.

Even with these many accomplishments, Dave Kreis remained

down to earth—a regular guy.

Dave Kreis was the ultimate team player. He knew each and every member of the trauma team, from the sub-specialty attendings to the housekeepers. He made sure we all did our best. He held us to high standards, provided instruction if we needed it, and set us straight if we needed to be set straight. He led by example and never asked of us what he himself was not willing to do. He was an unparalleled leader.

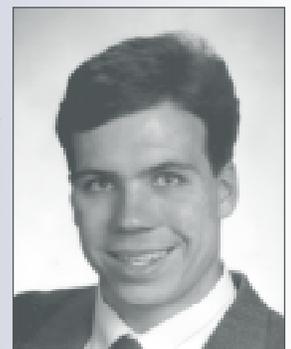
Dave was a man who balanced the demands of his many roles and made it look easy. I think, more importantly, he made it look like fun. He loved to operate. He loved his family. He loved to teach. He loved a good lively discussion. He loved the Grateful Dead. He loved a challenge. Perhaps Dave's greatest gift was that he got other people—particularly residents—to share his passion for trauma surgery.

Dr. Kreis was an important figure in trauma surgery both nationally and locally. It is fitting that we honor his contributions to our community and to our Department with this award. In addition to this plaque tonight, the recipient will receive funds to attend the annual meeting of the Eastern Association for the Surgery of Trauma.

The David J. Kreis, Jr., Award for Excellence in Trauma Surgery recognizes the unique characteristics that make a trauma surgeon—the characteristics Dave Kreis personified: integrity, educational acumen, leadership, and excellence both in clinical practice and medical research. All together, the certain “something” that makes a trauma surgeon.

On behalf of the Division of Trauma and Surgical Critical Care, I am pleased to announce the first recipient of the David J. Kreis, Jr., Award for Excellence in Trauma Surgery. For the year 2000, the recipient is Dr. James Vosswinkel. ”

Dr. James A. Vosswinkel, a chief resident since July 2000, received his MD in 1995 from SUNY-Syracuse, and then entered our residency training program in general surgery. He quickly gained the respect of the entire surgical faculty for his clinical and academic excellence.



*Dr. James A. Vosswinkel*

Also an impressive young scholar, Dr. Vosswinkel has published five peer-reviewed articles during the course of his residency, three of which are in the field of trauma/surgical critical care:

- **Vosswinkel JA**, Bilfinger TV. Cardiac nail gun injuries: lessons learned. *J Trauma* 1999;47:588-90.
- **Vosswinkel JA**, McCormack JE, Brathwaite CE, Geller ER. Critical analysis of injuries sustained in the TWA Flight 800 midair disaster. *J Trauma* 1999;47:617-21.
- **Vosswinkel JA**, Brathwaite CE, Smith TR, Ferber JM, Casella G, Garlick PJ. Hyperventilation increases muscle protein synthesis in critically ill trauma patients. *J Surg Res* 2000;91:61-4.

At present, Dr. Vosswinkel intends to pursue fellowship training in trauma/surgical critical care after completing his residency training at Stony Brook.

# OUR ELECTRONIC PHYSICIAN DIRECTORY



The Department provides a physician directory as part of its website—please visit us at the following address to find information about our individual surgeons (see sample page below), as well as our programs in patient care, education, research, and community service:

[www.uhmc.sunysb.edu/surgery](http://www.uhmc.sunysb.edu/surgery)



Dr. Arnold E. Katz

**MD:** Washington University (1967).

**Residency Training:** General Surgery, St. John's Mercy Medical Center, St. Louis, MO; Otolaryngology, University of Iowa Hospital and Clinic.

**Board Certification:** Otolaryngology.

**Specialties:** Management of diseases of the ear, nose and throat; repair of cleft palate and other congenital facial abnormalities; head and neck cancers; facial reconstruction.

**Additional:** Chief of Otolaryngology-Head and Neck Surgery; Fellow, American College of Surgeons (FACS);

see selected recent publications.

**Honors:** One of the "Doctors of Excellence" featured in past editions and the latest edition (2000) of the Castle Connolly Guide, *How to Find the Best Doctors—New York Metro Area*.

**Language Spoken:** English.

**Consultations/Appointments:** 631-444-4121.

**Email** (to contact Dr. Katz directly): [katz@surg.som.sunysb.edu](mailto:katz@surg.som.sunysb.edu)

## Lung Cancer Evaluation Center

(Continued from Page 4)

When patients with possible lung cancer are evaluated outside of a multidisciplinary program, they often see a number of different doctors on many different days. This process usually allows for gathering of all of the opinions required to deliver appropriate care, but is inconvenient and anxiety provoking.

When a patient is seen at the Lung Cancer Evaluation Center, his or her case is reviewed by a pulmonologist, a thoracic surgeon, an oncologist, and a radiation oncologist, so that a comprehensive plan is generated from *just one visit*.

In this way, anxiety, delay, and inconvenience are minimized. Communication among all of the specialists involved is ensured as well, and patients can directly address their questions and concerns to the principal specialist involved in their care.

The multidisciplinary approach also facilitates access to all of the latest developments in each of the specialties—oncology, pulmonary medicine, radiation, and surgery—touching upon cancer care.

## OFFERING A FULL RANGE OF CARE

The Lung Cancer Evaluation Center is meant to be a resource for patients who have chest x-ray abnormalities that might be lung cancer, for patients who have an established diagnosis of lung cancer, or for individuals who are at special risk of developing lung cancer because of family history, occupational

(Continued on Page 11)

## Some Recent Publications\*

**Bilfinger TV, Reda H, Giron F, Seifert FC, Ricotta JJ.** Coronary and carotid operations under prospective standardized conditions: incidence and outcome. *Ann Thorac Surg* 2000;69:1792-8.

**Bilfinger TV, Stefano GB.** Human aortocoronary grafts and nitric oxide release: relationship to pulsatile pressure. *Ann Thorac Surg* 2000;69:480-5.

**Bilfinger TV, Vosswinkel JA, Rialas CM, Krukenkamp IB, Stefano GB.** Functional assessment of disease-free saphenous vein grafts at redo coronary artery bypass grafting. *Ann Thorac Surg* 2000;69:1183-7.

Brink PR, **Ricotta J**, Christ GJ. Biophysical characteristics of gap junctions in vascular wall cells: implications for vascular biology and disease. *Braz J Med Biol Res* 2000;33:415-22.

Cadet P, **Bilfinger TV**, Fimiani C, Peter D, **Stefano GB.** Human vascular and cardiac endothelia express mu opiate receptor transcripts. *Endothelium* 2000;7:185-91.

Caiati JM, Kaplan D, **Gitlitz D**, Hollier LH, Marin ML. The value of the oblique groin incision for femoral artery access during endovascular procedures. *Ann Vasc Surg* 2000;14:248-53.

Caso G, Scalfi L, Marra M, Covino A, Muscaritoli M, **McNurlan MA, Garlick PJ**, Contaldo F. Albumin synthesis is diminished in men consuming a predominantly vegetarian diet. *J Nutr* 2000;130:528-33.

Cersosimo E, **Garlick P**, Ferretti J. Regulation of splanchnic and renal substrate supply by insulin in humans. *Metabolism* 2000;49:676-83.

Cersosimo E, **Garlick P**, Ferretti J. Renal substrate metabolism and gluconeogenesis during hypoglycemia in humans. *Diabetes* 2000;49:1186-93.

Chuter TA, Lukaszewicz GC, Reilly LM, Kerlan RK, **Faruqi R**, Sawhney R, Wall SD, Canto C, LaBerge JM, Gordon RL, Messina LM. Endovascular repair of a presumed aortoenteric fistula: late failure due to recurrent infection. *J Endovascular Ther* 2000;7:240-4.

Chuter TA, Reilly LM, **Faruqi RM**, Kerlan RB, Sawhney R, Canto CJ, LaBerge JM, Wilson MW, Gordon RL, Wall SD, Rapp J, Messina LM. Endovascular aneurysm repair in high-risk patients. *J Vasc Surg* 2000;31(1 Part 1):122-32.

Chuter TA, Reilly LM, Kerlan RB, **Faruqi RM**, Sawhney R, Wall SD, Canto CJ, LaBerge JM, Gordon RL, Messina LM. Endovascular repair of a presumed aorto-enteric fistula. Late Failure due to recurrent infection. *J Endovasc Ther* 2000;7:240-4.

Dvali LT, **Dagum AB**, Pang CY, Kerluke LD, Catton P, Pennock P, Mahoney JL. Effect of radiation on skin expansion and skin flap viability in pigs. *Plast Reconstr Surg* 2000;106:624-9.

(Continued on Page 10)

\* The names of faculty authors appear in boldface

# Alumni News

*Since the class of 1975 entered the profession of surgery, 144 physicians have completed their residency training in general surgery at Stony Brook. The alumni of our residency program now practice surgery throughout the United States, as well as in numerous other countries around the world.*

**Dr. Juan R. Madariaga** ('79), an associate professor of surgery at the University of Pittsburgh and a member of the transplant team of the Thomas E. Starzl Transplantation Institute, has gained recognition as a leading international expert in liver resections and also the surgical treatment of hepatobiliary diseases and bile duct tumors. He is an active liver transplant surgeon, and has performed more than 500 resections and liver transplants.

Dr. Madariaga's clinical interests center on the surgical management of liver and biliary tumors as well as biliary complications, liver transplantation as treatment for end-stage liver disease and for primary and metastatic liver tumors, transplantation of living-related donor livers, and experimental studies in liver regeneration.

His research interests reflect current critical problems in liver trans-

plantation and donor availability. He is studying the effects of growth factors in liver regeneration, in the laboratory as well as in the clinical practice, with the hope that small liver grafts can eventually be used for larger recipients. This approach could increase the number of grafts available for transplantation, effectively increasing the donor pool. He is also conducting experimental studies in liver preservation, as another way to help increase donor organ availability.

To date, Dr. Madariaga has authored 60 articles and 30 abstracts, and has co-edited (with Renzo Dionigi) one book, *New Technologies for Liver Resections* (Karger, 1997).

This year's journal publications include:

- **Madariaga JR**, Fung J, Gutierrez J, Bueno J, Iwatsuki S. Liver resection combined with excision of vena cava. *J Am Coll Surg* 2000;191:244-250.
- **Madariaga JR**, Reyes J, Mazariegos G, Fung JJ, Starzl TE, Abu-Elmagd K. The long-term efficacy of multivisceral transplantation. *Transplant Proc* 2000;32:1219-20.
- Bueno J, Abu-Elmagd K, Mazariegos G, **Madariaga J**, Fung J, Reyes J. Composite liver—small bowel allografts with preservation of donor duodenum and hepatic biliary system in children. *J Pediatr Surg* 2000;35:291-6.
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Dr. Madariaga is currently the principal investigator of a randomized, singled-blind standard treatment controlled, parallel group multicenter study of the efficacy of Octacol F15 (Quixil) in reducing the time required to achieve hemostasis during liver resection.

**Dr. Frank L. Ross** ('90) is pleased to report that he and his wife just had their first baby, Justin Michael Ross, who was born on September 1.

**Dr. Jonathan P. Yunis** ('90) is currently in private practice as a general and vascular surgeon in Sarasota, FL; he is a member of a four-man group practice called Vascular and Surgery Associates (VASA). After completing his fellowship in vascular surgery at Stony Brook, he had moved to St. Petersburg, FL, where he practiced as a general surgeon and as the sole vascular surgeon for a 40-member multispecialty group. While in St. Petersburg, he served on the Medical Ethics committee and as the chairman of the Surgical Quality Assurance Committee at St. Anthony's Hospital.

In 1995, Dr. Yunis moved to Sarasota. He brought a large clinical experience to VASA. His clinical results in carotid, aneurysm, and extremity bypass surgery are superior to many reported series from major medical centers. Moreover, his knowledge and skills have resulted in several requests for television appearances and newspaper commentaries.

Dr. Yunis has continued his education with extensive training in endovascular skills including endovascular aortic aneurysm repair. Other achievements include performance of the first laparoscopic ventral hernia repair in the Sarasota area. He has recently spent time at the University of Chicago Medical School, the Shouldice Hernia Clinic in Toronto, and the Miami Hernia Center in his effort to provide a state-of-the-art approach to the management of hernias.

*(Continued on Page 11)*

## In Memory Of **Iman Karimpour, MD**

1966-2000

*Dr. Iman Karimpour ('99),  
who was pursuing fellowship  
training in cardiothoracic surgery  
at SUNY-Downstate Medical Center,  
died on July 1.*

Born in Iran, Iman had originally been motivated to become a physician because of his experience as a teenaged volunteer in the ER of a Tehran hospital during the Iran-Iraq war. He subsequently received his MD from George Washington University in 1994, and graduated from our residency program last year.

## Recent Publications

(Continued from Page 8)

**Faruqi RM**, Chuter TA, Reilly LM, Sawhney R, Wall S, Canto C, Messina LM. Endovascular repair of abdominal aortic aneurysm using a pararenal fenestrated stent-graft. *J Endovasc Surg* 1999;6:354-8.

Fimiani C, Magazine H, Welters ID, **Bilfinger TV**, Salsano F, Tonnesen E, **Stefano GB**. Antagonism of LPS and IFN-gamma induced iNOS expression in human atrial endothelia by morphine, anandamide, and estrogen. *Acta Pharmacol Sin* 2000;21:405-9.

Gamrin L, Essen P, Hultman E, **McNurlan MA**, **Garlick PJ**, Wernerman J. Protein-sparing effect in skeletal muscle of growth hormone treatment in critically ill patients. *Ann Surg* 2000;231:577-86.

Gaudette GR, **Krukenkamp IB**, **Saltman AE**, Horimoto H, Levitsky S. Preconditioning with PKC and the ATP-sensitive potassium channels: a codependent relationship. *Ann Thorac Surg* 2000;70:602-8.

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Horimoto H, Gaudette GR, **Saltman AE**, **Krukenkamp IB**. The role of nitric oxide, K-ATP(+) channels, and cGMP in the preconditioning response of the rabbit. *J Surg Res* 2000;92:56-63.

Januszkiewicz A, Essen P, **McNurlan MA**, Ringden O, Wernerman J, **Garlick PJ**. In vivo protein synthesis of circulating human T lymphocytes does not respond to a cortisol challenge within 24 h. *Acta Anaesthesiol Scand* 2000;44:202-9.

**Kemeny MM**. The use and outcomes of outpatient mastectomy in Florida [editorial]. *Am J Surg* 2000;179:259.

Kovalev S, Mateen A, Zaika AI, **O'Hea BJ**, Moll UM. Lack of defective expression of the ATM gene in sporadic breast cancer tissues and cell lines. *Int J Oncol* 2000;16:825-31.

Madoff DC, **Brathwaite CE**, Manzione JV, Bilaniuk JW, **Giron F**, Char D, Choi J, **Bilfinger TV**. Coexistent rupture of the proximal right subclavian and internal mammary arteries after blunt chest trauma. *J Trauma* 2000;48:521-4.

**Maitra SR**, Wang SY, **Brathwaite CE**, El-Maghrabi MR. Alterations in glucose-6-phosphatase gene expression in sepsis. *J Trauma* 2000;49:38-42.

**Maitra SR**, Wang SY, El-Maghrabi MR, Henry MC. Regulation of liver and kidney glucose-6-phosphatase gene expression in hemorrhage and resuscitation. *Acad Emerg Med* 2000;7:731-8.

**Maitra SR**, Wojnar MM, Lang CH. Alterations in tissue glucose uptake during the hyperglycemic and hypoglycemic phases of sepsis. *Shock* 2000;13:379-85.

(Continued on Page 11)

## Division Briefs

### Cardiothoracic Surgery

**Dr. Adam E. Saltman**, assistant professor of surgery and physiology/biophysics, in June completed a training course in laser transmyocardial revascularization (TMR), and can now perform **laser revascularization of the heart**. Also in June, he became a Diplomate of the American Board of Thoracic Surgery.

### Education

**Dr. Joseph J. Sorrento, Jr.**, assistant professor of surgery and head of the education division, received an **Aesculapius Award for Excellence in Teaching** in June. This award was given to only three faculty members in the entire medical school.

### General/Gastrointestinal Surgery

In October, the **Center for Minimally Invasive Surgery** was highlighted in the Long Island section of the *New York Times*.

### Otolaryngology-Head and Neck Surgery

**Dr. Eric E. Smouha**, associate professor of surgery and neurological surgery, gave two lectures in May at professional meetings: "Management of Positional Vertigo" at the Connecticut State ENT Society Meeting, held in Cromwell, CT; and "Computer-Aided Surgical Planning for Congenital Aural Atresia" at the Annual Meeting of the American Neurotology Society, held in Orlando, FL. In June, he lectured on vertigo surgery at a program on the management of challenges in otology, held at the Weill Medical College of Cornell University in New York. In July, at the Sixth International Conference on Cholesteatoma and Ear Surgery, held in Cannes, France, he made two presentations, "Cholesteatoma in the Normal-Hearing Ear" and "Cholesteatoma after Stapedectomy."

### Surgical Oncology

**Dr. M. Margaret Kemeny**, professor of surgery (interim) and chief of surgical oncology, in October presented the Second Annual Daniel M. Miller, M.D., Distinguished Lecture in Surgical Oncology at the University of Nebraska Medical Center in Omaha. The title of her lecture was "Regional Treatment of Liver Metastases from Colon Cancer." In November, Dr. Kemeny was elected to the Board of Governors of the American College of Surgeons as a Specialty Society Governor from the Association of Women Surgeons; her term will end in 2003.

### Trauma/Surgical Critical Care

**Dr. Subir R. Maitra**, research associate professor of surgery and emergency medicine, last May at the 2000 Annual Meeting of the Society for Academic Emergency Medicine, held in San Francisco, presented his basic science study titled "Alterations in Hepatic Glucose Output and Signal Transduction Pathways in Late Hemorrhage/Resuscitation" (authors: Maitra SR, Aksehirl T, Khan T, Henry MC).

In June, he presented two additional studies at the 23rd Annual Conference on Shock held in Snowbird, UT: "Regulation of Glucose-6-Phosphatase Gene Expression in Sepsis" (authors: Maitra SR, El-Maghrabi MR, Brathwaite CE) and "Alterations in Glucose-6-Phosphatase Gene Expression in Late Hemorrhage/Resuscitation" (authors: Aksehirl T, Khan T, Barrington D-S, Maitra SR).

### Vascular Surgery

**Dr. Rishad M. Faruqi**, assistant professor of surgery, has received two research grants, one (\$30,000) from SUNY-Stony Brook's 2000 Targeted Research Opportunities Program for a study titled "Preoperative Planning of Endovascular Repair of AAA," of which he is the sole investigator; and the other (\$80,000) from the New York State Center for Biotechnology

together with Viatronix, Inc., for a study titled "3D Analysis of Aortic Aneurysms and Stent Grafts," on which he is collaborating with four other investigators. Both studies were started in July.

**Dr. Paul S. van Bemmelen**, assistant professor of surgery, and the team of the Leg and Foot Ulcer Treatment Group are currently **using intermittent compression therapy for limb-loss prevention** in patients who are not good candidates for surgical bypass. This involves the use of a massage device, which the patient uses at home. Reports from other centers using this method to increase circulation in patients with limited walking have been promising.

## Lung Cancer Center

(Continued from Page 8)

exposure to chemicals known to cause lung cancer, or heavy tobacco use.

The combined evaluation by our specialists can offer the best means of determining whether a chest x-ray abnormality is cancerous, treating an abnormality that is known to be lung cancer, and screening patients at high risk of developing lung cancer with the latest available technologies.

At the time of the initial visit, all of the tests necessary to determine the best course of care are arranged if they have not already been completed. Once the results of these tests are known, a plan of care is developed and discussed at length with each patient.

If a patient has a pre-established relationship with a doctor, or is seeking a second opinion, the recommendations of the multidisciplinary group of physicians are communicated to the physician of the patient's choice.

If a patient wishes, he or she may continue with the care of the physicians in the program.

For more information about the Center, please call Dr. Sachs at (631) 444-1776.

For consultations/appointments, please call the program coordinator, Karen Sanders, RN, at (631) 444-1820.

## Alumni News

(Continued from Page 9)

**Dr. John J. Doski** ('93), co-founder of San Antonio Pediatric Surgery Associates in Texas, recently received board certification in pediatric surgery; last year, he completed his pediatric surgery fellowship at the University of Texas Southwestern Medical Center in Dallas.

**Dr. Kelly M. James** ('93), who was admitted into Fellowship of the American College of Surgeons in October 1999, is now chairman of the surgery department of the Independence Regional Health Center, a 366-bed acute care facility, in Independence, MO. Among the operations performed by his department are open-heart, laser, ultrasound, orthopedic, plastic, laparoscopic, and endoscopic procedures.

**Dr. M. Dorothy Fogerty** ('97) is a general surgeon in Albuquerque, NM, and opened her own practice just over one year ago. She says: "Running the business has been a challenge, but has been most rewarding. Fortunately, the surgeons work very closely together, which has been the key to advocating for the patients and the medical community in a very poor state with a lot of managed care. And we like the weather."

**Dr. Michael J. Sacca** ('97) reports that he is now board certified in both surgery (general) and vascular surgery; and that he and his wife and two children have been joined by a new member of their family, Timothy Robert Sacca, who was born on July 25.

To submit alumni news online AND to find current mailing addresses of our alumni, please visit the Department's website at [www.uhmc.sunysb.edu/surgery](http://www.uhmc.sunysb.edu/surgery)

For news about Stony Brook University Hospital and Medical Center, see the latest edition of *Medical Staff News* at [www.uhmc.sunysb.edu/roster/news/index.html](http://www.uhmc.sunysb.edu/roster/news/index.html)

GENERAL SURGERY ALUMNI: Please send your e-mail address—for inclusion in the Alumni Directory—to [cohen@surg.som.sunysb.edu](mailto:cohen@surg.som.sunysb.edu)

## Recent Publications

(Continued from Page 10)

**McNurlan MA, Garlick PJ.** Protein metabolism: overview and turnover. In: Stipanuk MH, editor. *Biochemical and Physiological Aspects of Human Nutrition*. Philadelphia: Saunders, 2000: 211-33.

**Malinowski K, Ye H, Waltzer WC.** Effect of different anti-rejection regimens on the expression of differentiation and activation markers on the surface of host lymphocytes. *Transplant Proc* 2000;32:773-5.

**Saltman AE, Krukenkamp IB, Gaudette GR, Horimoto H, Levitsky S.** Pharmacological preconditioning with the adenosine triphosphate-sensitive potassium channel opener pinacidil. *Ann Thorac Surg* 2000;70:595-601.

**Saltman AE, Krukenkamp IB, Gaudette GR, Levitsky S.** Amrinone preconditioning in the isolated perfused rabbit heart. *Ann Thorac Surg* 2000;70:609-13.

Sawhney R, Chuter TA, Wall SD, Reilly LM, Kerlan RK, Canto CJ, Jean-Claude J, **Faruqi RM.** Aortic stent-grafts in patients with renal transplants. *J Endovasc Ther* 2000;7:286-91.

Simman R, **Priebe CJ Jr, Simon M.** Reconstruction of aplasia cutis congenita of the trunk in a newborn infant using acellular allogenic dermal graft and cultured epithelial autografts. *Ann Plast Surg* 2000;44:451-4.

**Smouha EE, Sobol LL, Slepecky NB.** Hearing preservation after partial labyrinthectomy. In: Sterkers O, Ferrary E, Dauman R, et al, editors. *Meniere's Disease 1999—Update*. The Hague: Kugler, 2000: 197-204.

**Stefano GB, Goumon Y, Bilfinger TV, Welters ID, Cadet P.** Basal nitric oxide limits immune, nervous and cardiovascular excitation: human endothelia express a mu opiate receptor. *Prog Neurobiol* 2000;60:513-30.

**Stefano GB, Prevot V, Beauvillain JC, Cadet P, Fimiani C, Welters I, Fricchione GL, Breton C, Lassalle P, Salzet M, Bilfinger TV.** Cell-surface estrogen receptors mediate calcium-dependent nitric oxide release in human endothelia. *Circulation* 2000;101:1594-7.

Subhani M, **Monte DC, Roche P, Parton L.** Isolated bilateral submandibular abscesses in a preterm infant: a case report. *Int J Pediatr Otorhinolaryngol* 1999;51:47-50.

**van Bemmelen PS, Weiss-Olmanni J, Ricotta JJ.** Rapid intermittent compression increases skin circulation in chronically ischemic legs with infra-popliteal arterial obstruction. *VASA-J Vasc Dis* 2000;29:47-52.

Vosswinkel JA, **Brathwaite CE, Smith TR, Ferber JM, Casella G, Garlick PJ.** Hyperventilation increases muscle protein synthesis in critically ill trauma patients. *J Surg Res* 2000;91:61-4.

Welters ID, Fimiani C, **Bilfinger TV, Stefano GB.** NF-kappa B, nitric oxide and opiate signaling. *Med Hypotheses* 2000;54:263-8.

HOT LINKS

# STONY BROOK SURGICAL ASSOCIATES, PC

## BREAST CARE

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Martyn W. Burk, MD, PhD  
M. Margaret Kemeny, MD  
Louis T. Merriam, MD  
Brian J. O'Hea, MD  
Vimala S. Sivaraman, MD

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John S. Brebbia, MD  
Harry S. Soroff, MD

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Irvin B. Krukenkamp, MD  
Allison J. McLarty, MD  
Adam E. Saltman, MD, PhD  
Frank C. Seifert, MD

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Louis T. Merriam, MD  
Brian J. O'Hea, MD  
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Collin E.M. Brathwaite, MD  
John S. Brebbia, MD  
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## VASCULAR SURGERY

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Fabio Giron, MD, PhD  
David B. Gitlitz, MD  
John J. Ricotta, MD  
Paul S. van Bemmelen, MD, PhD



For consultations/appointments with our physicians, please call

- (631) **444-4550** for our specialists in breast care
- (631) **444-1820** for our specialists in cardiothoracic surgery
- (631) **444-4545** for our specialists in general/gastrointestinal surgery
- (631) **444-4121** for our specialists in otolaryngology-head and neck surgery (ENT)
- (631) **444-4538** for our specialists in pediatric surgery
- (631) **444-4545** for our specialists in plastic and reconstructive surgery
- (631) **444-4545** for our specialists in surgical oncology
- (631) **444-2209** for our specialists in transplantation
- (631) **444-1045** for our specialists in trauma/surgical critical care
- (631) **444-2565** for our specialists in vascular surgery
- (631) **723-5000** for our specialists at Stony Brook Outpatient Services in Hampton Bays: breast care - general/gastrointestinal surgery - pediatric surgery - vascular surgery

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