



# Penn Surgery Society NEWS

SPRING 2018

The Penn Surgery Society News is published quarterly for its members, colleagues and friends of the Department of Surgery. For submissions, inquiries or comments, please contact [clyde.barker@uphs.upenn.edu](mailto:clyde.barker@uphs.upenn.edu).



**Ron DeMatteo, MD**

John Rhea Barton  
Professor and Chairman  
of Department of Surgery

## Message from the Chairman

Humanism was a movement during the Renaissance that extolled the pursuit of virtue through a renewed devotion to classical Greek and Roman studies, particularly philosophy, poetry, and history. Hence the use of the word “humanities” to signify certain college courses. In medicine, the connotation of humanism has been slightly modified to reflect

the adherence to ethical standards and delivery of compassionate care, as embodied in the oath of Hippocrates.

Arnold P. Gold was a pediatric neurologist who espoused empathy and created a foundation that bears his name. The foundation promotes young physicians to provide not only compassionate patient care, but also collaborative and scientifically excellent care. Dr. Gold died recently at the age of 92. His foundation established the Gold Humanism Honor Society, which recognizes students who demonstrate compassionate patient care and are also role models, mentors, and leaders in medicine. Members are nominated by their peers.

Thus, the definition of humanism has evolved. Perhaps the most extreme interpretation of humanism is to sacrifice one’s life

in order to save the life of others. Don Liu MD PhD began his General Surgery internship at Penn in 1990. I was fortunate to be in the same class as Don. He may be the nicest person whom I have ever met. The more Don was pushed (by the residency), the gentler he became. He would just put his head down and get the

work done with a calm smile, without complaining. Once, he was inadvertently shocked during a code in the Cardiac ICU, but remarkably he didn’t go home until after his call shift ended. Don became the Chief of Pediatric Surgery at the University of Chicago. He was loved by all. In 2012, while on vacation with his family on Lake Michigan, he noticed two children struggling in the rough current of the lake. He immediately swam out after them. They made it back to shore, but Don perished. He had so much more to give – to his patients and their families, his three children, and his wife Dana Suskind, a pediatric otolaryngologist.

We have created a new prize for graduating surgical residents called The Donald C. Liu Humanism Hero in Surgery Award. The

award is supported through the generosity of Dana Suskind and John List. The Award will be given periodically to a member of the surgical housestaff who exhibits compassion and sensitivity in the care of the surgical patient in a collegial, collaborative, selfless, and ethical manner. The awardee will be



selected by the Chairman and the Vice Chair of Education, based on peer and faculty nominations. Jon Morris identified the perfect prize - the Norman Rockwell painting (shown above) capturing the innocence and camaraderie of young boys playing baseball. The painting symbolizes Don’s love of children, his own and all the kids who so greatly benefitted from his expert and passionate care over the years. Furthermore, Don was a devout baseball fan and a dad coach. He will not be forgotten.

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## From the Editor

Clyde F. Barker, M.D.

I recently heard from his family that Joseph Mehl had died. This marked a sad end to an important chapter in my life. Half a century ago Joe Mehl was motivated by generosity and courage to give a kidney to his younger brother Howard. The transplant was HUP's first and one of the first in this part of the country.

The news of Joe's death brought back a lot of memories. In March of 1964 I was finishing my general surgery residency. At that time Jonathan Rhoads gave his chief residents a month off to supplement their HUP training by visiting other centers. Like other residents I went to the Mayo Clinic and to Houston to watch Mike DeBakey and Denton Cooley operate. Then because I had developed a vague interest in transplantation I decided to spend a week visiting hospitals that had active kidney transplant programs. It was easy to do because at the time there were only 3 in the country, Joe Murray's in Boston at the Brigham, David Hume's in Richmond at Medical College of Virginia and Tom Starzl's at the University of Colorado in Denver. A year later I couldn't have visited all the active U.S. transplant centers in a week or even in several months. By then there were probably 50. The explosion in activity had been caused by Starzl's demonstration that rejection of transplanted kidneys, previously found irreversible, could be stopped and reversed.

Notes I had saved from my trip reminded me what a different world it was in 1964. The Vietnam war was raging and being protested. Weeks before John Kennedy had been shot. The Beatles had just arrived in the U.S. and were on Ed Sullivan's TV show. Several kidney transplant survivors I saw had been immunosuppressed by whole body irradiation rather than drugs. I was shown a patient who was being kept alive by a transplanted chimpanzee kidney. Still in the future were heart transplantation, liver transplantation, tissue typing, cross matching, brain death of cadaveric donors, Medicare and almost 2 decades into the future cyclosporine and FK506. The highpoint of my trip came in Denver where the young Tom Starzl invited me to scrub and

**2** first assist him on a kidney transplant. His enthusiasm and

optimism were infectious. I came away wanting to become a transplant surgeon.

But how to get started? Back in Philadelphia and almost finished with my surgical training I found that there was no enthusiasm for a transplant program at HUP. Besides I had no job offer. So I signed up for a year of research in the department of genetics where I learned that one of the world's foremost transplant biologists had just been appointed chairman. This was Rupert Billingham.

At the time HUP's nephrologists strongly opposed transplantation. It wasn't hard to understand why. They saw it as too risky since the published literature indicated that success of kidney transplants was less than 10%. From Starzl I had heard a different assessment based on his results. But his results were unique and so new that not many had heard about them. Barely five months before my visit with him in Denver Tom Starzl had given a dramatic report that would change the outlook for transplantation. At a small conference organized by the National Research



Joe and Howard Mehl

Council about 25 of the world's most experienced transplant clinicians were assembled in Washington to review the status of the field. The results they presented were terrible. Altogether about 200 kidney transplants had been done. Less than 10% of the recipients had survived as long as 3 months. Most of the patients had been immunosuppressed by whole

body irradiation. Only 6 of them had lived a year. Hope was expressed that the new immunosuppressive drugs might be more effective. But when Murray reported his first 10 patients treated with 6- mercaptopurine and azathioprine instead of irradiation only one had survived for a year. The others died within 6 months. Thus at this point the drugs seemed no more effective than radiation. The mood at the conference was so gloomy that some participants questioned whether continued activity in human transplantation could be justified.

The gloom was then dispelled by only one presentation, given by a newcomer to the field, the young and at the time virtually unknown Tom Starzl. He described a new immunosuppressive protocol that had reversed rejection and allowed greater than 70% renal graft survival. He had more surviving patients than the rest of the world's better known experts combined. At first his audience was incredulous. Tapes that recorded the subsequent acrimonious discussion were later claimed to be lost but eventually Starzl's unprecedented results were believed because he had brought with him charts detailing daily progress and laboratory studies of each patient. Starzl's innovation based on his consistent success in dog experiments was to treat rejection with

large doses of prednisone. Others had found rejection irreversible and usually fatal. Although Starzl's patients like the others always began to reject while they were on azathioprine alone he could stop the rejection, allowing the kidney to recover. The outlook for transplantation was completely changed by Starzl's report. Transplant historian Nick Tilney described it as "letting the genie out of the bottle". Many of the conference participants promptly followed Starzl to Denver to learn how to adopt his immunosuppressive protocol.

A year later as I was midway through my research year with Billingham dissemination of Starzl's results had softened the opposition of HUP nephrologists to transplantation. With Billingham's support I persuaded Dr. Rhoads that it was time for HUP to begin a kidney transplant program. Even more important was Billingham's help in convincing the chairman of medicine and the nephrologists to agree. Mainly because I had Billingham's backing I was asked to take charge of the program and tentatively offered a faculty appointment in surgery. It would start 6 months later, after I finished my year of research in July.

But before that, in February a young man who was working in a Las Vegas casino got sick and was told he had kidney disease. He quit his job and came home to Philadelphia to be with his family. At HUP he was found to be in terminal renal failure. This was Joe Mehl's brother Howard. He couldn't wait for treatment until July. Because dialysis was not available for him, by July he would be dead. Bill Bluemle a HUP nephrologist had the only artificial kidney machine in town. It was reserved for short term treatment to rescue patients with acute tubular necrosis with the expectation that their kidney failure was spontaneously reversible. As an experiment Bluemle had one patient on chronic dialysis but there was no room for another. If we were not ready to transplant Howard, he would have to die. I thought we were ready.

In many respects Howard Mehl was an ideal candidate for transplantation, 22 years old, healthy and strong except for his kidney disease and most importantly having 6 siblings. Although odds for a recipient's success and risks to a donor were not very well known at the time they were all eager to donate a kidney. Selection of the optimal one was tricky since tissue typing and even cross matching were not available to us. However, in Billingham's department Wayne Streilein a young HUP internist was experimenting with a crude matching scheme. Lymphocytes from the recipient were mixed with those of a prospective donor and injected intradermally to hamsters that had been irradiated to prevent the animal's immune response to the foreign cells.

Reaction of these cells to each other was not prevented and its extent was reflected by the intensity of the skin lesion at the site of the intradermal injection. Reactivity of Howard's lymphocytes to those of each sibling were thus compared. Based on this test it looked as if Joe would be the best donor.

Planning for the transplant operation was administratively complicated. My position was still that of a research fellow in the genetics department without a surgical faculty appointment, hospital privileges or assigned clinical service. So I arranged to put Howard Mehl on the surgical ward service. At the operation I chose as my first assistant the resident who was the chief on that service. It was Scott Jones, future department chairman at the University of Virginia. Also assisting in the procedure was Tom Demeester, a Hopkins resident who was spending a year in



**Howard Mehl family**

Billingham's lab and who later would become chief of surgery at USC. I asked Bob Dripps to give the anesthesia. He was at the time vice president of the University but had been the founding chairman of the department of anesthesia. Backing me up was my vascular surgery mentor, Brooke Roberts.

Although I had lots of support there were enough skeptics to make me uneasy that if the first transplant didn't work out I might not get to do another.

The operation went smoothly. The kidney began at once to produce huge volumes of urine which within 24 hours caused Howard to lose more than 50 pounds of excess fluid. Accompanying me in several sleepless nights to monitor Howard's fluid and electrolyte balance was a renal fellow named Rusty Slone who would later become Surgeon General of the Air Force.

Within days Howard's creatinine normalized but in another week it rose as he began to reject the new kidney. This caused us some anxiety but following the treatment learned from Starzl, we added large doses of prednisone to the baseline immunosuppressant azathioprine. His renal function quickly normalized. He never had another rejection or any other deterioration of kidney function over the next 48 years. By then he had become one of only about a dozen kidney recipients in the world to maintain function of a transplanted kidney for that long. Then at age 70 Howard died in his sleep from a myocardial infarction but with normal kidney function.

For Howard Mehl HUP's first transplant meant exchanging an early death for a long life enriched by a happy marriage, children and a successful business career. For Joe it meant the satisfaction of saving a brother's life. For me it meant a job for which I will always be grateful for Joe Mehl's generosity and courage. **3**



# Julius Mackie Distinguished Graduate Award Recipient Steve Fishman

Steven J. Fishman, M.D. is Professor of Surgery at Harvard Medical School and the Stuart and Jane Weitzman Family Chair in Surgery at Boston Children's Hospital where he is also Vice-Chair of Surgery for Clinical Operations.

Born and raised in the Chicago area, he obtained his combined B.S. and M.D. degrees through the Honors Program in Medical Education at Northwestern University. He then completed his training in General Surgery in 1992 at the Hospital of the University of Pennsylvania and in 1994 his fellowship in Pediatric Surgery at Boston Children's Hospital. He has remained on faculty at Boston Children's for his entire career where he is active in the practice and teaching of the broad spectrum of pediatric surgery. He has a particular clinical and research focus in the area of vascular anomalies and in 1999 became Co-Director of the Vascular Anomalies Center at Boston Children's Hospital. Annually this center's multidisciplinary group evaluates about 1700 patients with hemangiomas, rare vascular tumors and vascular malformations of all types. Steve is Past-President of the International Society for the Study of Vascular Anomalies. He also created and hosts an international registry of hepatic hemangiomas.

Over his career Dr. Fishman has authored over 200 scientific publications and chapters as well as two books including a comprehensive reference work on vascular anomalies. He has a particular focus on developing an understanding and approach to visceral vascular anomalies. Though these anomalies are extremely rare, his international referral practice has facilitated the recognition of patterns in their clinical presentation and opportunities for treatment. He has focused on developing evaluation and intervention techniques including innovative operative procedures for the treatment of visceral vascular anomalies. Dr. Fishman also has extensive experience with resecting, debulking and reconstructing vascular malformations and associated overgrown tissues of the torso, genitalia, neck and extremities. He has also studied the role of **4** dynamic contrast lymphangiography of the thoracic duct



which has led to the use of novel treatments and reconstruction of thoracic duct anomalies. Recognizing the limitations of surgical techniques, he is focusing on understanding the biologic mechanisms involved in the development and progression of these lesions. Dr. Fishman frequently serves as visiting professor and speaker both nationally and internationally as well as advising several patient/family-oriented support groups. He often participates in their gatherings and clinics.

In recent years, Dr. Fishman has assumed a host of administrative leadership roles at Boston Children's. In 2015 he became the President of the Physicians' Organization and Senior Vice-President for Access and Business Services. He also serves on the hospital's Board of Trustees and the Executive Committee amongst many other strategic and operational responsibilities.

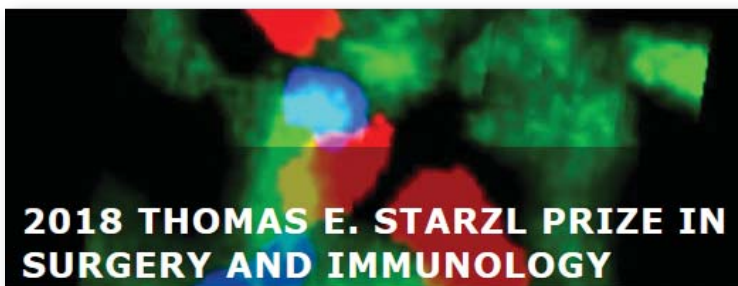
Dr. Fishman met his wife of 25 years, Dr. Laurie Fishman, while rotating as a senior resident on the surgical service at the Children's Hospital of Philadelphia. A turkey sandwich waiting for him in the newborn ICU after he missed the cafeteria closing for a trauma stat and an order from the surgical fellow led to their first date. Steve and Laurie's proudest accomplishments are their three children: Mark (23), Jason (21) and Rachel (18).



Rachel, Laurie, Steve, Mark and Jason

# Ali Naji Wins Prestigious Thomas Starzl Prize

The citation below accompanied the announcement that Ali Naji had been selected as the 2018 winner of the Thomas Starzl Prize, one of the field's most prestigious awards.



Dr. Ali Naji, an internationally recognized transplant surgeon and immunologist, is the J. William White Professor of Surgery, director of the Penn Pancreatic Islet Transplantation Program, and associate director of the Institute for Diabetes, Obesity and Metabolism at the University of Pennsylvania School of Medicine. After earning his MD from Shiraz University School of Medicine in Shiraz, Iran, Dr. Naji completed his surgical training at the University of Pennsylvania and, in 1981, earned his PhD in Immunology at the same institution.

Dr. Naji has been a leader in the immunology of diabetes and in unraveling the mechanisms of immune tolerance. His seminal work has contributed to our understanding of fundamental processes, including the role of the thymus in regulating the maintenance and loss of immune tolerance to tissue specific antigens in autoimmune diseases and transplantation. His laboratory was among the first to demonstrate the central role of B lymphocytes in orchestrating the immune attack against islet beta cells in Type 1 diabetes, which has led the way for novel therapeutic interventions to preserve beta cell mass and promote transplantation. In addition to his groundbreaking scientific work, Dr. Naji has led efforts to promote successful islet transplantation for the treatment of Type 1 diabetics. He established islet isolation at the University of Pennsylvania and performed some of the first attempts to repeat and extend the Edmonton protocol for transplantation in the United States. As part of the cooperative NIH sponsored islet transplantation consortium (CITR), translation of his research has demonstrated the efficacy of B lymphocyte directed immunotherapy in the induction of islet allograft tolerance in diabetic non-human primates. He continues to work tirelessly to promote beta cell restoration and to maximize success of islet transplantation.



Dr. Naji has published nearly 300 articles in the fields of transplantation, immunology, and diabetes. He has an impressive mentoring record, training over 20 students and post-docs who have gone on to careers focused on advancing scientific research at the interface of diabetes and transplantation. Dr. Naji has received recognition and honors including the University of Pennsylvania's School of Medicine Dean's Award for Excellence in Grad-

uate Student Training (2000), the Lady Barbara Colyton Prize for Auto-immune Research (2006), the Paul S. Russell Lectureship (2013), and the Paul Lacey Memorial Award Lecture (2013).

The University of Pittsburgh School of Medicine, the Department of Surgery, and the Thomas E. Starzl Transplantation Institute are honored to present the 2018 Thomas E. Starzl Prize in Surgery and Immunology to Dr. Ali Naji in recognition of his outstanding clinical and scientific achievements.

In addition to the above kudos selected for Ali by the Starzl prize committee his distinguished career has been marked by many other achievements. As noted in the Winter 2017 issue of the Newsletter his research has been continuously funded by NIH for over 30 years. In surgery he now ranks number one in NIH funding with \$13,196,605 in total NIH funds this year, twice that of the 2nd ranked investigator.

At a national level he has been elected to the prestigious professional societies including the SUS, ASA and Halsted Society. He has served on 5 separate NIH study sections, 5 editorial boards and numerous national committees. It would be hard to identify other individuals who are his peer as surgeon scientists.

In addition, Penn Surgery Society members are well aware that for the last 40 years Ali has been an indefatigable mainstay of HUP's clinical transplant program.



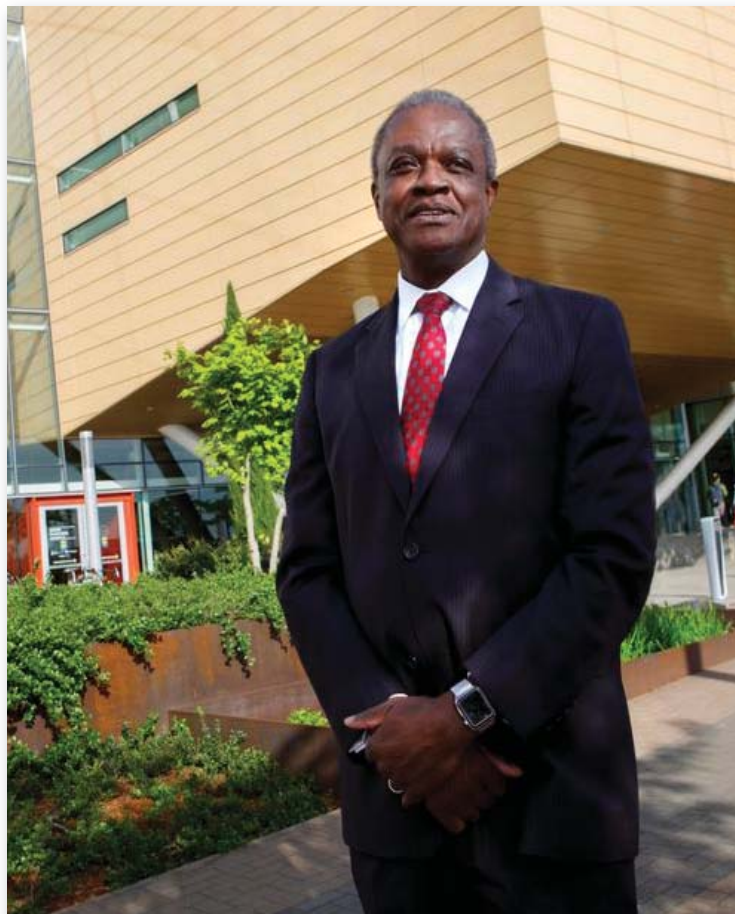
# Dr. Danny O. Jacobs Appointed President of Oregon Health Services University

In August Danny Jacobs (HUP Chief Resident 1986) will move from Galveston where he is Executive Vice President, Provost and Dean of the School of Medicine at the University of Texas Medical Branch. In Portland he will become the fifth President of the Oregon Health Services University. The OHSU is an independent organization formerly known as the University of Oregon School of Medicine.

Danny is a graduate of Harvard College and obtained his M.D. degree from Washington University School of Medicine. After finishing his HUP residency he returned to Harvard as a research fellow in surgery. He remained there for 14 years rising to associate professor of surgery and earning an MPH degree from the Harvard School of Public Health. He also served as Associate Program Director of the Brigham and Women's Hospital's Clinical Research Center, chief of the hospital's metabolic support services and director of its laboratory for surgical metabolism and nutrition.

He left Harvard in 2000 to join the faculty at Creighton University School of Medicine as the Arnold W. Lempka Distinguished Professor and Chairman of the Department of Surgery. In 2003 he moved to Duke University as David C. Sabastian Jr. Professor and Chairman of the Department of Surgery, chair of the private diagnostic clinic and of the board of managers of the thousand plus member physician organization.

In 2012 Danny moved to Galveston as Executive Vice President, Provost and Dean of the School of Medicine at the University of Texas Medical Branch. There he has been the chief academic officer responsible for almost 4000 employees and



trainees of the schools of medicine, nursing, health professions and biomedical sciences. He has also overseen the institution's research programs and has directed the School's successful completion of a 450-million-dollar capital campaign. He also developed strategic plans for the academic and clinical enterprises and was the delegated head of the faculty group practice in the UTMB Health Care System comprising 681 beds, 77 ambulatory sites and \$2.2 billion annual budget. In addition to this remarkable career as an administrative leader of top academic institutions Danny has been an outstanding surgeon scientist His research has focused on the effects of critical illness and malnutrition on cellular bioenergetics and organ function and metabolism. A prolific writer he has published almost 300 peer-reviewed manuscripts. He has been a member of 12 editorial boards including the New England Journal of Medicine, Surgery and the World Journal of Surgery. He is a member of many honorific academic societies including the Society of University surgeons, the American Surgical Association, the American Physiological Society and the National Academy of Medicine.

In 2010 our department was proud to name Danny the Mackie Distinguished Graduate Awardee.



# Alumni News

Faculty, Residents, Alumni of Penn Surgery  
email your news to Clyde Barker  
clyde.barker@uphs.upenn.edu

- ◆ **Matt Boelig, MD** (HUP Chief Resident 2017, currently a CHOP Pediatric Surgery Fellow) and **Jason Han, MD** (Thoracic Surgery Resident) received the 2018 Penn Pearl Award for teaching medical students.



- ◆ **Charles Vollmer, MD** has been inducted as President of the Americas Hepato-Pancreato-Biliary Association.



- ◆ **Caroline Reinke, MD** (HUP Chief Resident 2014) received the American College of Surgeons Franklin H. Martin Faculty Research Fellowship.



- ◆ **Scott Damrauer, MD** received notice of intent to fund his VA Career Development Award: Precision Cardio-Metabolic Phenotyping for Genetic Discovery and Risk Prediction



- ◆ **Brett Ecker, MD** was inducted into the PSOM Gold Humanism Honor Society, selected by the Society's student members.



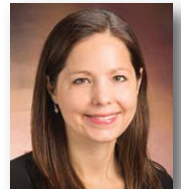
**Joseph E. Bavaria, MD received the Award of Fellowship ad hominem of the Royal College of Surgeons of Edinburgh.**

## New Faculty

- ◆ **Francis E. Rosato, MD** has been appointed Assistant Professor of Clinical Surgery in the Division of Gastrointestinal Surgery. MD - Jefferson Medical College, Residency - Thomas Jefferson University Hospital, Laparoscopic Surgery Fellowship - Hospital of the University of Pennsylvania.



- ◆ **Juliana S. Gebb, MD** appointed Assistant Professor in the division of Pediatric Surgery. MD - College of Physicians and Surgeons, Columbia University, New York; Residency - Obstetrics and Gynecology - Montefiore Medical Center/Albert Einstein College of Medicine, NY; Fellowship - Maternal-Fetal Medicine - Montefiore Medical Center/Albert Einstein College of Medicine, NY.



- ◆ **Gary W. Nace, Jr., MD** is Assistant Professor in the Division of Pediatric Surgery. MD - Temple University School of Medicine; Residency - General Surgery - University of Pittsburgh Medical Center; Fellowship - Pediatric Surgery - Children's Hospital of Pittsburgh.

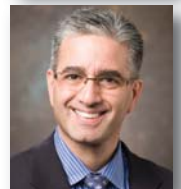


## Promotions

- ◆ **Oksana Jackson, MD**  
Plastic Surgery/CHOP -  
Promoted to Associate Professor  
in the Clinician Educator Track



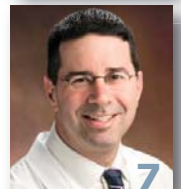
- ◆ **Lewis Kaplan, MD**  
Traumatology, Surgical Critical Care and  
Emergency Surgery/VAMC -  
Promoted to Professor  
in the Clinician Educator Track



- ◆ **Rachel Kelz, MD**  
Endocrine and Oncologic Surgery -  
Promoted to Professor  
in the Clinician Educator Track



- ◆ **Matt Levine, MD, PhD**  
Transplant Surgery -  
Promoted to Associate Professor  
in the Tenure Track





# Sunil Singhal Appointed Vice Chair for Translational Research

Dr. Singhal will be responsible for overseeing the translational research portfolio of the department, increasing interactions of surgical investigators with other research programs in the University and improving the education in research for our surgical trainees. He is extremely well qualified for this position.

Dr. Singhal is the William M. Measey Associate Professor of Surgery in the Division of Thoracic Surgery. He graduated from Dartmouth College and Penn Medical School. He completed his General Surgery training at Hopkins and a fellowship at HUP in Thoracic Surgery.

His research has focused on intraoperative imaging of cancer and tumor immunology of lung cancer. He has had longstanding collaborations with Evgeniy Eruslanov, PhD (Division of Thoracic Surgery) and Steve Albelda, MD (Division of Pulmonary Medicine). He is the Director of the Center for Precision Surgery within the Abramson Cancer Center. Dr. Singhal has three R01s and a Department of Defense grant, and is a project leader on a P01. He has published in *The Journal of Clinical Investigation*, *Cancer Cell*, and *PNAS*. He is one of the few surgeons who has



been elected to the American Society of Clinical Investigation. He recently received the Luigi Mastroianni Clinical Innovator Award at Penn.

Dr. Singhal also directs the Thoracic Surgery Research Laboratory. The laboratory is developing the next generation of intra-operative imaging by pursuing multiple approaches that will allow more complete resection of primary, micrometastatic and lymphatic disease while minimizing unnecessary tissue reductions and shortening hospital stays.

As part of the bench-to bedside-to bench approach, the laboratory conducts both human and animal studies. In the clinical arm, patients are enrolled in clinical trials to identify local and distant metastases with the use of newly developed software, imaging systems and non-radioactive isotopes. Through the excitation of molecules in non-toxic chemicals, malignant tissue previously undetectable can be identified during operations without harming patients.

Secondly, mouse systems examine modalities of nanotechnology and small molecules, utilizing reagents at the forefront of surgical imaging technology. New near-infrared and visible contrast agents target tumors allowing them to fluoresce in the OR.

## Catching Up With . . . *Chuck Bridges*

*Contributed by Jon Morris*

Chuck Bridges is a 1976 graduate of Harvard College with Magna Cum Laude honors and a major in Engineering and Applied Physics. He then matriculated to Harvard Medical School where he also obtained a master's degree from the Massachusetts Institute of Technology in Electrical Engineering and Computer Science (1977-1980) and a Sc.D. in Chemical Engineering. Chuck took his General Surgical Residency at HUP which included three years of research in the Harrison Department. He was the recipient of the 1989 William Inouye Award for Outstanding Resident Teaching and the 1990 Jonathan E. Rhoads Surgical Research Award. He remained at Penn for his Cardiothoracic Fellowship training from 1991-1993. His academic appointments have included Assistant Professor of Surgery at the University of Florida (1993-1995) and the University of



**Chuck in 1991**

Pennsylvania (1996-2005), Associate Professor (2005-2010) and Professor of Surgery at the University of Pennsylvania (2010-2011), Professor of Surgery at the Carolinas Health Care System (2011-2015) and Professor of Cardiology at the Ichan School of Medicine at Mount Sinai (2015-present). Chuck was Chief of the Cardiothoracic Surgery at Pennsylvania Hospital from 2001-2011 until he was recruited to be the Chairman of the Department of Thoracic and Cardiovascular Surgery at the Sanger Heart and Vascular Institute, Carolinas Healthcare System in Charlotte, North Carolina from 2011-2014. He was then for three years Global Vice President of Johnson and Johnson Medical Devices (2015-2018). Chuck is currently the Global Chief Technology Officer in the Pulmonary Hypertension Therapeutic Area of Janssen Pharmaceuticals, in Research and Development.

(continued on page 9)



## Catching Up With . . . *Chuck Bridges* (continued from page 8)

# A Conversation with Chuck

**JoMo:** What were the highlights of your training at Penn?

**Chuck:** *Fantastic academic environment. Molded many of us to become surgeon-scientists, arguably more so than any other program in the U.S. while still focusing on practical surgical excellence.*

**JoMo:** Which faculty influenced you the most and why?

**Chuck:** *Hank Edmunds: See #1. He was the consummate CV surgeon-scientist continuously NIH funded for decades. Bill Norwood – the best technical cardiac surgeon in the world at the time I was there. I tried to emulate his technical prowess. Larry Stephenson – a great human being. How to be an amazing academic surgeon and still enjoy life. Jomo – the honorary black faculty member! He'll know what I mean!*

**JoMo:** When you were a junior resident, which Chief Residents had the greatest impact on you and why?

**Chuck:** *Nicholas Tepe – my first Chief Resident as an intern. He knew everything! Mike Acker – always wanted to be in the 90%-tile plus club largely due to his influence. Danny Jacobs – never was on his service but always looked up to him.*

**JoMo:** When you were a Chief Resident, which junior residents impressed you the most and why?

**Chuck:** *They were all really good.*

**JoMo:** Tell us what your greatest professional accomplishments have been since graduating Penn.

**Chuck:** *Becoming the first African American Full Professor of Surgery at Penn, then a Department Chair at Carolinas Healthcare System. Recently, 2015, I made the transition to industry as a Global Vice President of Johnson and Johnson Medical Devices. I found that I was uniquely qualified for this role based on both outstanding scientific and clinical preparation. Now I am Chief Technology Officer of Actelion Pharmaceuticals, a recent Johnson and Johnson acquisition. Meanwhile I am still an NIH-funded full Professor (of Cardiology) at the Icahn School of Medicine at Mount Sinai (Part-Time).*

**JoMo:** What do you miss most about Philadelphia?

**Chuck:** *Home*

**JoMo:** Who from your Penn Surgery days do you stay in touch with?

**Chuck:** *Hansell Stedman, Joe Bavaria, many others.*

**JoMo:** What are your current interests and hobbies outside of medicine?

**Chuck:** *Running and Golf. Also, I competed in the 2016 World Rubik's Cube Association US Nationals competition. I am among the fastest for my age in the world. That, is, few people over 50 compete!*

**JoMo:** Tell us about your family.

**Chuck:** *Three daughters: Hillary, Amanda and Lauren – Nonprofit Founder/CEO, Architect and Entertainment Industry professional. Graduates of Wash U (BA)/U of Copenhagen (MA); Harvard (AB)/Yale (M.Arch) and Penn (Wharton B.S.), respectively. Now have a 5 year old (Giselle) and a 16 year old step daughter (Kiley).*

**JoMo:** What is the last book you read that you would recommend and why?

**Chuck:** *Sapiens by Yuval Noah Harari – a great view of the history of the universe focused on humankind. What makes it unique is that it does not merely catalogue this war and that but rather gets at the motivations for why we (humans) have done and continue to do what we do.*



Chuck with his daughters (left to right)  
Amanda, Lauren and Hillary

# Wall of Fame

Contributed by Daniel Dempsey

## HUP CHIEF SURGICAL RESIDENTS 1992

In 1992 Bill Clinton was elected president, Hurricane Andrew devastated South Florida, and the USSR died. At HUP, five distinguished chief surgical residents completed their general surgical training under Dr. Barker.

**Mark Shachner**, born in NYC, came to HUP as a surgical intern in 1985 after college at Cornell and medical school at Yale. He had outstanding letters of recommendation from Art Baue, Wayne Flye, and Dick Gusberg. As a resident Mark spent 2 years in the transplant lab under Drs. Barker and Naji and one of his best memories as a resident is being introduced to “Black Bush” Irish Whiskey by Dr Barker at a transplant meeting in Sydney, Australia. Another fond memory is rounding with Ernie Rosato. Mark also recalls that when he came out of the lab, laparoscopic cholecystectomy was slowly but surely starting to gain a foothold at HUP thanks in no small part to Jon Morris. Mark’s file is replete with superlatives including “outstanding in all areas; highly accomplished in and out of the OR; one of our best” (Jack Mackie) and “superb; one of the very best” (John Daly). Among the people at Penn who influenced him the most Mark lists Ernie Rosato, Len Miller, Jon Morris, Clyde Barker, and Bill Schwab. Some of the most important aspects about HUP surgical training for Mark were the excellent technical training, the breadth of experience and the clinical approach to patients. He has this advice for new HUP surgical interns: “it gets better, and remember it is all about the patient”. Mark has been a busy general surgeon in Florida for many years. He does a wide variety of general surgery with a heavy emphasis on laparoscopic and robotic procedures. Presently he is president of the South Florida Surgical Specialists which is a multispecialty multihospital group of 50 surgeons and proceduralists. Mark has two children. One son is an anesthesia resident at UT Knoxville and the other son is a lawyer in Cleveland. He is an avid runner who has completed multiple **10** marathons and ultramarathons.



**Mark Shachner**



**Michael Lieberman**



**Michael Lieberman** was born in Englewood, New Jersey and went to college at Bucknell (magna cum laude) and med school at UMDNJ Newark (AOA). He had outstanding letters of recommendation from Ben Rush and Bob Hobson, and from Hank Edmunds and Dick Edie since he had done an elective rotation at HUP. He came to HUP in 1985 as a surgical intern and was quickly attracted to surgical oncology. Michael spent two years in the lab with John Daly as a Cletus W. Schwegman surgical oncology research fellow. Dr. Daly had recently arrived at HUP as the Rhoads professor and inaugural chief of surgical oncology. Michael must have done OK in the lab, since he was ultimately hired onto the faculty at Cornell by Dr. Daly shortly after John arrived as the new chairman of surgery at Cornell and immediately after Mike finished his surgical oncology training at MSKCC. In addition to Dr. Daly, Mike lists the following as very important positive influences on his education and career: Ernie Rosato, Jack Mackie, Clyde Barker, and the chief residents during his intern year. His performance as a chief resident himself was described as “outstanding” by, inter alia, Drs. Rombeau, Daly, Mullen, and Mackie. Mike thinks that some of the best things about HUP surgical residency were the quality of the teaching both in and out of the OR, the breadth and depth of clinical experience, and the camaraderie amongst the residents and between the residents and surgical faculty. His advice to the new HUP surgery interns is this: “focus, work hard, and enjoy it”. Michael is one of the busiest surgeons at New York Presbyterian Hospital (the old New York Hospital), where he does the full gamut of non-breast surgical oncology. He and Phyllis have two children (sons), both of whom are working in business in the NYC area. He enjoys spending time with family and friends at his new house in East Hampton.

**Ed Savage** was born in Brooklyn and arrived as a surgical intern at HUP in 1985 after college at Columbia (summa cum laude, phi beta kappa) and med school at Yale. He was very highly recommended by Art Baue and Dave Tilson and quickly distinguished himself as an excellent resident. Ed spent 2 years in the lab with Hank Edmunds who he acknowledges as the most important influence on his training, along with Clyde Barker and Ernie Rosato.



## Wall of Fame *(continued from page 10)*

While residents Ed and Steve Fishman co-authored a book entitled “Essentials of Basis Science in Surgery” which for a few years was quite popular with surgical residents and medical students. Dr. Rosato described Ed as “very talented” and John Rombeau said he was an “outstanding chief” in the chief resident evaluations. Ed was obviously hooked on cardiothoracic surgery and went to the Brigham for his CT fellowship. For the last 9 years he has been the director of the Heart and Vascular Center at the Cleveland Clinic facility in Weston FL where he does cardiac (especially valves) and pulmonary (including VATS and robot) surgery. Ed recalls that some of the best things about HUP surgical residency were the degree of independence for senior residents, the great faculty/resident relationships, and honest M and M conferences. His advice to the new surgical interns at HUP is “take advantages of all the great resources at Penn and work hard”. In his spare time Ed enjoys biking, swimming, and gym workouts. He has three children. His daughter, the oldest, is a math teacher in St Louis and his youngest (son) hopes for a career in the theater. The middle child (son) works as an engineer at Wash U.

**David Deaton** was born in Durham, North Carolina and went to college in Philadelphia at Haverford. He returned to Durham for medical school at Duke, then came to HUP as a surgical intern in 1985, very highly recommended by Drs. Sabiston and Bollinger. David’s father and grandfather were surgeons, so he came by his interest in surgery genetically. At Duke, David started to do research on small bowel transplantation with Dr. Bollinger, an interest he continued at Penn when he spent 2 years in the immunology lab with Drs.

Barker and Naji. Some of the most influential people for David during his HUP training were Drs. Fairman, Perloff, Mackie, Barker, and Naji. His performance as a chief was described by John Daly as “superb”, and Jack Mackie described David as “one of the very best in all areas”. David recalls that the strengths of his general surgery training included the camaraderie, the autonomy, and the teaching. From HUP, David went to UCLA for vascular fellowship with Wes Moore where he got in on the ground floor of endovascular



**Ed Savage**

therapies, which he wholeheartedly embraced. David has been instrumental in the development of, and FDA approval for, several endovascular devices. He was a leading investigator in the first US EVAR trial, and testified before the FDA in 1999 for the first approved EVAR device in the US. David has been a primary investigator on several phase 1 trials for different aortic endograft systems, and did the first in man and first in US cases with the Aptus device. After a brief stint as Chief of Vascular Surgery at Georgetown, David is currently on the faculty at the University of South Carolina where he spends some of his time seeing patients and operating. The rest of his time is spent in industry related to device development and innovation. David is the CMO of Syntactx, an international contract research organization, and is a clinical advisor to Limflow, a startup company with a percutaneous system for deep vein arterialization. Since 1999 David and his wife Lorraine have lived in Annapolis where she has a very busy breast surgery practice. They have two children, a son who works in film production in Los Angeles, and a daughter who works in international economic development. In his spare time David enjoys sailing, tennis, and skiing. His advice to the new HUP surgical interns is this: “surgical residency is like an all you can eat buffet—sample widely and make sure you get enough”.

**Steve Fishman** was born in Chicago and got both his bachelors and MD degrees (AOA) at Northwestern. David Nahrwold and John Bergen very strongly recommended him for residency and he arrived at HUP as a new surgical intern in 1986. Steve was both an outstanding resident and a popular resident with his house staff colleagues who elected him president of the HUP housestaff. He won the Inouye Award, the Ravdin/Rhoads Research Award, and the Resident Scholar award. Steve went into Paul



**Steve Fishman**

Addonizio’s lab just as the ink was drying on Paul’s new contract as chief of cardiothoracic surgery at Temple. So Steve helped Carol Fisher move Paul’s lab to Temple, but he also had a great research plan as evidenced by his winning an American Heart Association grant that year. He was also first runner up for a highly competitive SUS research grant and received an extraordinary letter from the committee about this, authored by Alden Harken. Unfortunately, due to unforeseen residency manpower needs, Steve only spent one year in the lab and was advanced a year ahead of his fellow interns. Among the most important influences during training Steve lists Drs. O’Neill, Zeigler, Rosato, and Mullen. He also singles out his



# Penn Surgery

Department of Surgery  
Attn: Clyde Barker, MD  
4 Silverstein/HUP  
3400 Spruce Street  
Philadelphia, PA 19104

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senior residents Pat Bailey and Marty Karpeh. When asked to recall some of the best things about his HUP surgical residency, Steve acknowledges that they were some of the best years of his career. He recalls particularly the camaraderie and mutual support amongst the residents, the residents' and attendings' enthusiasm for learning, and the extensiveness of the clinical training inside and outside the OR. As discussed elsewhere in this newsletter, Steve continues to have an outstanding career in pediatric surgery at Boston Children's Hospital where he did his fellowship and where he holds an endowed chair. He is an international authority on vascular anomalies. Not surprisingly, at Boston Children's Steve is the president of the physician's organization and senior VP for access and business services. He is very involved with both department of surgery and hospital strategy for growth and partnerships. Steve has this advice for the new HUP surgical interns: "take ownership of your patients, and try to really know them as both patients and persons".

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