



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.

Lung Transplantation: The Role of Penn Surgery Society Members

On November 6, 2013 Joel Cooper traveled to Canada to join 350 others in celebration of the 30th anniversary of the world's first successful lung transplant, a procedure performed by Cooper at the University of Toronto. The success converted lung transplantation from a consistently fatal procedure into a lifesaving option for thousands of patients. At the University of Toronto in the early 1980s, Cooper conducted the basic laboratory experiments that were critical to the success. Over the 20 years before this, 44 patients worldwide had received lung transplants, but all had died within days or weeks following the surgery usually because the transplant's tracheal anastomosis refused to heal. In his animal experiments Cooper

found that immunosuppression with prednisone prevented the inflammation phase that is crucial to wound healing. He demonstrated that with cyclosporine based immunosuppression



1983, Joel Cooper with the First Successful Lung Transplant Patient, Tom Hall

he could avoid prednisone and its adverse anti-inflammatory effects thus allowing the tracheal anastomosis to heal. He also showed that wrapping the airway connection with omentum helped promote healing. He was then ready to proceed with a human transplant.

The next patient scheduled to receive a lung transplant was Tom Hall. Cooper recalled asking him "Tom, there have been 44 attempts so far and

no one has survived. Are you sure you want to go ahead with it? He said, I am grateful to be number 45. He was an upbeat person." The transplant was successful and Tom Hall lived for 6 years. Above he is seen talking with Dr. Cooper soon after the operation and on page 6 while celebrating in Paris the 5th anniversary of his transplant.

After the first success Cooper performed 12 consecutive successful single lung transplants, placing the procedure on a firmly accepted basis. In 1986 Dr. Cooper also performed the first successful double lung transplant. Additional aspects of his research in this field were also important, such as devising methods of preservation.

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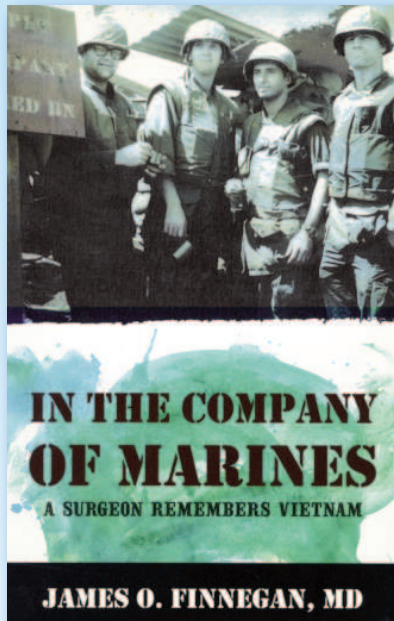
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From the Editor

Clyde F. Barker, M.D.

When I learned of Jim Finnegan's recent death (page 11) I searched for and found the book he had sent me when it was published in 2009. The picture (right) tells part of the story of his service in Vietnam. In one particularly graphic passage that attracted considerable newspaper coverage Jim tells how he closed a hole in the heart of one marine and for another who had been pronounced dead, he massaged the heart until his patient came back to life. I got the impression that despite the hardships and dangers Jim considered these his finest hours. Perhaps they were.



Rereading this account of Jim's harrowing experiences as a combat surgeon evoked half-forgotten memories of the 1960s of our country's attitude about the Vietnam War and the somehow unappreciated or forgotten heroism of our soldiers. It also brought back to me memories of Jim as a surgical resident. Jim was a character never likely to be forgotten but to reinforce my recollection I consulted the Department's archives. Just as I had remembered several of the more conservative faculty members considered Jim somewhat too independent and aggressive for a HUP resident of that era. I dare say that these were positive attributes in Vietnam. The record also showed that Julian Johnson, our Department's master surgeon and one not given to hyperbole, rated Jim as a talented surgeon. In fact Julian bragged a bit about his trainee's performance in Vietnam. I concluded that the praise Jim was given by the media was justified.

Jim's book, *In the Company of Marines*, is worth reading. Amazon has it for \$9.97. You can also view on line at C-Span Video Library, a lecture that Jim gave in 2010 at the Army and Navy Club in Washington, DC.

On a happier note this issue features a number of positive news items. Two of our Penn Surgery Society Members have been named University Medical School Chairmen: Mike Choti, Surgery Chairman at Southwestern in Dallas and Joe Woo, Chairman of the Department of Cardiothoracic Surgery at Stanford. This brings the total of department chairs by HUP graduates of the past three decades to an even dozen. In addition, Ed Woo and Seth Force have become division chiefs at Georgetown and Emory respectively. Prestigious Penn Medicine awards have gone to Noel Williams, Mike Acker, and Jim Mullen, Pat Reilly, and Najjia Mahmoud. Jeff Drebin was elected to membership in the Institute of Medicine of the National Academy of Sciences, a very rare distinction for a surgeon.

The 30th Anniversary of Joel Cooper's successful lung transplant (the world's first) recalled for me memories of Jim Hardy (HUP Chief Resident 1951) who performed the world's very first (though not successful) lung transplant. I got to know Jim Hardy when I was 15 because he and my older brother Hal were close friends as HUP residents. They were also companions throughout World War II as army doctors in England, France and Germany and were on a ship halfway to Japan when it turned around on VJ day. Hardy's autobiography (available from Amazon) was fascinating to me because of the chapters on their wartime and HUP residency experiences, as well as the chapters on the first lung and heart transplants.

It was also a special treat for me to hear the story of Hardy's first lung and heart transplants as told by Marc Mitchell at the 2013 Congress of the American College of Surgeons. It was illustrated with 50 year old restored color movies of the operations. Marc (HUP Vascular Fellow 1996-97 and Penn surgical faculty member 1997-2005) is now the James D. Hardy Professor and Chairman of the Department at the University of Mississippi.

Following in the footsteps of Joel Cooper and Jim Hardy Penn Surgical Society members remain leaders in the field of lung transplantation. Seth Force (HUP Chief Resident 2000-01) is the director of the lung transplant program at Emory University and Daniel Kreisel (HUP Chief Resident 2002-03) heads the program at Washington University in St. Louis. The HUP lung transplant program, initiated by Larry Kaiser in 1991 has now performed more than 850 lung transplants under its subsequent directors Joe Bavaria, Alberto Pochettino and Ed Cantu.

Penn Medicine Awards of Excellence

On November 13, at the College of Physicians, three of the Department's faculty were presented with Penn Medicine Awards of Excellence.

Noel Williams, MBBCh, MCH, FRCSI was named the 2013 Louis Duhring Outstanding Clinical Specialist Awardee. Noel graduated from medical school at the Royal College of Surgeons in Ireland. After a research fellowship at Penn and post graduate surgical training and faculty positions in Ireland Noel completed a general surgery residency at HUP and was appointed Assistant Professor of Surgery. Earlier this year he was promoted to full Professor. Noel is one of the Department's most broadly experienced GI surgeons. His special interests are minimally invasive and bariatric surgery. He is Director of Penn's Center for Minimally Invasive Therapy. He also directs Penn's Metabolic and Bariatric Surgery Program which is one of the largest in the nation. Under Noel's leadership it has been designated by the American Society for Bariatric Surgery as a Center of Excellence.



Noel is one of the Department's busiest educators. He is head of the HUP surgical residents' basic core curriculum, the Penn Surgery Simulation Center and the American College of Surgeons' Education Institute at Penn Medicine. Many of his 81 peer reviewed publications and 40 chapters are on education. In addition in the last 5 years he has delivered over 100 invited lectures locally, nationally and internationally.

Michael A. Acker, MD has been chosen as the 2013 recipient of the Alfred Stengel Heath System Champion Award. Mike is the only one I know of who has won two of these prestigious Penn Medicine Awards of Excellence. In 2002 he was the Louise Duhring Outstanding Clinical Specialist Awardee.

Mike was HUP Chief resident in 1988. During his residency he won the Jonathan Rhoads Research Award and the Surgical Scholar Award twice. He spent 2 years of research in Larry Stephenson's Lab. Their studies of electronically stimulated skeletal muscle as a potential power source for failing hearts foreshadowed Mike's concurrent research in mechanical cardiac assist devices.



Mike spent his cardiothoracic fellowship and 2 years as Assistant Professor at Hopkins before returning (with Tim Gardner) to HUP in 1993. Since 2003 he has been Chief of the Division of Cardiovascular Surgery. He is also the William Maul Measey Professor of Surgery and Director of the Heart and Vascular Center.

Mike is one of the nation's experts in cardiac revascularization, valve replacement, transplantation surgery for arrhythmias and mechanical cardiac assist devices. His research and clinical accomplishments have been supported by NIH and other sources and reported in over 160 papers. In addition to the major cardiac and thoracic surgery societies he is a member of the Society of University Surgeons and the American Surgical Association.

In addition to all this Mike is an award winning classical guitarist.



The Department's third Award of Excellence was announced earlier this year when **Jim Mullen** was designated as the Robert Dripps Awardee for Graduate Medical Education. The entire 2013 Spring issue of the newsletter was dedicated to Jim's winning this prize. Thus the many well deserved justifications are not reiterated here. Suffice it to say that Jim's 30 years of contributions to the education of our residents remains unmatched.

Academy of Master Clinicians

Najjia Mahmoud and **Pat Reilly** have been chosen as inaugural members of the new Academy of Master Clinicians. Along with 20 others Drs. Reilly and Mahmoud were selected from 64 nominees from various departments. Launched in 2013 this designation recognizes Penn Medicine clinicians who exemplify the highest standards of clinical excellence, humanism and professionalism. Election to this academy is the highest clinical honor that can be bestowed on a Penn physician. During their 5-year term, the Master Clinicians are expected to support the missions of Penn Medicine



in several ways: According to Dr. Jameson they will serve as ambassadors for Penn Medicine. They will create an organized forum to provide feedback to leadership on strategies to improve the culture of clinical excellence and to promote an optimal experience for patients. They will be expected to be available as mentors and consultants and to lead in professional development and training programs for faculty, residents, trainees, students and staff. Additional areas of focus will include new faculty orientation and training, clinical and communication skills and the art of medicine.

Bill Schwab: At the Cutting Edge of Trauma Care

The following is based on and largely excerpted from David Holmes' interview of Dr. Schwab and published in the *Lancet* in September 2013.

Dr. Schwab said that although 1972 was the beginning of the end of the Vietnam war, the human cost that year remained catastrophic. Twice a week, military transports would arrive at naval hospitals like the one in Portsmouth, Virginia, delivering injured casualties. Also arriving at the Portsmouth Hospital that year was William Schwab a 26-year-old surgical intern. His experiences in tending the wounded would change his life and substantially improve the case of trauma patients.

Now professor of surgery at the University of Pennsylvania and founder of its trauma program Schwab is probably best known as a chief architect of the "damage control" approach to treating life-threatening injuries, which has become a mainstay of trauma care around the world. He is also respected for his steadfast campaign to reduce the toll of gun-related violence. He traces everything back to his navy years in the 1970s. "Being with experts in trauma surgery and the kind of wounds that few civilian surgeons knew anything about. More than anything it stimulated my interest in my life's work". He left the Navy for a life in academia in 1980 and joined the surgery faculty at Penn 1987, but he has never lost contact with the military.

Schwab is a firm believer that, in the case of trauma care war has been the driver of technical innovation. After a terrible motor crash, with multiple people hurt, the trauma system responds and allows patients to have their lives supported and be triaged to a specialty facility. "If you track that concept of a systems response back, it all came from Korea and especially Vietnam", and the same thing is happening today. 2013 marked 10 years since the US-led invasion of Iraq: that's "10 years' experience of the deployed medical corps", says Schwab. "And for the first time on battle-field research is going on: the collection of data, study and analysis of data to better provide care, and produce an astounding number of advances that we've witnessed over the years". But importantly, unlike in earlier conflicts when many of the advances weren't widely disseminated, recent progress has been captured in the literature.

Although many of Schwab's innovations have not been driven by war, the epidemic of inner-city gun violence that erupted in the late 1980s and early 1990s provided ample impetus. In particular, the precipitous rise in the number of patients with multiple gunshot wounds that went hand-in-hand with the proliferation of semiautomatic hand guns necessitated a radical change to trauma care. "After 1985 there were more shots fired, more tissue destruction, more organs injured, more vessels disrupted, more shock, so we had to adapt. "The same way that surgeons adapted to weapons in war. We suddenly started to see instead of one bullet hole two or three or four. These wounds were so hideous that conventional surgery didn't work. So we went back in history and came up with the concept of damage control."

The orthodoxy of the time held that trauma patients should first be resuscitated and their blood pressure and pulse stabilized before attempting a definitive surgical intervention. Damage control turned that orthodoxy on its head, and holds instead

that a patient with major bleeding should be rapidly operated on to control hemorrhaging and then transferred to a critical care unit to be stabilized before definitive surgery is attempted.

If damage control was the technical response to burgeoning gun violence, Schwab's Eastern Association for the Surgery of Trauma presidential address in 1993, titled *Urban Firearm Injury: America's Uncivil War*, was his moral response, and it marked the beginning of a crusade against violence. "Bill found himself morally unable to just continue dealing with the aftermath of this violence", says Terry Richmond, a professor of nursing at Penn and a cofounder with Schwab of the Firearm and Injury Center at Penn. The centre first documented a lot of the data that informed the Biden Task Force on Reducing Gun Violence and the 2013 Institute of Medicine report that considered how to collect the evidence needed to develop sound policies to reduce the threat of firearm-related violence. "I think Americans have always, once presented with sound data, been able to come up with a decent compromise and policy, so I'm cautiously optimistic", says Schwab. Until then, there'll be a lot more damage control to do. (David Holmes - www.thelancet.com Vol. 382 - Sept. 28, 2013)

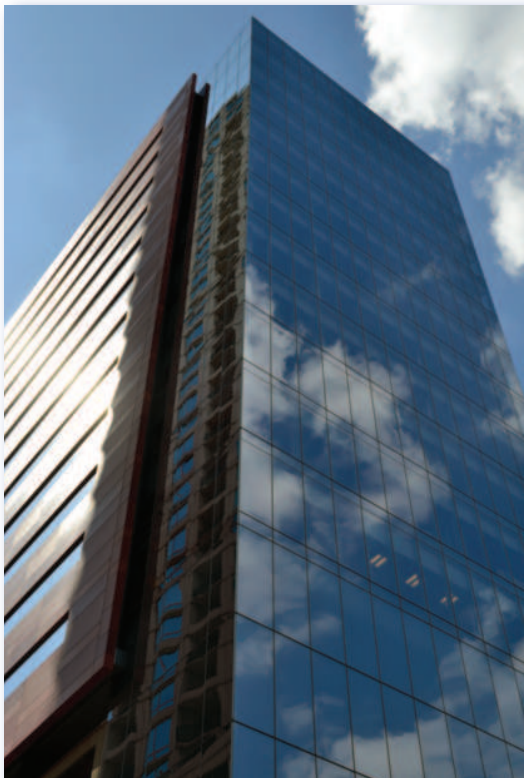
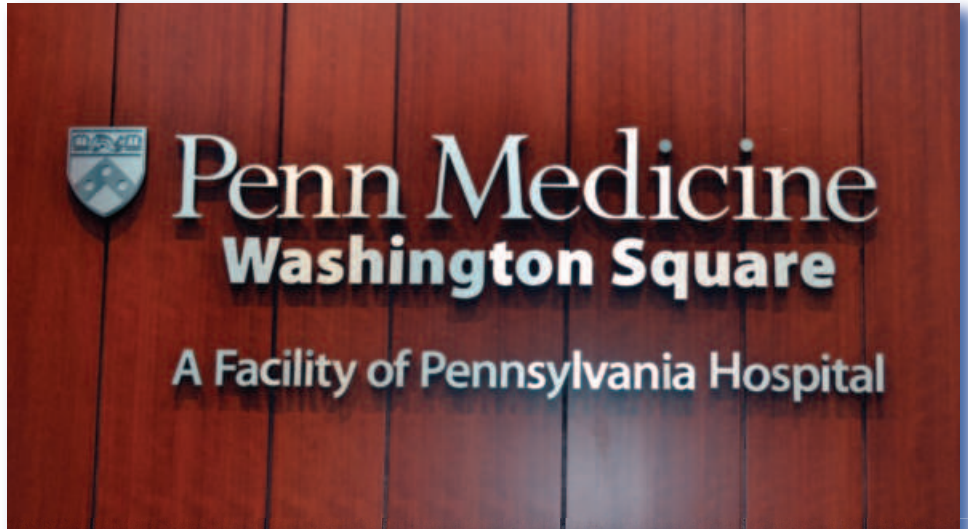


New Offices at Washington Square

In September Penn Medicine Washington Square had its official Grand Opening of a new 153,000 square foot, “green” building that will serve as the major hub of outpatient care for Pennsylvania Hospital. This modern facility features leading-edge telecommunication and clinical information systems, providing patients with the most advanced level of collaborative and interdisciplinary care.

More than 100 providers from across a wide range of services – including surgery, cardiology, concierge medicine, otorhinolaryngology, primary care, and women’s health – are now available in one location along with patient pre-admission testing and phlebotomy services. The facility is built atop an existing parking garage, offering added convenience for patients.

Penn Medicine Washington Square is an integral part of Pennsylvania Hospital’s master plan which includes the expansion of private rooms for our patients. It represents great strides in both meeting the growing need for outpatient care and Penn Medicine’s overall commitment to its patients in Center City and beyond.



Lung Transplant (continued from front page)

In 1997 Dr. Cooper moved from Toronto to Washington University as Chief of Cardiovascular Surgery. Since 2005 he has been Professor of Surgery at the University of Pennsylvania and HUP. Credit for initiating lung transplantation and for its early development clearly belongs to him as recognized by his many awards. In 1996 he received the Jacobson Award, the American College of Surgeons' highest honor for innovation. In 2011 he was elected to membership in the Institute of Medicine of the National Academy of Sciences. In 2013 he was awarded the Thomas E. Starzl Prize in Surgery and Immunology.

James Hardy's Contribution

Of the 44 failed lung transplants prior to Dr. Cooper's success the most widely publicized was the very first. It was carried out 20 years earlier by another Penn Surgical Society Member. On June 11, 1963 James Hardy (HUP Chief Resident 1951) performed the transplant at the University of Mississippi where he was the Chairman of the Department of Surgery. The patient died from renal failure after 18 days but the transplanted lung had functioned well throughout the postoperative course. This was a considerable achievement in these early days of transplantation. At the time because immunosuppression was crude only a few kidney transplant recipients had survived for a year.

There was widespread criticism of Hardy's operation which many deemed an unethical publicity seeking stunt which had no chance of success. Hardy acknowledged that the odds for success had been long. The patient had a large lung cancer, resistant lung infection behind the airway obstructing tumor and substantial chronic renal insufficiency. Fueling the negative outpouring was the fact that the patient was a prisoner serving a life sentence for murder. Attracting further attention to the story was the assassination of the well known civil rights activist Medgar Evers which took place across town while Dr. Hardy was doing the lung transplant. The stricken Evers was brought to the University Hospital. The chief resident who was assisting Hardy in the transplant broke out to attend Evers in the emergency room, but he soon died. Stimulating further hype in this era of civil right turmoil was the rumor that Evers was had been as the lung donor.

The force of the negative response was probably the reason Hardy did no more lung transplants. However seven months later he performed a human heart transplant. Again it was the world's first. Its prompt failure engendered further criticism as premature and ill-conceived by Hardy. Adding to the controversy was that a chimpanzee had been used as the heart donor when the prospec-



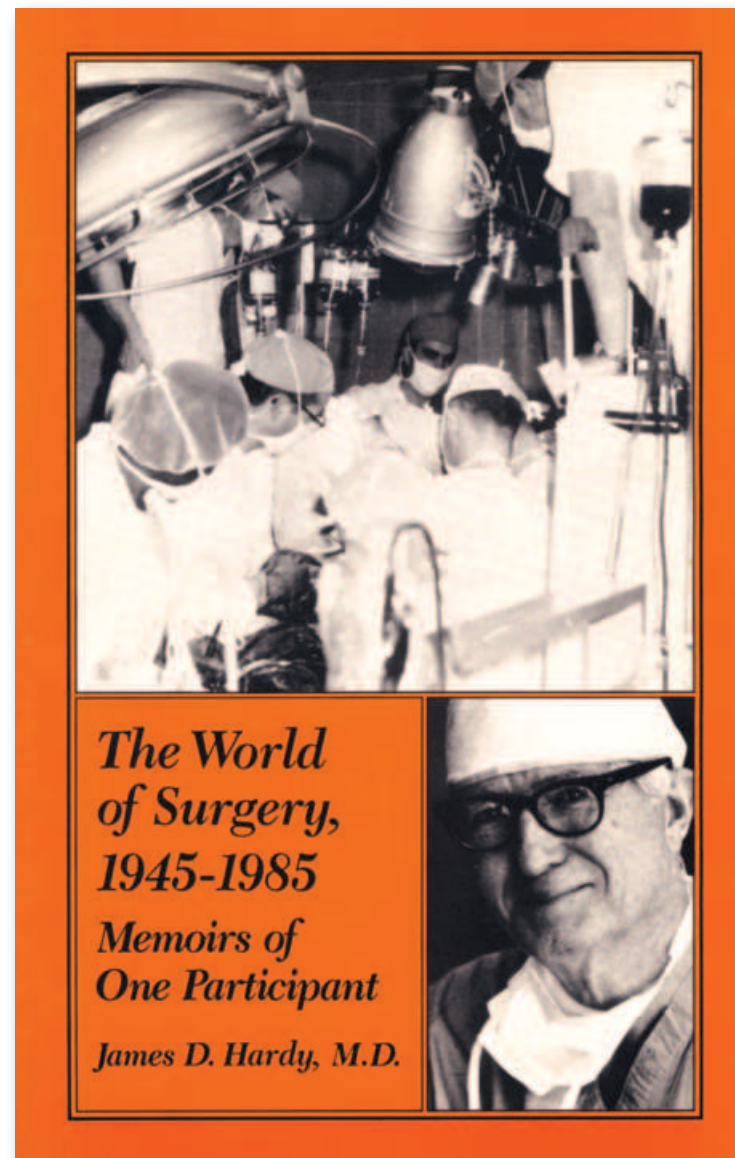
Tom Hall, 5 Years After His Lung Transplant



Joel Cooper and Tom's Wife, Barbara in 2013



James D. Hardy, M.D.



Book Cover

tive human donor suddenly became unsuitable after it was too late to abort the recipient operation.

Although in retrospect Hardy's failed transplants appear to have had little chance of success, such attempts in otherwise doomed patients were not unusual in the early days of transplantation. Even in the simpler field of kidney transplants only a handful had been successful. Since the concept of brain death had yet to be accepted human deceased donors were difficult to obtain. In several centers this had stimulated trials of primate donor kidney transplants. Their short term success had encouraged Hardy to fall back on the use of the chimpanzee heart.

Hardy's transplants were hardly spur of the moment stunts. In the decade prior to the human cases Hardy had perfected the surgical techniques and tested the day's crude immunosuppression in dogs. Of his 68 canine lung autotransplants 33 were long term survivors. Of his 107 canine lung allografts 20 survived an average of 20 days and 2 for many months. Hardy had also performed large numbers of canine heart transplants with similar results. There were no IRBs at the time but Hardy's extensive experience in animals convinced the Dean of the medical school that attempts of lung and heart transplantation in humans was justified.

In some circles Dr. Hardy's reputation was permanently blemished by these ill fared transplants. This was unfortunate and not entirely fair. He was a thoughtful and totally moral individual. He was not just a bold investigator pioneering a previously unexplored field but also arguably the most accomplished academic surgeon of his generation. Despite persistent criticism in the media his surgical peers made him one of their most honored colleagues.

Jim Hardy was a boy wonder and probably the most successful of Dr. Ravdin's many talented trainees. The first of his 24 books and many of his 605 papers were written while he was still a HUP resident. At age 37 he was appointed Chairman of Surgery at the University of Mississippi, a new school that he soon put on the surgical map. Among the many societies he served as president were the American College of Surgeons, the Society of University Surgeons, the American Surgical Association, the International Society of Surgeons and the Society of Surgical Chairmen. He was editor of the World Journal of Surgery.

One of the best accounts of Hardy's transplants is an essay he wrote for the festschrift for Dr. Rhoads' 80th birthday. Hardy also told the story when he came to HUP in 1991 to receive the Department's first Distinguished Graduate Award.

Joe Woo Appointed Chairman of Dept. of Cardiothoracic Surgery at Stanford



Mike Acker informed the faculty of Joe's appointment with the following message: "With great pride I write to inform you that Y. Joseph Woo, M.D. will become the Norman E. Shumway Professor and Chair of the Department of Cardiothoracic Surgery at the Stanford University School of Medicine. While I am saddened that Joe will

leave Penn Medicine, this is a tremendous accomplishment and is evidence of Joe's outstanding work in cardiovascular surgery and research."

"Joe is a nationally recognized clinician, researcher, and educator. He joined the Penn faculty in 2002 after completing his postgraduate surgical training with us. He directs the Minimally Invasive and Robotic Cardiac Surgery Program and the Cardiac Transplantation and Mechanical Circulatory Support Program. Joe has developed several new approaches to minimally invasive techniques for mitral and aortic valve repair and reconstruction and performs over 350 surgeries a year. He routinely has American and foreign cardiac surgeons visiting Penn to learn his techniques. Joe is a frequently invited national and international speaker on these topics and has even been invited to perform these operations in China, India, and Japan. His laboratory is funded by the National Institutes of Health and investigates new paths to myocardial repair through angiogenesis. He is the principal investigator for several clinical device trials and translational scientific clinical trials. Joe chairs several national committees and is a member of the editorial board of the *Journal of Thoracic and Cardiovascular Surgery*.

The Department of Surgery is very fortunate to have had a surgeon of Joe's caliber on its faculty. He has become an important leader in the field of cardiovascular surgery. I am sure Joe will further advance cardiovascular surgery in his leader-

ship of the Department of Cardiothoracic Surgery at Stanford. I have no doubt he will be successful in his new role and I wish him continued success."

A longer message from Dr. Acker would have included other important accomplishments of Joe Woo (HUP chief resident in general surgery 1999; cardiothoracic surgery 2001) such as: the Surgical Scholar and William Inouye Teaching Award while a resident; the Luigi Mastroianni Jr. Clinical Innovator Award in 2012, his election to membership in the Society of University Surgeons and the Society of Clinical Surgery and his more than 90 peer reviewed publications. In addition to his clinical and research accomplishments Joe has been an outstanding mentor to many young investigators, for example JW MacArthur (see page 10).

Dr. Acker's announcement also included the plan for Pavan Atluri to transition into Dr. Woo's activities.

Pavan received his MD with distinction in research from Albany Medical College and completed his internship and residency in surgery at HUP in 2008. Pavan also completed a post-doctoral research fellowship and a residency in cardiovascular surgery at HUP. He has been on the faculty since January 1, 2011.



Pavan's main practice has been at Penn Presbyterian Medical Center but will now move to the Hospital of the University of Pennsylvania. Pavan is adept at all facets of cardiovascular surgery with a particular expertise in heart failure, valvular, and minimally invasive cardiac surgery. He has a specific skill in minimally invasive robotic mitral valve and coronary surgery. Pavan will assume Joe Woo's roles as Director of the Minimally Invasive and Robotic Cardiac Surgery Program and Director of the Cardiac Transplantation and Mechanical Circulatory Support Program. He will continue to support the Mechanical Circulatory Support program at Penn Presbyterian. Pavan will also assume the role of Co-Director of the Heart Failure Center of Excellence in the Heart and Vascular Center with Dr. Lee Goldberg.

Pavan's research interests include molecular cardiovascular revascularization, endothelial precursor cell tissue engineering, translational molecular research, cellular myocardial regeneration and minimally invasive cardiac surgery techniques.

Mike Choti Appointed Chairman at University of Texas Southwestern

Mike Choti (HUP Chief Resident 1990) has been named Chairman of the Department of Surgery at University of Texas Southwestern Medical Center. He will also be the first Surgeon in Chief of the new William P. Clements Jr. University Hospital that will open in 2014.

UT Southwestern is one of the premier academic medical centers in the nation, integrating biomedical research with exceptional clinical care and education. The institution's faculty numbers 2700 including five who since 1985 have been awarded Nobel Prizes.

After finishing his HUP residency and a clinical fellowship in surgical oncology at Memorial Sloan Kettering Mike was appointed to the faculty at Johns Hopkins where he remained until now. At Hopkins he was Handlesman Professor of Surgery, Oncology, Radiology and Computer Science. He was also Director of the Cancer Center, Chief of the Division of Surgical Oncology and Vice Chairman of the Department of Surgery. In his 21 years at Hopkins Mike has proven to be a true triple threat compiling an impressive portfolio as a clinical surgeon, researcher and educator.

Mike holds many leadership positions in national societies.



He is a member of the Surgical Oncology Board of the American College of Surgeons and the American College of Surgeons Commission on Cancer. He is chair of the NCI-CTEP Hepatobiliary Task Force and Director of the National Comprehensive Cancer Network Neuroendocrine Tumor data base.

Mike serves on the editorial boards of 5 journals including the Annals of Surgical Oncology and the Journal of Gastrointestinal Surgery. His research in surgical innovation, robotic and image guided therapy, molecular genetics and biomarkers in cancer has been consistently funded by NIH and other sources. He has published over 350 peer reviewed articles, reviews and chapters.

Among Mike's many society memberships are the American Surgical Associations, the Society of University Surgeons, the Halsted Society, the Society of Surgical Oncology and the Surgical Biology Club II.

Mike was named our Department's 2013 Distinguished Graduate, (See Summer 2013 issue of the Newsletter). He is one of Surgery's most productive and respected members. UT Southwestern is fortunate to have him as Chairman of Surgery.

Ed Woo will leave HUP in January 2014 to assume a leadership position in Washington, DC. Drs. Drebin and Fairman sent the following announcement to the faculty.

"It is with a mixture of pride and sadness we announce that Edward Woo, M.D. will be leaving the Department of Surgery to take the position of Director, Medstar Washington Regional Vascular Program, Chief of Vascular Surgery, Medstar Washington Hospital Center and Medstar Georgetown University Hospital and Professor of Surgery Georgetown University. Dr. Woo has spent his entire career to this point at Penn, receiving his undergraduate and MD degrees at Penn, and training in General and Vascular Surgery at HUP. He joined the faculty in



2004 and was promoted to Associate Professor in 2010. Dr. Woo has also been the program director of the vascular surgery fellowship program since 2007. An accomplished clinical surgeon, Ed has also conducted extensive clinical research in open surgical and endovascular approaches to vascular disease. While we are sorry to see Ed leave Penn, we are proud of his rising national stature and look forward to following his career as he embarks on this new leadership opportunity.

He will be staying at HUP into the new year to facilitate a smooth transition. Please join us in congratulating Dr. Woo on his new position."

Alumni News

- ◆ In October 2013 our Chairman was elected to the Institute of Medicine of the National Academy of Sciences, one of the nation's highest honors in Medicine and one that very few surgeons achieve. Reproduced here is the announcement of this honor by the IOM.



“**Jeffrey A. Drebin, M.D., Ph.D.**, is chair of the Department of Surgery at Penn Medicine, and John Rhea Barton Professor of Surgery. A graduate of Harvard Medical School, Dr. Drebin continued his surgical training at the Johns Hopkins University School of Medicine. Dr. Drebin's research has contributed significantly to the understanding of the genetic origins of cancer. His classic work with monoclonal antibodies directed against the HER2/neu protein provided the scientific foundation for the evolution of targeted therapeutics for cancer and led to the development of the first generation of targeted monoclonal antibody drugs for the treatment of breast cancer. His research has been supported by the National Institutes of Health, the Department of Defense and the Burroughs-Wellcome Fund. He is currently the co-Principal Investigator on a \$22 million dollar clinical and translational “dream team” award from the Stand Up to Cancer Foundation for innovative studies in pancreas cancer. His many clinical interests include pancreatic cancer, acute and chronic pancreatitis, the use of new technologies to manage liver tumors, disorders of the bile ducts and management of gallbladder disease. Dr. Drebin has published more than 100 peer-reviewed research papers, book chapters and reviews and is co-inventor on two patents related to the treatment of cancer with monoclonal antibodies. He currently serves on the Board of Scientific Advisors of the National Cancer Institute, is Vice-President of the Society of Surgical Oncology, President-Elect of the Philadelphia Academy of Surgery and Past-President of the Society of Clinical Surgery.”

- ◆ From **Brad Leshower** (2008 Class representative) we received the news that **Seth Force** (HUP Chief Resident 2001) has been awarded the Andrew J McKelvey Professorship in Lung Transplantation at Emory University. He is seen here at a reception in his honor with Dean Chris Larson and Clint Lawrence, Medical Director of Lung Transplantation. After



10 finishing his general surgery training at HUP, Seth

was a thoracic fellow at Washington University where he worked with Joel Cooper in lung transplantation. In 2003 he moved to Emory where he is now Surgical Director of Lung Transplantation, Co-director of Minimally Invasive Thoracic Surgery, Director of Thoracic Surgery Robotics and acting Chief of the Division of Thoracic Surgery. Seth is credited with increasing the volume of lung transplants from 10 per year before his arrival to more than 35 per year. His program has also achieved some of the best survival rates in the nation.

- ◆ At the 2013 meeting of the American Heart Association **John W. MacArthur** won the Vivian Thomas Young Investigator Award for his work on large animal stem cell angiogenesis. This work will be published in one of the AHA journals and also comprises his thesis for his Master's Degree in Transitional Research. The competitive, prestigious Thomas award is named for Vivian Thomas, a gifted laboratory technician who worked with Alfred Blalock in developing the subclavian to pulmonary artery shunt for cyanotic children. He was so important to Blalock and in training the surgical residents in the laboratory that he was given an honorary degree by Johns Hopkins University.



JW MacArthur will be going to Stanford in January to complete his research rotation with his mentor Joe Woo, but fortunately for us then returning to HUP to finish his residency.

- ◆ **Sunil Singhal** has been elected to membership in the Society of Clinical Surgery. This is a distinct honor. This society was founded in 1903 by Harvey Cushing. It has a limited membership and individuals must be elected before age 45. A surprisingly high proportion of its members have become leaders in American Surgery. Dr. Drebin has been president of the Society and 8 of the Department's faculty have been elected.



- ◆ Adding to his many special honors **Alan Wein** has been chosen to deliver the American Urological Lecture at the Annual Meeting of the Société Internationale d'Urologie. The lecture will be given in Glasgow, Scotland on October 15, 2014.



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

- ◆ I was delighted to receive from **Steve Fishman** (HUP Chief resident 1992) an inscribed copy of his new book: Vascular Anomalies, Hemangiomas and Malformations. Coedited by John Mulliken, Patricia Burrows and Steve this 1118 page volume is clearly the definitive treatise on this topic which has been Steve's special research and clinical interest. Steve's practice at Boston Children's Hospital includes the full range of pediatric surgery but he has a particular focus on understanding and treating vascular anomalies of the viscera. Though these anomalies are extremely rare, Steve has developed an international referral practice that allows him to recognize patterns in their presentation and opportunities for their treatment. He has developed evaluation and intervention techniques including innovative operative procedures. Recognizing the limitations of surgical treatments, he also investigates the biologic mechanisms involved in the development and progression of these lesions. He has studied known angiogenic modulators as well as metalloproteinases. He has recently identified the likely importance of high molecular weight matrix metalloproteinases in patients with aggressive vascular anomalies.



Steve is Professor of Surgery at Harvard, Co-Director of the multidisciplinary Vascular Anomalies Center, Jane Weitzman Family Chair of the Department of Surgery at Boston Children's Hospital and Secretary General of the International Society for the Study of Vascular Anomalies.

- ◆ **Christopher Law** (HUP intern and general surgery resident 1982 - 1986) and his three brothers have donated \$3 million to the Perelman School of Medicine. This will help establish an auditorium in the Henry A Jordan Medical Education Center in honor of their parents, Joseph and Loretta Law. Between them the four brothers Dennis, Ronald, Christopher and Jeremy hold seven degrees from Penn. After his general surgery training Chris Law completed a plastic surgery residency at the University of Colorado. He is now Chief of Plastic Surgery at Denver Health Medical Center. Dennis Law, also a graduate of Penn Medical School retired from his practice of general surgery in 2001 to become a director and producer of musical theatre. Look for his filmography on IMDb. Jeremy is an orthopaedic surgeon and Ronald is a cardiologist.



- ◆ The Annual Jonathan E. Rhoads Oration of the Philadelphia Academy of Surgery was delivered on December 9, 2013 by **Timothy J. Gardner** on American Surgery: Illustrious Past, Unsettled Future.

Tim Gardner is Medical Director of Christiana Care's Center for Heart and Vascular Health. From 1993 - 2003 he was William Maul Measey Professor of Surgery and Chief of the Division of Cardiothoracic Surgery at the University of Pennsylvania.



Jim Finnegan died of metastatic melanoma at age 75 on October 13, 2013. Jim was HUP Chief Resident in 1971-72. He also completed a residency in cardiothoracic surgery at HUP under Julian Johnson. He later received a Master's Degree in Health Administration from St. Joseph's University.

Perhaps the most interesting and certainly the most intense period of Jim's career was the two years he volunteered to serve in the Marine Corps, after his second year of HUP residency. From September 1967 to September 1968 he was a combat surgeon in Vietnam. During the unrelenting enemy siege of Khe Sanh from January through April of 1968 he was the commanding officer of a surgical team which treated over 2500 wounded marines. Jim sustained shrapnel wounds from an incoming mortar explosion and was awarded a Purple Heart. He was also awarded the Bronze Star with a Combat V for valor.

Jim then returned to HUP and finished his training in general and cardiothoracic surgery. Subsequently during his long career he served as chief of cardiothoracic surgery at several of the area's institutions including the Medical College of Pennsylvania, St. Agnes Medical Center and Crozer Chester Medical Center.

He is survived by his wife Linda, a brother and sister, three sons and two daughters, and 15 grandchildren.





Penn Surgery

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

W I N T E R 2 0 1 4

New Faculty

◆ **Ari D. Brooks, MD** has joined the faculty as the Director of Endocrine and Oncologic Surgery and Director of the Integrated Breast Center at Pennsylvania Hospital. He is a graduate of Hahnemann University School of Medicine and completed a residency in surgery at NYU and a fellowship in Surgical Oncology at Memorial Sloan-Kettering. Upon completion of his training, he was recruited to MCP/Hahnemann University, now Drexel University College of Medicine, where he achieved the rank of Professor of Surgery. While at Drexel, he repeatedly received the Golden Scalpel Award for teaching of surgical residents. He is consistently listed as a Top Doctor in Philadelphia Magazine and Castle Connolly editions.



◆ **Sean P. Harbison, MD** joins Penn Surgery as Clinical professor of Surgery and Chief, Division of General Surgery at Penn Presbyterian Medical Center. He earned his medical degree from Temple and completed his surgical residency at The Graduate Hospital, a Surgical Oncology Fellowship at Memorial Sloan Kettering and a Surgical Education Fellowship sponsored by the Association for Surgical Education. Prior to joining Penn Surgery Dr. Harbison practiced General Surgery at The Graduate Hospital and Temple University Hospital. His leadership roles have included Surgical Residency Program Director at The Graduate Hospital and Vice Chairman for the Department of Surgery at Temple University School of Medicine as well as student clerkship director at both institutions.



Editor:

Clyde F. Barker, MD
Donald Guthrie Professor of Surgery

Graphic Design:

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