

# NEWS AND NOTES

ISSUE 3 FALL 2011

## MESSAGE FROM THE CHAIR



Greetings! Since our last newsletter, our department has experienced a year of tremendous growth and accomplishment—stories that I am proud to share with you. This issue will highlight our Head and Neck Division, led by Dr. Mark Prince.

The year started out with a bang, as we learned that we now rank #2 nationwide in NIH funding for otolaryngology departments. We are fortunate to fill our residency and fellowship training program slots with only the highest caliber applicants, and our trainees are publishing at an ever-increasing pace and presenting their work at national meetings and in high-impact peer-reviewed journals. New patient access to our clinics has increased from 62.63% for last year to 80.05% for this year, and our overall patient satisfaction

score increased 7% to an incredible 91.2%. I am particularly proud of this accomplishment and its reflection on the kind and compassionate care we give to our patients. In addition, our request for incremental space in the Taubman Center has been approved, and we will open up our new pediatric otolaryngology division space in the new Mott Children's Hospital, so we have been busy with blueprints and tape measures to prepare for our move into these spaces this coming fall. We also updated and renovated our website—please visit us at [www.med.umich.edu/oto/index.shtml](http://www.med.umich.edu/oto/index.shtml), or look for University of Michigan Otolaryngology on Facebook!

We happily welcomed Dr. David Brown to our clinical faculty this spring, as well as two new physician's assistants late last year; Tina Cordero is the new PA in our Pediatric Otolaryngology Division, and Michelle Strzelczyk is the new head and neck oncology inpatient PA.

We continue our efforts to complete the Charles J. Krause, MD, Endowed Professorship, and are indeed grateful for the kind and generous contributions made thus far by friends and colleagues to honor his legacy. We have also launched a campaign to endow the Merle Lawrence Research Professorship in Otolaryngology, which will fund a distinguished scholar who will become the next director of the Kresge Hearing Research Institute.

I remain awed and inspired by the patients we treat, the care and compassion with which we honor them, the quests we are pursuing, and the bold new answers we are discovering.

I hope you enjoy a wonderful autumn.

Warmly,

Carol R. Bradford, MD  
Professor and Chair

## NEWS FROM THE DIVISIONS

## Head and Neck Division



The Division of Head and Neck Surgery continues to grow and expand. We have increased the volume of clinical care we provide as well as the research that we perform. Our division now offers trans-oral robotic surgery in addition to a wide variety of other surgical approaches, reconstructive surgery, and advanced radiation therapy and chemotherapy.

Currently, our division is participating in eight open clinical trials, testing new drug regimens, and examining radiation and surgical approaches. An exciting development is a trial focused on decreasing the intensity of therapy for head and neck cancer patients with HPV-positive tumors. Initial findings show that these patients have a significantly higher response rate to standard chemotherapy and radiation regimens than other head and neck cancer patients. As a result, we believe that treatment-related morbidity can be reduced without decreasing survival rates by lessening the intensity of therapy.

Dr. Scott McLean joined the Division of Head and Neck Surgery more than a year ago. He completed a residency in otolaryngology at the Mayo Clinic followed by a fellowship at U-M. He was then an active member of the Department of Otolaryngology faculty at Henry Ford Hospital until re-joining us. An outstanding clinician and educator, Dr. McLean has a very strong interest in developing technological advancements that benefit patients. He performs a large variety of head and neck surgical procedures, including cutaneous malignancy and sentinel node biopsies, and anterior skull base surgery. His recruitment has significantly improved our ability to see patients with disorders of the head and neck in a timely fashion.

The most recent addition to the head and neck division is Dr. Vasu Divi, who is well-known to our department, having completed a residency with us. He then undertook a fellowship in microvascular surgery and advanced oncologic surgery at the Massachusetts Eye and Ear Infirmary before returning to U-M. An active member of our group, Dr. Divi performs head and neck oncology surgery as well as microvascular reconstructive surgery. He has an interest in health care economics and delivery—a new area of research for our department. Given the potential transformation of our health care system in the future and the multiple

challenges facing the system, we anticipate that his interest will tremendously benefit both the department and the institution as a whole.

Dr. Divi has been selected to lead the Trans-oral Robotic Surgery program, and Dr. McLean will be a participant. As the number of patients suitable for this surgical approach increases, so too will the number of head and neck surgery division members included in this effort. There is a great need to objectively evaluate the role of robotic surgery in the treatment of head and neck cancers to determine when this type of surgery is most beneficial and when current therapy is most advantageous. As our long history of research demonstrates, we strive consistently to evaluate the effectiveness of new therapies and thus plan to run several trials to evaluate the effectiveness of trans-oral robotic surgery in a variety of tumor sites and patients. We anticipate that this analysis will allow patients and surgeons to have more objective data regarding the utility of this new surgical approach to head and neck cancer.

We are very proud of our division for being designated a Head and Neck Oncology Destination Program. U-M's destination programs provide concierge service and coordinated care to those who come from outside our immediate geographical region to receive care for highly specialized diagnoses. This designation recognizes our expertise in the field of head and neck oncology and reconstructive surgery and enables us to reach patients who previously might not have sought care through UMHS. The destination program is being advertised both nationally and internationally, which will help make patients aware of our expertise and the opportunities for care that are available.

The head and neck surgery division continues to be extremely active in research. Dr. Gregory Wolf leads our Specialized Project of Research Excellence (SPORE) in Head and Neck Cancer, only one of five awarded. This research grant along with a number of other individual research grants from the NIH and other funding organizations allows us to advance the field of head and neck oncology research and treatment. In addition to the basic science research that includes ongoing studies focused on the biology of head and neck cancer, resistance to therapy, cancer stem cells, and head and neck cancer immunology, we continue to be very active in drug development and clinical trials. Currently we are working hard on a proposal to renew our Head and Neck SPORE Grant.

It continues to be our great pleasure to provide head and neck oncology care to the people of Michigan and beyond.

### Introducing Dr. David Brown



We are honored to welcome David Brown, MD, back to our department—he is the only addition to our pediatric otolaryngology division in several years. David will serve as clinical associate professor and pediatric otolaryngology ACU medical director, and he will also direct our department's diversity initiatives. In addition, he will develop a pediatric aerodigestive disorders clinic.

Dr. Brown's practice will treat all aspects of general pediatric otolaryngology, with a special focus on adenotonsillar disease, vocal fold paralysis, airway disorders, and congenital head and neck masses.

Following his graduation from Harvard Medical School, Dr. Brown completed his residency training at U-M (1998–2003) and then a one-year pediatric otolaryngology fellowship at the Children's Hospital in Boston. Afterward, he served as an assistant professor in pediatric otolaryngology at the Johns Hopkins School of Medicine, as well as a Taussig faculty advisor and an associate program director. In 2008 he accepted a faculty position at the Children's Hospital of Wisconsin at the Medical College of Wisconsin, where he remained until we successfully recruited him back to U-M. While at Wisconsin, he was honored with the Medical College of Wisconsin's Faculty Teaching Award, and was named to the Best Doctors in America list for 2009, 2010, and 2011.

Given the opening of the new Mott Children's Hospital in fall of 2011, where we will have an expanded presence, we are thrilled to have Dr. Brown join the Division of Pediatric Otolaryngology's faculty and look forward to the knowledge and clinical expertise he will contribute.

### Three Inducted into Triological Society



It was an impressive honor indeed when three of our clinical faculty members were inducted into the Triological Society as active fellows. The distinguished Society's process for induction is rigorous—two voting fellows must propose inclusion, and prospective fellows must complete an intensive application process, as well as present a thesis in otolaryngology at the Triologic Society meeting that is a part of the Combined Otolaryngology Spring Meetings, held this past April in Chicago.

Pictured above are Dr. Norman Hogikyan, professor and chief, Division of Laryngology, Rhinology and General Otolaryngology; Dr. Carol Bradford, professor and chair of the Department of Otolaryngology–Head and Neck Surgery; and Dr. Adam D. Rubin, adjunct clinical assistant professor and director, Lakeshore Professional Voice Center, as they are awarded active fellow status in the Triological Society. In addition, Drs. Bradford and Hogikyan received honorable mention awards for their theses. Dr. Bradford's title in the clinical research category was "Biomarkers in Advanced Larynx Cancer," and she wishes to thank all the members of the head and neck oncology program and the Head and Neck SPORE team at the Comprehensive Cancer Center. Dr. Hogikyan's thesis in the basic science research category was "Spontaneous Laryngeal Reinnervation following Recurrent Laryngeal Nerve (RLN) Injury: Evidence for Superior Laryngeal Nerve Source, Central Nervous System Plasticity and RLN Regeneration." Dr. Hogikyan notes that the research for this work was performed in collaboration with Dr. Matt Old at the Ohio State University Department of Otolaryngology–Head and Neck Surgery and Dr. Eva Feldman in U-M's Department of Neurology and Program for Neurology Research and Discovery (PNRD). He also worked with Sang Su Oh, MS, DVM, also associated with U-M PNRD.

Warm congratulations to our awardees for this most distinguished honor!

## Chairman Bradford Named President of the American Head and Neck Society

Our chair, Carol Bradford, MD, has recently been named president of the American Head and Neck Society (AHNS). The appointment was made at the American Head and Neck Society meeting in May. The first woman to be selected for this distinguished post, Dr. Bradford will be the president for one year. Her term will culminate with the eighth International Conference on Head and Neck Cancer, to be held in Toronto July 21–25, 2012, where she will deliver the presidential address. At this same meeting, our former chair, Dr. Gregory T. Wolf, will give the Hayes Martin address.

The American Head and Neck Society (AHNS) was founded in 1998 as a merger of two head and neck societies—the Society of Head and Neck Surgeons (SHNS) and the American Society for Head and Neck Surgery (ASHNS). The AHNS is now the largest organization in North America for the advancement of research and education in head and neck oncology.

Dr. Bradford specializes in head and neck cancers, and her translational research efforts are focused on identifying and evaluating biomarkers that can predict outcomes in head and neck cancer patients and on the design of novel therapies to overcome resistance to cancer treatment. She received the Physician of the Year Award from Castle Connolly in 2009, and has won several mentorship awards for her dedicated guidance and teaching of students and residents. In addition to pursuing several leadership training opportunities, she became a fellow of the prestigious Executive Leadership in Academic Medicine Program for Women at Drexel University.

Congratulations Carol on this wonderful honor!!

## Gregory Wolf Awarded the Distinguished Faculty Lectureship Award in Biomedical Research

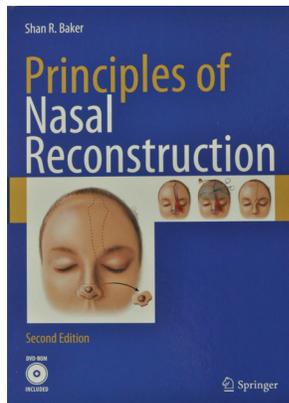


The Biomedical Research Council (BMRC) has the honor of selecting a faculty member for the Dean's Distinguished Faculty Lectureship Award in Biomedical Research each year. This award, which was initiated in 1979, continues to be the highest research honor bestowed by the Medical School upon a faculty member in the biomedical sciences. Each recipient has made outstanding contributions in the areas of research, teaching, and institutional service.

Dr. Gregory Wolf, a pioneer in head and neck cancer treatment, has been chosen to receive the 2011 Dean's Distinguished Faculty Lectureship Award. Dr. Wolf is professor and chair emeritus of the Department of Otolaryngology. In addition to being one of the top surgical oncologists in the world, Dr. Wolf is a leading scientific investigator who has played a pivotal role in advancing the field of biomedical research, cancer immunology, and laryngeal preservation cancer. Dr. Wolf's novel discoveries in cancer biology challenged the status quo, such as the widespread practice of routine larynx removal in patients with related, advanced cancer. His tested treatment paradigms—now adopted around the world—allow patients with advanced cancer to retain affected organs, maintain crucial functional capacities, avoid disfiguring surgical defects, and enjoy a higher quality of life than previously possible. Currently he is the PI of the U-M Head and Neck NIH SPORE (Specialized Program of Research Excellence) grant, which continues to advance the treatments used with head and neck cancer patients. During the 16 years when Dr. Wolf was chair of the Department of Otolaryngology–Head and Neck Surgery at U-M's Medical School, the department was consistently among the highest ranked units in the school. In addition to his groundbreaking work in organ-sparing therapy and his administrative contributions, Dr. Wolf has been a prolific writer (more than 200 articles) and mentor to many trainees.

Friends, family, and colleagues gathered on August 8th for Dr. Wolf's award presentation, lecture, and a formal reception. The title of his lecture was “Changing Treatment Paradigms in Head and Neck Oncology.” We are thrilled for Dr. Wolf and this wonderful and richly deserved honor awarded to him.

## Shan Baker, MD, Produces Seminal Textbook



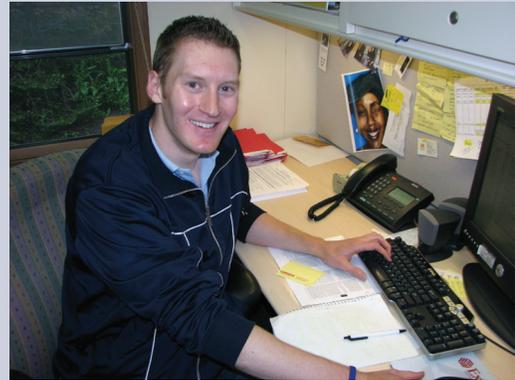
More than three years in the making, the second edition of Shan Baker's textbook *Principles of Nasal Reconstruction* is now available for your teaching, learning, and reading pleasure. Meticulously crafted, it is one of the most comprehensive and lavishly illustrated texts on nasal reconstruction according to reviewers, and includes an accompanying

DVD with 90 minutes of real-time video.

Highly regarded as a practitioner of facial plastic surgery and nasal reconstruction, Dr. Baker carefully and thoroughly discusses a broad range of both basic and advanced nasal reconstructive techniques in patients presenting with a wide variety of partial and full thickness defects. Fundamentals are discussed in exquisite detail, and Baker provides algorithms to assist surgeons in choosing their preferred method of restoration, depending on the size of the defect and the availability of resources that can be used for the repair. The "how-to" section of the book gives detailed, step-by-step instructions of various techniques and includes the author's suggestions for both the prevention and management of complications. In the final section, the author discusses representative cases demonstrating typical complications and limitations of nasal reconstructive procedures.

We are proud to have such a distinguished scholar as a part of our faculty, and thank Dr. Baker for his many and timeless contributions to the teaching of facial plastic and reconstructive surgery.

## Longtime Student Collaborator off to the University of Cincinnati for Residency



We are sending Eric John Paul Chanowski, MD, off to the University of Cincinnati for residency training in head and neck surgery. Dr. Chanowski has been a fixture in the Department of Otolaryngology–Head and Neck Surgery for the last 10 years. He arrived in our department as a freshman participating in UROP—the Undergraduate Research Opportunity Program. From the first day, he made significant contributions to the clinical research program for which he received recognition from the governor of Michigan. While an undergraduate student, he was required to take a year off for medical reasons, and while an inpatient, he continued his research from his hospital room!

Dr. Chanowski has just completed U-M's medical school on a full scholarship. While working toward his medical degree, he took a year off to complete a master's of public health. His thesis investigated the prevention and treatment of salivary fistula in patients undergoing salvage surgery after chemoradiation for laryngeal and hypopharyngeal cancer.

Dr. Chanowski says he feels it is time to get another perspective on head and neck surgery so he is going to "that other state." He is joining U-M alum and former head and neck fellow, Dr. Keith Casper, with whom he has worked in the past. We would like to thank Dr. Chanowski for his service to the department, and we wish him well for this exciting next step in his career.

## Welcome New House Officers

We are excited to welcome our newest house officers to our training program. They will complete their first year as interns in the Department of Surgery. We admire their many accomplishments and are anxious to have them join us on their path to what will surely be impressive careers in our field.



**Brittany Tillman, MD**, received her BA from Texas A&M University, graduating with honors in biomedical science. She completed her MD at the University of Texas in Houston, where she received honors on all of her clinical rotations. During medical school, she served on several academic committees—she was president of the AMA-MSS and Texas Medical

Association, as well as an AMA delegate. She won multiple academic awards for merit and leadership, including the AMA's prestigious Physicians of Tomorrow Scholarship. First author on several peer-reviewed articles, Dr. Tillman recently completed a book chapter that is now in press. A former tennis instructor, she still enjoys playing tennis in her spare time, as well as engaging in volunteer work.



**Tiffany Glazer, MD**, completed both her undergraduate (neuroscience) and medical degrees at the University of Wisconsin–Madison. As an undergraduate, she worked on a project focused on the mechanisms of pain after spinal cord injury. During medical school, she received several grants that enabled her to continue this research. In addition, she contributed to

several published manuscripts on this topic. Tiffany has also pursued humanitarian work in Pakistan, and most recently served as a tutor to first-year medical students for neurobiology of the head and neck. In her “spare” time, she enjoys running, backpacking, and photography. We are delighted to have Tiffany join our program!



**Robert Morrison, MD**, pursued his undergraduate studies in biology and philosophy at Gonzaga University in Spokane, graduating with high honors. He completed medical school at the Oregon Health & Science School of Medicine in Portland. While in medical school, Robert volunteered frequently at local clinics for underserved or uninsured patients, and participated in

several clinical research projects, including one focused on chronic coughing and another on Zenker's diverticulotomy. Both have been accepted for publication. Also a talented digital art and web designer, Robert works on the website Headmirror.com, a resource for otolaryngology residents and students. Welcome aboard, Robert!



**Aaron Thatcher, MD**, completed his undergraduate studies at Michigan State University, graduating with honors in physiology, and he obtained his medical degree from The Ohio State University College of Medicine. As a medical student, he received the prestigious Roessler Memorial Medical Scholarship for his work on developing a novel chemotherapeutic agent

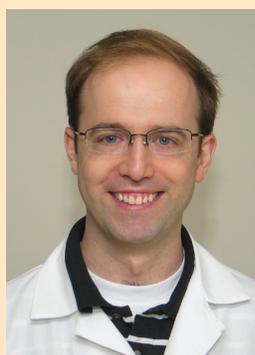
for glioma brain tumor treatment. In his third and fourth years, he completed two independent research projects—one focused on PRMT5 involvement in head and neck oncogenesis; and the other on the impact of admitting microvascular free flap patients to the intensive care unit or medical/surgical floor post-operatively. We look forward to having Aaron on our team!

## Meet Our New Fellows

We enthusiastically welcomed six new fellows to our program this year, each serving one to two years in one of our specialty areas.



**Ilaaf Darrat, MD**, joins us for one year of advanced studies in pediatric otolaryngology under the direction of Marci Lesperance, MD. She completed her medical degree at Wayne State University and her residency at Henry Ford Health System, both located in Detroit. We look forward to having Dr. Darrat join our great team in peds oto!



**Garrett Griffin, MD**, will take on an additional year of research as a fellow in our T-32 postdoctoral Advanced Research Training Program (ARTOP). Dr. Griffin received his medical degree from the University of Virginia School of Medicine, and completed his residency right here at U-M. We are pleased that he will remain with us for another year.



**Judy Lee, MD**, will begin a one-year fellowship in facial plastic and reconstructive surgery under the direction of Shan R. Baker, MD, at the Center for Facial Cosmetic Surgery. Judy obtained her medical degree from the Feinberg School of Medicine at Northwestern University, and completed her residency training at the New York University School of Medicine. Welcome, Judy!



**Gordon Sun, MD**, will complete a two-year fellowship as a Robert Wood Johnson clinical scholar. He will conduct primary research at the Ann Arbor Department of Veterans' Affairs Medical Center (VAMC) and pursue coursework through the RWJ Master's in Health and Health Care Research Program. Gordon obtained his medical degree from the University of Pittsburgh, and completed his residency training at the University of Cincinnati, Ohio. Welcome aboard, Gordon!



**Joseph Ta, MD**, will pursue a one-year fellowship in facial plastic and reconstructive and skull base surgery under the direction of Lawrence Marentette, MD. After completing his medical degree at Georgetown University School of Medicine in Washington, Joseph performed residency training in California at both Charles R. Drew University and Loma Linda University. We are pleased to welcome Joseph to our program.



**Vivian Wu, MD**, has joined us for a year of advanced fellowship training in head and neck surgery under the direction of Douglas B. Chepeha, MD. Dr. Wu completed a master's in public health at Yale University before obtaining her medical degree from Howard University in Washington, D.C. She completed her residency training at Oregon Health Sciences University. We are pleased to have Dr. Wu join our department for her advanced studies.

## Oto Outreach Efforts

The Department of Otolaryngology faculty and staff continue to “pay it forward.” This year, they participated in a variety of outreach endeavors to provide expert gratuitous medical care to those who might otherwise not receive such care.



### FREE THROAT CANCER SCREENINGS

In May, our clinic hosted the 16th annual free throat cancer screening clinic, in collaboration with U-M's Comprehensive Cancer Center, to identify individuals with previously undetected cancers. This year, a record 80 patients showed up; 5 were biopsied for suspicious lesions. In addition to a complete examination and follow-up biopsies and treatment, counseling and educational materials about tobacco and alcohol use were provided. Directed by Professor Norman Hogikyan, MD, the event was part of Oral, Head and Neck Cancer Awareness Week and World Voice Day. Our clinic was one of the officially listed screening sites on the *Oprah Show* website.

### VIETNAM DEAF EDUCATION PROGRAM

In July, audiologist and speech pathologist Ellen Thomas (MA, CCC-SLP, LSLC Cert. AVT) traveled to Vietnam as part of the Vietnam Deaf Education Program, “an initiative to provide children in Vietnam who are deaf or hard of hearing with access to the educational resources, hearing technology, and support services they need to achieve their full potential.” Only recently did Vietnam begin offering education and resources to teachers, professionals, and families who have children who are deaf or hard of hearing. During the workshop, Ellen will participate in

teacher training and parent programs, family consults and counseling, and an audiology program. The Vietnam project is part of the Global Foundation for Children With Hearing Loss, an international mission serving the deaf and hearing impaired in developing countries. To watch a video about the Foundation and the Vietnam program, visit [www.childrenwithhearingloss.org/projects.shtml](http://www.childrenwithhearingloss.org/projects.shtml)

### SATURDAY MORNING CLINIC

HOPE Grows! For more than a decade, our department, in collaboration with Ypsilanti's HOPE Medical Clinic, has helped to provide uninsured and underinsured patients with free specialty care. Staff see patients with ENT problems at the Ypsilanti facility on a monthly basis (see photo below). As the number of patients steadily grew, we realized that our ability to provide thorough care was limited by a lack of on-site resources at HOPE. Hence chief resident Andy Shuman led an effort to launch a multispecialty surgical clinic at the Taubman Center on Saturday mornings. Faculty, residents, and ancillary providers from otolaryngology, audiology, speech pathology, and plastic surgery have donated their time on a volunteer basis. More than 75 patients have been seen in the clinic and more than 40 have undergone office-based procedures. An unparalleled success, the clinic has provided residents with additional educational opportunities, and enabled needy patients to receive point-of-service care from expert providers in an expedient fashion. For the future, we envision more patients, additional surgical specialties, and additional capabilities for outpatient procedures.



### HONDURAS MISSION TRIP

For the eighth consecutive year, several department members joined a team of physicians, residents, nurses, medical students, audiologists, and translators on a week-long head and neck surgery mission trip to La



Ceiba, Honduras. In five days, the team saw 500 clinic patients (see photo on p. 9), performed 61 surgeries, and provided 70 audiograms. Many patients were also fit for hearing aids (the department is working with the Starkey Foundation to provide more aids). Through the years, the Honduran people have come to trust and admire program participants and the patients and their families are exceedingly grateful for our efforts.

#### KENYA MISSION TRIP

In March, Professor Steven Telian, MD, completed “an amazing” two-week mission trip to rural Kenya, organized through his church. He served at two different hospitals—Tenwek Hospital in the highlands of the Bomet district, and Kijabe Hospital in the Rift Valley near Nairobi. In discussing the trip, Dr. Telian notes that people do not seek medical care unless they are in very bad shape—or as one colleague put it, “We do not have to deal with the worried well.” Cases of advanced tuberculosis of the ears and skull base were not uncommon, and patients were frequently put into Hospice for terminal care. Despite the many hardships he saw, Dr. Telian speaks compassionately of the health care situation in Kenya, noting it takes great humility to provide care there. He reports that providers do their best with the limited resources available, and bring a real concern and compassion to the care they provide. Upon returning home, Dr. Telian said, “I have a new appreciation for systems that work, a dedicated support staff, and the value of what we do every day as doctors. Just like us, Kenyans are simply working to build similar systems to provide care to those with limited access. It was my pleasure to provide some encouragement and education to those who are undertaking this remarkable work.” Amen!

#### HEAD AND NECK CANCER SUPPORT GROUP

For more than 15 years, clinical speech pathologist Teresa Lyden has coordinated the Head and Neck Cancer Support Group, which helps our head and neck cancer patients and their families cope with the difficulties and uncertainties of having cancer. Inextricably bound by their common circumstances, patients gather together monthly for fellowship and to share with one another their stories, frustrations, suggestions, and victories. The group fluctuates in size, but has had as many as 40 participants at one meeting. Patients are welcome to interact with the group or just sit back and listen to speakers, other patients, or one of the doctors, nurses, or speech and occupational therapists in attendance. Ms. Lyden feels this group is so successful partly because patients and clinical staff participate together in an intimate manner.

Tony Sepanek, a graphics and advertising designer, recalls his invitation to the group’s holiday reception in 2003—just before his laryngectomy. He remembers that the group had an optimistic aura, which helped convince him that he could survive his disease. He returned to the group post-operatively, and has been an active participant ever since. Tony says he knows that the doctors and clinical staff “really care about how we turn out...how our lifestyles are affected, and how we cope.” Typical of his nature, Tony is using his own experience to help others. He has worked with his daughter’s class on a lesson plan about the evils of smoking, and he has frequently volunteered in the classroom, explaining his illness, demonstrating his prosthesis, and so forth. According to Tony, these “show and tells” are always a huge success and elicit “tons of questions.”

Research shows that support groups help patients cope with cancer and the stresses associated with it, and can even help prolong patients’ lives.



## Minimally Invasive Cranial Base Surgery—Another Win for a Champion

Kara Witgen started taking gymnastics at age 10, and has been a rising star ever since. Last October as a 15-year-old sophomore in high school, she fell off the uneven bars. Follow-up imaging revealed a large mass at the junction of her sinus and brain, which was unrelated to her fall.

Drs. Peter Passamani (pediatric otolaryngology), Erin McKean (otolaryngology and skull base surgery), and Steven Sullivan (neurosurgery and skull base surgery) discussed with Kara and her parents various treatment options, including observation or surgical removal. Although it appeared benign, the mass needed to be removed given its large size and expansion into the skull base. Kara and her family were counseled about the risks and benefits of, and the alternatives to, surgery, as well as the rationale for the proposed operative plan. The U-M team recommended using an endoscopic approach, since they wouldn't have to make a large incision with this minimally invasive technique. Also, it would give them a direct route to the mass, which was sandwiched behind her maxillary sinus, a cavity intimately associated with critical blood vessels and nerves located just under her brain.

In November of 2010, Drs. McKean and Sullivan, assisted by Drs. Mahdi Shkoukani and Andrew Shuman, successfully removed the tumor using a transnasal expanded endoscopic infratemporal approach to the middle cranial fossa. This included dissection of the foramen rotundum and foramen ovale, a painstaking process. After separating the tumor from the surrounding structures, the surgeons removed the mass in its entirety through Kara's nose. She sailed through the procedure, returning home just four days later. The pathologic evaluation confirmed that the tumor was a benign schwannoma.

Clearly, agreeing to the endoscopic surgery was a difficult and frightening experience for the entire Witgen family. However, the confidence and professional expertise displayed by the U-M team gave them the assurance they needed to proceed despite their concerns. Always a disciplined and spirited competitor, Kara faced her surgery with remarkable strength and resolve.

Kara has returned for follow-up several times and is doing extremely well—so well, in fact, that less than six months after surgery, she won the 2011 Michigan Junior Olympic Gymnastics Level 9 Floor and All-Around Championship, as well as the Region 5 Level 9 All-Around Championship, qualifying her for the Eastern Nationals in Boston. What a winner!! We are grateful for Kara's wonderful success story, and proud of the role our cranial base team played in Kara's story and in those of so many others.



## A Dedicated Teacher



A cherished alumnus, Frank N. Ritter, MD, died November 16, 2010, at Huron Woods Assisted Living, where he had resided for several years with progressive Alzheimer's disease. He was 82. Ritter received his medical degree from St. Louis University's School of Medicine, and an MS from U-M, but as a true "Domer," he was most proud of his alma mater, Notre Dame. As he entered the hereafter, his large extended family and friends sang the *Notre Dame Fight Song* to him. His funeral mass was held at St. Thomas Church in Ann Arbor on November 22nd, and he received a military burial for having taught flight medicine at the School of Aviation Medicine at Randolph Air Force Base in San Antonio during his military service. Frank is survived by his loving wife of 57 years, Gertrude (Trudy), and his eight children and their families, which includes many grandchildren and great-grandchildren.

After his internship at Mercy Hospital in Toledo, Ohio, Ritter came to Ann Arbor for his residency training, where his endless jokes and stories made him a popular house officer. On the spur of the moment, he could come up with a joke or story on just about any subject, and whenever his friends and colleagues were about to give a presentation, they came to him for an appropriate joke. After completing his residency, Ritter joined the U-M faculty, where he stayed until the 1970s, when he joined a private group practice at St. Joseph Mercy Hospital. He was active in many specialty field academies and organizations, and held leadership positions in many of them. He continued to teach in U-M's residency training program and remained on the U-M faculty as an adjunct clinical professor for many years. A beloved teacher, he received the Silver Shovel Award and the Senior Award, both given by students. Today, the Frank Ritter Teaching Award is given annually to an otolaryngology faculty member in Ritter's honor.

## Honoring the Memory of a Talented and Compassionate Surgeon



On Friday, April 1st, nearly 100 people gathered together at the 17th annual John L. Kemink Memorial Lecture to honor the memory of John Kemink, MD. Dr. Kemink was a talented surgeon, compassionate physician, dedicated teacher, and devoted family man who was slain by a disturbed patient in 1992. He completed medical school, his residency, and a neurotology fellowship here at U-M, joining our faculty in 1982. Recognized nationally as a top pediatric specialist, Dr. Kemink received many honors during his brief but stellar career. The Cochlear Implant Program, which he directed, was selected as Program of the Year here at the Medical Center in 1987. The Kemink Memorial Lectureship was developed as a way to honor and remember Dr. Kemink's magnetic personality and his large and lasting impact here. Although we continue to miss him, we remain inspired by his boundless energy for scientific inquiry, his compassion for his patients, and his genuine zest for life in general.

Our distinguished guest lecturer this year was Carl Snyderman, MD, professor of otolaryngology and neurological surgery and co-director of the Center for Skull Base Surgery at the University of Pittsburgh. Dr. Snyderman's presentation was titled "Controversies in Cranial Base Surgery," and was attended by otolaryngology faculty and alumni, as well as many clinicians from other specialties. The lecture was held in the Biomedical Science Research Building, and was followed by a gala dinner in the building's lovely atrium.

## Letter from the Director



Let me add just a brief note to this newsletter. After all the activities associated with the preparation for and the celebration of the Kresge Hearing Research Institute's (KHRI) 50th anniversary, the last few months seemed quiet. But behind even a quiet façade, "the usual" activities of research, teaching, and grant writing are always taking place. Although money is becoming tighter, we are glad to report that we were able to maintain our position as one of the leading departments in NIH-funded research in 2010.

However, with increasing constraints in both federal and state resources, philanthropic help from alumni and foundations is becoming more and more important in supporting special efforts. We have two outstanding endeavors on our agenda: the completion of the Charles Krause and the Merle Lawrence professorships. More information on these professorships and how you can help support them will be forthcoming.

In this context, the note from Dean Woolliscroft on the occasion of our 50th anniversary (right) is a timely reminder of the foundation of excellence that Merle Lawrence laid for KHRI.

More next time.

Jochen Schacht, PhD  
Professor and Director, KHRI

## Note from James Woolliscroft, Dean of the University of Michigan Medical School:



The Medical School's Kresge Hearing Research Institute in the Department of Otolaryngology is a shining example of the University of Michigan's history of excellence. What began at U-M five decades ago with two

giants in the field of hearing—Merle Lawrence and Joseph Hawkins, Jr.—continues to this day with impressive progress in the basic and clinical aspects of hearing and balance. In the last decade, KHRI researchers demonstrated that inner-ear hair cells can be regenerated in animals and conducted the first successful clinical trial demonstrating that it is possible to prevent acquired hearing loss. Today, KHRI is one of the leading hearing research institutes in the world with a breadth of disciplines and research areas that is unmatched.

I salute KHRI faculty and staff on your 50th anniversary and thank you for your continuing contributions to the Medical School. I am confident your efforts over the next 50 years will further demonstrate the exceptional quality of your work and the importance of your accomplishments to researchers, educators, clinicians, and patients interested in hearing health.

James O. Woolliscroft, MD  
Dean, Medical School  
Lyle C. Roll Professor of Medicine

# The Great Tonsil Dilemma

*Is routine analysis of pediatric tonsillectomy specimens worth the money?  
New U-M study suggests perhaps no.*

Without fanfare, hundreds of thousands of children surrender their tonsils to a surgeon's scalpel each year, usually to alleviate recurring infections and obstructive sleep problems. Most of the time, the snipped tonsils are sent to a pathologist, who looks for evidence of more serious medical problems, such as unsuspected cancer. But as a new U-M Health System analysis suggests, this common practice may not be cost-effective because those additional examinations rarely lead to the discovery of hidden disease. The nearly \$35 million spent nationwide on such examinations each year might have more impact if spent elsewhere in the health care system, says the study's senior author, Marc C. Thorne, MD, MPH, and an assistant professor of otolaryngology at the U-M Medical School. "The question is: How do we make rational use of our health care dollars?" asks Thorne. "It's a matter of both economics and of societal values." The findings, published in *Otolaryngology–Head and Neck Surgery* (PMID 21493371), are but a single example from the larger, ongoing debate about how to best conserve resources, create efficiencies, and lower the cost of health care.

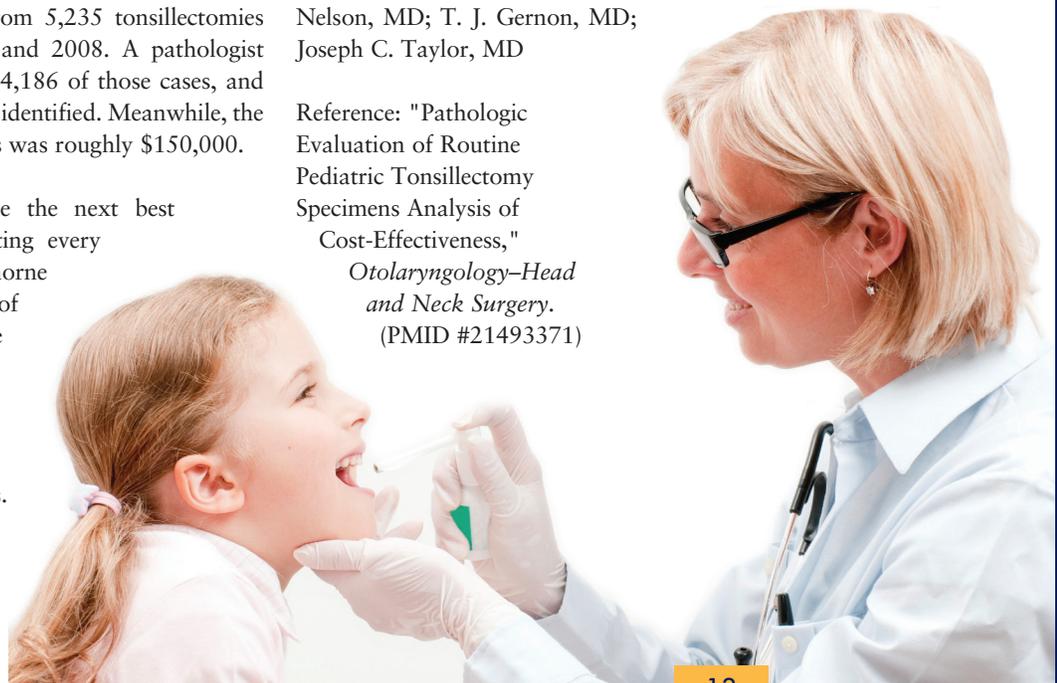
Pathologists examine tonsillectomy specimens in two ways—either grossly or by microscopy. Microscopic examination is nearly three times more expensive than visual inspection. Forty-two percent of specimens receive gross analysis, 38 percent are examined under the microscope, and 20 percent are discarded without examination, according to a 2001 survey of American Academy of Otolaryngology members. To determine the effectiveness of each practice, Thorne and his colleagues poured over data from 5,235 tonsillectomies conducted at U-M between 1996 and 2008. A pathologist performed a visual examination in 4,186 of those cases, and zero cases of additional disease were identified. Meanwhile, the collective cost of these examinations was roughly \$150,000.

"Looking grossly might seem like the next best alternative to the expense of putting every specimen under the microscope," Thorne says. "But it may be the worst of both worlds—the data show you're unlikely to find anything, but you're still incurring significant expense." While microscopic examination is better at identifying disease, it also turned up few unsuspected problems. The incidence was so low that the researchers estimated more than \$750,000 would need to

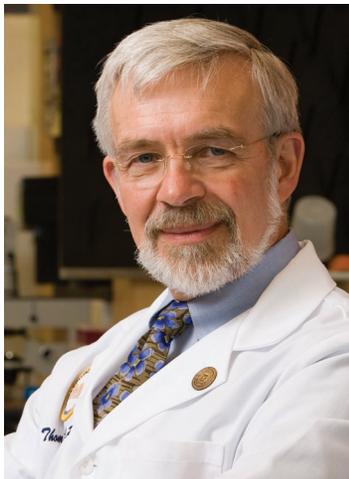
be spent for every case of lymphoma found. Out of 1,066 microscopic examinations, 18 cases of disease were found, all of which were suspected before surgery—either because a patient was known to be at higher risk because they had previously received an organ transplant or a surgeon had noticed something suspicious and requested additional scrutiny. No one is suggesting that discovering hidden cancers and other diseases isn't important, Thorne says, but the question is what might we be giving up elsewhere in order to find those rare cases? Part of the problem is a disconnect between the service and the payment. For a parent with insurance, there might be no additional out-of-pocket cost to having their child's tonsil's examined under a microscope. But as a society we have to balance those individual desires with the burden on the overall system. Thorne explains, "If we're going to make a rational decision—say, 'I don't care how much it costs, missing a lymphoma in a child is unacceptable'—then we should be doing microscopy all the time. If we're just doing gross analysis, we're still spending a lot of money, yet we know we're unlikely to find anything that way." Still, routine analysis has some non-clinical benefits, such as its use in training pathologists, the authors note. Jonathan McHugh, MD, an assistant professor of pathology at U-M Medical School and one of the study's authors, says some pathologists may be resistant to change because they think of themselves as the last line of defense. "In this instance, I think the data shows we haven't been that valuable in that role," McHugh says.

Additional U-M Authors: Marc E. Nelson, MD; T. J. Gernon, MD; Joseph C. Taylor, MD

Reference: "Pathologic Evaluation of Routine Pediatric Tonsillectomy Specimens Analysis of Cost-Effectiveness," *Otolaryngology–Head and Neck Surgery*. (PMID #21493371)



## Indian Spice Used in Cancer Treatment



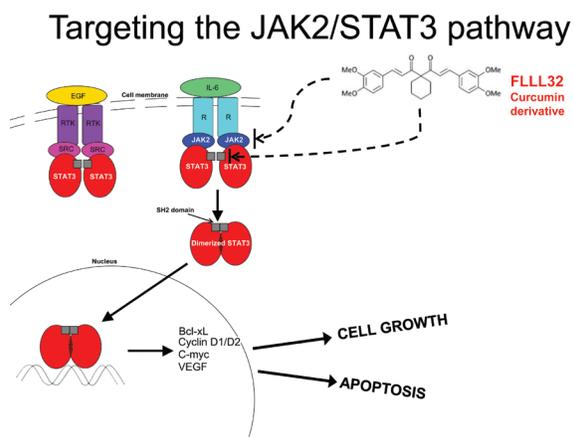
Otolaryngology researchers in the laboratory of Thomas Carey, PhD, have discovered that the Indian plant-derived spice curcumin can be used to improve the effectiveness of head and neck cancer treatment. Waleed Abuzeid, MD (HO III) is first author on the paper.

Head and neck cancers often show significant resistance to cisplatin, a commonly used chemotherapy drug, and patients frequently see their cancer return or spread. Additionally, complications from toxicity often result in long-term treatment-related morbidity. To look at the efficacy of cisplatin use, Carey and his research team studied two head and neck squamous cell carcinoma (HNSCC) cell lines obtained during surgical resection—one line was sensitive to cisplatin, while the other was resistant. Cells were divided into four groups for each cell line to compare varying doses of cisplatin alone with varying doses of cisplatin plus FLLL32—a curcumin-based compound and known molecular inhibitor. Cells were characterized for cytotoxicity and apoptosis (programmed cell death). Comparisons for cytotoxic effects between the groups were statistically significant in that combination therapy with FLLL2 and cisplatin induced a suppressive effect at a cisplatin dose much lower than the dose required when cisplatin was used alone. This finding indicates that FLLL32 sensitizes both cisplatin-sensitive and cisplatin-resistant cells, allowing the use of nearly a fourfold lower dose of cisplatin while achieving comparable inhibition of tumor cell survival. Further, FLLL32 combination treatment with cisplatin resulted in significant improvement over the extent of apoptosis induced by cisplatin-alone therapy, indicating that FLLL32 can increase apoptosis in both cisplatin-resistant and cisplatin-sensitive cell lines.

“This work opens up the possibility of using lower, less toxic doses of cisplatin to achieve an equivalent or enhanced tumor kill. Typically, when cells become resistant to cisplatin, we have to give increasingly higher doses. But this drug is so toxic that patients who survive treatment often experience long-term side effects from the treatment,” says Carey.

Translating these findings into clinical reality will require further investigation, but these preliminary results are encouraging for offering an effective and alternative treatment to cisplatin monotherapy.

This study appears in *Arch Otolaryngol Head Neck Surg*, 2011 May; 137(5): 499–507. (PMID #21576562)



# Preoperative Soy Isoflavone Supplementation and Molecular Markers in the Prevention of Head and Neck Squamous Cell Carcinoma



In an NIH-funded study, researchers in the Multidisciplinary Head and Neck Cancer Clinic are trying to determine whether the administration of a soy isoflavone supplement can provide a basis for cancer prevention and control that will decrease tumor recurrence and increase overall survival and quality of life in patients with head and neck squamous cell carcinoma. In addition, the research team hopes to identify candidate genes and intermediate endpoints for future primary prevention trials. The inclusion of Karmanos Cancer Institute and Emory University in the study will provide additional new patient accrual and improved access to minority patients.

Nutritional factors have been thought to be important in the pathogenesis of head and neck cancer for many years, but prior widespread trials for prevention using vitamin A and vitamin E supplements failed. The recent discovery that behavioral habits such as smoking were associated with “silencing” of tumor suppressor genes such as p16 has opened new avenues of investigation for head and neck cancer prevention. The U-M Head and Neck SPORE program recently found that pretreatment soy intake in a patient’s diet was one of the main nutritional factors significantly associated with favorable survival in previously untreated patients. These findings combined with encour-

aging laboratory data showing reversal of the tumor suppressor gene methylation by soy products led to the hypothesis that high-dose soy isoflavones could alter these epigenetic changes in a patient’s cancer and provide rationale for more extensive chemoprevention trials.

Principal Investigator Gregory T. Wolf, MD, is conducting the Phase II clinical trial protocol to provide a comprehensive assessment of preoperative adjuvant soy isoflavone and molecular markers in a prospective setting in cancer patients scheduled for surgical treatment. The hypothesis is that short-term (two-week) preoperative soy isoflavone administration will modulate p16 gene methylation and tissue expression of molecular markers p53, COX-2, VEGF, EFGR, and Bcl-xL in resected specimens

and adjacent mucosa to potentially identify markers useful as intermediate endpoints and define how quickly changes in gene markers might be seen.

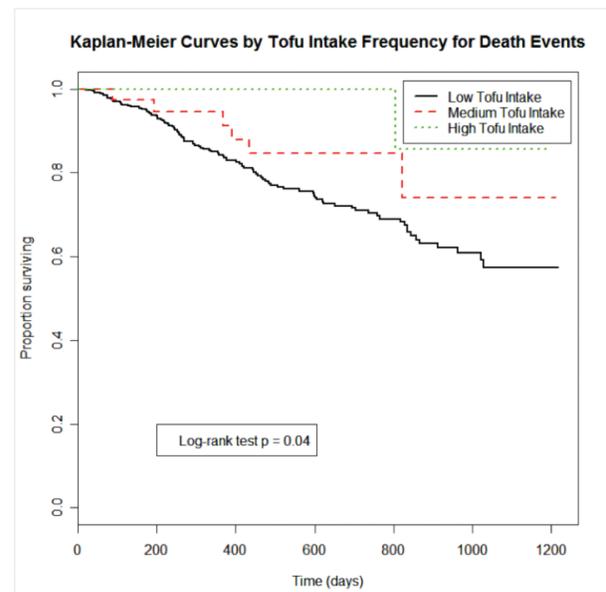


Figure: Kaplan Meier Plot Stratified by the Tofu Intake Frequency and Death (N=432)

## Improving the End-of-Life Experience of Head and Neck Cancer Patients

A study conducted in our department has attempted to describe and improve upon the end-of-life experiences of head and neck cancer patients. Andrew Shuman, MD, and Mark Prince, MD, conducted the study using a validated survey instrument, the Family Assessment of Treatment at the End of Life (FATE). Despite the difficulties and obvious sensitivity involved in obtaining information from families after the death of loved ones, a total of 58 individuals consented to participate. Below are some of their comments.

### Selected Comments of Survey Responders

*“I wish we would have known sooner that the chemo was not going to work, so we would not have had to put him through it.”*

*“Nothing can prepare you for a carotid blowout. I wish I had more warning that the cancer was back.”*

*“The hospital staff was not as attentive with regard to pain control as hospice was.”*

*“Communication between the specialists and our primary doctor was awful.”*

*“I was very happy that I was allowed to stay with him up until the end.”*

*“We greatly appreciated the honesty and compassion of the doctors when they gave us bad news.”*

*“Assisting with logistics and other customer services goes a long way for people who are lost and confused for many different reasons.”*

The FATE survey was shown to be an effective measure of head and neck cancer patients' end-of-life experiences. Palliative treatments, death outside the hospital at home or in hospice, and palliative care team involvement were

all associated with significantly higher FATE scores. The data validates the importance and impact of palliative care teams, as well as the utilization of hospice services. The researchers concluded that palliative treatments of head and neck cancer, death outside of the hospital, and palliative care team involvement all improve the end-of-life experience in this population.

Dr. Shuman won the Kemink Resident Research Award and the Rontal Family Travel Grant in 2010 for this work. This research project was presented orally at the American Academy of Otolaryngology–Head and Neck Surgery (AAO-HNS) meeting in September, 2010, and was recently published (*Otolaryngol Head Neck Surg* 2011 144(5): 733–39, PMID 21493350).

### BE A PART OF OUR PROGRESS

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