Loyola’s New Oncology Unit
Improving **clinical outcomes**
while providing **comforts of home**

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Loyola Opens New Oncology Unit for Stem Cell Transplants

Loyola has opened a new 20-bed unit for patients with hematologic cancers that’s designed to improve clinical outcomes, while providing many of the comforts of home.

Following high-dose chemotherapy and/or radiation, patients are infused with stem cells derived from bone marrow or umbilical cord blood. Patients typically stay for three or four weeks.

“We expect the innovative design will help to improve and accelerate patients’ recoveries, while the home-like amenities will provide a comforting environment for patients and their families,” said Patrick Stiff, MD, division director of Hematology/Oncology and medical director of Loyola’s Cardinal Bernardin Cancer Center.

- The unit has two 10-bed wings, and the floor plan ensures that a nurse never has to walk more than 100 feet to reach a patient’s room. (At the front of each wing is a medication room, supply room and nutrition room.)

- **Lighting in patient rooms** will align with patients’ circadian rhythms. During the day, blue lighting, which makes patients more alert and energized, can complement standard lighting. The blue lighting is turned off at night and replaced by amber lighting, which is dimmer and creates a more restful environment. This novel lighting system was developed in conjunction with Loyola’s sleep program, and is the first system of its kind for this type of care.

- **The unit is designed to reduce the risk of infections** in patients who have weakened immune systems. Ventilation for the entire unit has HEPA filtration and positive air pressure, so patients can breathe filtered air outside as well as inside their rooms. Handwashing sinks are located outside patients’ rooms.

- **The bathrooms in patient rooms have bathtubs rather than showers,** since even the cleanest shower heads can harbor pathogens. Bathing in a bathtub also reduces the risk of exposing a central IV line to water. Bathrooms have sliding doors, allowing easy access for patients with IV poles. And a patient can walk a straight line from the bed to the bathroom, reducing the risk of falls.

- **All rooms are private,** equipped with flatscreen televisions and wired for cable and Wi-Fi. Daybeds enable loved ones to stay overnight in comfort.

- **The unit includes an area for art therapy,** a consultation room, a meditation room and a family lounge and kitchenette, where friends and family can cook meals, watch movies, celebrate family events or attend support group meetings.

**Patrick Stiff, MD, Named Chair of SWOG Research Committee**

Patrick Stiff, MD, director of Loyola’s Cardinal Bernardin Cancer Center, has been named chair of the SWOG Bone Marrow and Stem Cell Transplantation Committee. The committee includes 86 investigators from many of the nation’s top cancer centers. SWOG, formerly known as the Southwest Oncology Group, is a network of more than 4,000 cancer researchers and is primarily supported by the National Cancer Institute.

Dr. Stiff has served as vice chair of the Bone Marrow and Stem Cell Transplantation Committee since 2000. “He is eminently qualified to now become its overall leader,” said Charles D. Blanke, MD, SWOG chairman.
HEPA filtration and positive air pressure reduce risk of infections

Lighting will align with patients’ circadian rhythms

Straight line from bed to bathroom, reducing risk of falls

Shelving for personal photos and mementos

Seating unfolds to a daybed to enable loved ones to stay overnight in comfort

• A patient exercise room includes three recumbent bikes and a treadmill. Studies have shown that exercise improves survival by, for example, reducing the risk of pneumonia.

The hospital has begun construction on an additional 20 beds for other oncology patients. The cost for the entire project is $18 million. Funding was provided by the Donald P. and Byrd M. Kelly Family Foundation, The Coleman Foundation and other generous donors.

Loyola has treated more blood cancer patients with stem cell transplants than any other center in Illinois, and has one of the largest unrelated donor transplant programs in the world. Loyola physicians have performed more than 2,700 stem cell transplants, including about 150 cord blood transplants. Loyola has a particular expertise in treating patients who cannot find matching donors from either their families or the National Marrow Donor Program. Loyola receives referrals from throughout the Midwest, including other academic medical centers in Chicago. Loyola is among the first centers to use umbilical cord donations for the treatment of certain adult cancers.

All rooms are private, equipped with flatscreen televisions and wired for cable and Wi-Fi

Medication room, supply room and nutrition room at the front of each wing ensure nurses never walk more than 100 feet to reach a patient's room
Custom-Made Stent Graft Allows More Endovascular Repairs of AAAs

Loyola is the first Chicago-area hospital to use a new stent graft that will allow physicians to repair more abdominal aortic aneurysms (AAAs) with a minimally invasive endovascular technique.

The device (Zenith® Fenestrated Endograft) was recently approved by the FDA. It was deployed by Jae Sung Cho, MD, director of Vascular Surgery & Endovascular Therapy.

The custom-made stent graft is indicated for juxtarenal AAAs. Fenestrations are cut into the device at the precise locations where the arteries branch off. (Before surgery, Dr. Cho orders a CT scan to determine exactly where the manufacturer should cut the holes.) Through these holes, additional devices are placed into the kidneys and intestine vessels to repair the aneurysm and maintain blood flow.

About 60 percent of AAAs have been treated with the conventional endovascular technique. “This new technology will significantly increase this percentage, allowing more patients to benefit from endovascular repair, which is much less invasive than open surgery,” Dr. Cho said.

Dr. Cho is a nationally known specialist in the treatment of vascular disease. He is an innovator in minimally invasive approaches to vascular disease, especially of the abdominal and thoracic aorta.

Loyola Launches LDL Apheresis Program

Loyola has launched a multidisciplinary LDL Apheresis Program for patients with familial hypercholesterolemia who have been unable to control cholesterol with lifestyle changes and medications.

About one in 500 people have genetic abnormalities that cause LDL cholesterol levels to be three to five times as high as normal levels. The program is indicated for patients with coronary heart disease who have LDL levels greater than 300 mg/dL, and patients without coronary artery disease who have LDL levels greater than 200 mg/dL.

Loyola is among a handful of centers in the Midwest — and the only academic medical center in Chicago — to offer LDL apheresis. Once every two weeks, a patient spends two to four hours connected to an apheresis unit that removes 70–80 percent of the patient’s LDL cholesterol. HDL cholesterol is not removed.

LDL apheresis is done under the guidance of medical specialists from Loyola’s transfusion service, and patients have periodic clinical follow-ups with a lipidologist.

The program is directed by Binh An P. Phan, MD, and Phillip J. DeChristopher, MD, PhD. Dr. Phan is director of Loyola’s Preventive Cardiology Program and Dr. DeChristopher is medical director of Transfusion Medicine and the Apheresis Center.

For more information, call (708) 327-2784.
Results in 10 Minutes

Loyola Adapts Point-of-Care Testing in ED

Loyola recently became the first academic medical center in Chicago to offer point-of-care testing to emergency department patients.

The ED is using the i-STAT System, an advanced blood analyzer that provides real-time, lab-quality results within minutes to accelerate the patient care decision-making process. The devices can test for cardiac troponin, lactate, BNP and basic metabolic panels. Results for lab tests that normally take 35 to 40 minutes can be available in 10 minutes. ‘Point of care is among the new technologies we are using to improve flow in the Emergency Department,’ said Mark Cichon, DO, chair, Department of Emergency Medicine. ‘Timely management of ED patients influences safety and quality of care, combats overcrowding and improves patient satisfaction by reducing wait times.’

A retrospective chart review of 4,248 patient encounters found that using point-of-care testing, combined with the physician-in-triage process, reduced door-to-troponin results by 25.5 minutes and shortened length-of-stay in the ED for admitted patients by 71.5 minutes.

New Appointments

David Hecht, MD, Named Senior VP for Clinical Affairs/CMO

In his new position, Dr. Hecht serves as Loyola’s senior physician. His responsibilities include working with senior management on finance, quality of care and patient safety; overseeing service line development; facilitating strategic partnerships; leading the ongoing development of integrated academic faculty management; and the recruitment and credentialing of clinical faculty. Dr. Hecht will work collaboratively with the dean of the Stritch School of Medicine on issues related to the academic agenda including graduate medical education, clinical research initiatives and Loyola’s relationship with the Edward Hines, Jr. VA Hospital.

Dr. Hecht’s clinical interests include HIV/AIDS and general infectious diseases. His current research grants include studies of antibiotic resistant genes and their dissemination in colonic bacteria. Dr. Hecht earned his master’s degree in microbiology in 1979 at the University of Missouri, Columbia, and medical degree in 1982 at Stritch School of Medicine. In 1985, he completed his residency in internal medicine at the University of Minnesota in Minneapolis, followed by his fellowship in infectious disease and geographic medicine and molecular microbiology at Tufts University, Boston. He joined the faculty at Stritch School of Medicine and Hines VA in 1988. In 2009, he earned a master’s in business administration in health care at Loyola University Chicago School of Business.

David W. Hecht, MD, MS, MBA, has been named Loyola’s senior vice president for Clinical Affairs and chief medical officer. Dr. Hecht had been serving as interim senior vice president for Clinical Affairs since January 2012.

Dr. Hecht, who joined Loyola in 1988, is an infectious disease specialist and internationally known researcher.
Enhanced Surgical Technique for Bell’s Palsy

John Leonetti, MD, is using electrical stimulation as part of an advanced surgical technique to treat Bell’s palsy.

During surgery, Dr. Leonetti stimulates the patient’s damaged facial nerve with an electric current, helping to jump-start the nerve in an effort to restore improved facial movement more quickly.

Dr. Leonetti said some patients who have received electrical stimulation have seen the return of muscle movement after one or two months — rather than the four to six months it typically takes for movement to return following surgery.

Most cases can be successfully treated with oral steroids, and 85 percent of patients experience good recovery within one month. But if symptoms persist for longer than one month, the patient may need surgery, Dr. Leonetti said. If surgery is delayed for longer than three months, the nerve damage from Bell’s palsy can be permanent. Thus, the optimal window for surgery is between one and three months after onset of symptoms.

The surgery is a microscopic decompression of the facial nerve. Dr. Leonetti removes the bony covering of the facial nerve, then slits open the outer covering of the nerve. This gives the nerve room to swell. In addition to this standard procedure, Dr. Leonetti uses an electric stimulator to send a current through the nerve.

Decompression of the facial nerve is an established technique for treating Bell’s palsy, and electric stimulation is an established technique used in other surgeries involving the nerve. “We are combining two standard treatments to create an exceptional treatment,” Dr. Leonetti said.

Dr. Leonetti is a professor and vice chairman in the department of Otolaryngology, and co-director of the Loyola Center for Cranial Base Surgery. In addition to facial nerve disorders, his special interests include parotid gland tumors, ear disorders and skull base tumors.
3-D System Could Help Prevent Sports Injuries

A new 3-D motion detection system could help identify baseball pitchers who are at risk for shoulder injuries.

The system can be used on the field and requires only a laptop computer. Other systems that evaluate pitchers’ throwing motions require cameras and other equipment and generally are confined to indoor use.

Sports medicine orthopaedic surgeon Pietro Tonino, MD, is co-author of a study about the system, published in *Musculoskeletal Surgery*.

In a well-rested pitcher, the humerus and scapula move in concert — when one bone moves, the other moves with it. But after a pitcher has been pitching for a while, the muscles begin to tire, and the scapulo-humeral rhythm begins to deteriorate. This can lead to shoulder injuries.

With the naked eye, it is difficult for a coach to detect subtle changes in a pitcher’s scapulo-humeral rhythm. But such changes can be easily detected with a portable tracking system called the Xbus Kit®. Sensing units are positioned on the pitcher’s scapula, humerus, forearm and sternum, and information is gathered from 3-D gyroscopes, magnetometers and accelerometers.

The study demonstrated the feasibility of using the tracking system to identify college-age pitchers who are at risk for shoulder injuries. To prevent such injuries, Dr. Tonino said at-risk pitchers could undergo strengthening exercises and physical therapy.

Helping Disabled Youths
Orthopaedic Surgeons Raise $3,500 for Sled Hockey Team

Loyola orthopaedic surgeons recently helped raise $3,500 for the Chicago Hornets, a sled hockey team consisting of young players who have physical disabilities.

Three faculty and 20 residents played the Hornets in a fundraising exhibition game. The Hornets defeated the Loyola Ortho 10–2. “They probably could have beat us 100–2,” said Pietro Tonino, MD. “They are very good.”

Participation in the Chicago Hornets is free to players and supported by donations. Players sit on sleds that sit on top of two hockey skate blades. Players propel themselves with the butt ends of their hockey sticks, and play the puck with the curved ends.

New Appointments

New President Named For Gottlieb Memorial Hospital

Lori Price, FACHE, MSA, RN, a veteran health-care executive with more than 25 years of experience as a nurse and administrator, has been named president of Gottlieb Memorial Hospital, part of Loyola University Health System.

Price previously was president of St. Joseph Regional Medical Center (SJRMC), Plymouth, Ind., and administrator of the St. Joseph Physician Network.

Prior to becoming president of St. Joseph, she served as the system chief operating officer. She successfully consolidated two of the system’s three hospitals, along with home care and rehabilitation. She also helped design and plan the hospital’s $355 million replacement facility.
ED Opens Pediatric Fast Track

Loyola’s Emergency Department has opened a pediatric fast track to provide better patient flow and satisfaction.

Housed in a clinical area adjacent to the ED, the fast track will be staffed with board-certified pediatricians. Patients will be triaged through the ED, and those with less serious illnesses will be sent to the fast track.

As soon as patients are triaged, they will be sent to a different waiting area that is similar to a pediatrician’s office setting, providing a more comfortable, child-friendly environment.

“This will enable us to process pediatric patients through the ED more quickly, and allow our ED physicians more time to focus on those who have more serious illnesses and injuries,” said Jerold Stirling, MD, chair of the Department of Pediatrics.

Loyola Begins Pediatric Weight-Management Program

Loyola has created a Pediatric Weight Management Program to help families and communities fight the obesity epidemic.

“There are very few intense, medically based treatment programs that address this need for childhood,” said program director Garry Sigman, MD.

The program offers families access to specialists in adolescent and children’s medicine; registered pediatric nurses; child and adolescent behavioral counselors; registered dieticians who specialize in pediatric weight loss; and exercise and training experts. Loyola specialists work with the child’s primary care physician.

The comprehensive program includes: assessment of a family’s readiness; physical assessment of the patient; treatment plan; clinic visits over a 14-week period with individual and family counseling; individualized nutrition counseling; physical activity counseling; and a meal-replacement plan, if needed.

It’s designed for children ages 6 to 18 who have a BMI greater than 99 percent, Type 2 diabetes, obesity-related hypertension or obesity-related liver disease. The program also will accept children who do not meet the exact criteria, with a recommendation from the primary care physician.

The Pediatric Weight Management Clinic is located in the Loyola Center for Metabolic Surgery & Bariatric Care, 701 W. North Ave., Melrose Park. For more information or to make an appointment, call (708) 681-7733.
Loyola in the News

Loyola Joins Aetna Network

Loyola has joined Aetna’s network, enabling Aetna’s members to receive services, at in-network rates, from Loyola’s facilities and physicians. Approximately 500 primary care and specialist physicians will be added to the Aetna network.

“Joining with Aetna will help us to extend care to the communities we serve through our two hospitals and our suburban network of 28 primary and specialty care facilities in Cook, DuPage, and Will counties,” said Jay Sial, Loyola’s senior vice president and chief financial officer.

Loyola, Gottlieb Receive “A” Safety Scores from The Leapfrog Group

Loyola University Medical Center has received an “A” Hospital Safety score from The Leapfrog Group, an independent national nonprofit run by employers and other large purchasers of health benefits.

Gottlieb Memorial Hospital, a member of Loyola University Health System, also received an “A.”

The Hospital Safety Score uses 26 measures of publicly available hospital safety data to produce a single score representing a hospital’s overall capacity to keep patients safe from infections, injuries, and medical and medication errors. It is the first and only hospital safety rating to be peer-reviewed in the Journal of Patient Safety (April 2013).

Loyola Redesignated Level 4 Epilepsy Center

Loyola University Medical Center has been redesignated as a Level 4 Epilepsy Center by the National Association of Epilepsy Centers (NAEC).

Level 4 is the highest level of specialized epilepsy care available. Level 4 centers have the professional expertise and facilities to provide the highest standard of medical and surgical evaluation and treatment for patients with complex epilepsy.

Loyola’s Epilepsy Center offers a comprehensive multidisciplinary approach to epilepsy and seizure disorders for adults and children as young as age 2. Pediatric and adult epileptologist consultation and state-of-the-art neuroimaging and electrodiagnostic technology are used to identify and assess complex seizure disorders by short- and long-term monitoring.

For more information, call (708) 216-8066.
A Big Time Saver for Referring Physicians

Physicians who refer patients to Loyola University Health System now can directly access their patients’ electronic health records at Loyola.

The system, LoyolaConnect, is the first of its kind in the western suburbs. It improves communications between referring physicians and Loyola doctors, and reduces phone calls, faxes and paper transactions.

“It’s a big time saver for everyone involved,” said Patty Romano, referral coordinator for Winters Family Practice in Elgin. Using LoyolaConnect, Romano can easily transfer notes from the physician’s visit, as well as the operative report, discharge report and other records into the patient’s chart. “It’s a very neat system.”

LoyolaConnect also makes it easier for physicians to follow patients referred to Loyola. For example, when a patient completes an appointment or is hospitalized at Loyola, the referring physician will receive an e-mail alert. The physician then can log on to a secure account and read physician notes, see lab and radiology results or view the entire chart.

To sign up for LoyolaConnect, visit LoyolaMedicine.org/connect or contact Physician Services Liaison Brett Hughes at (708) 466-0962 or BreHughes@lumc.edu.

New Expertise in GI Surgical Oncology

Sam G. Pappas, MD, FACS, and Gerard J. Abood, MD, MS, are bringing their expertise in GI surgical oncology to Loyola.

Their special interests include pancreas, liver, stomach, bile duct, esophagus, small bowel and colon cancers. They are experts in minimally invasive laparoscopic and robotic techniques, and are accomplished researchers.

Dr. Pappas is an associate professor in the Department of Surgery and section chief of Hepatopancreatobiliary Surgery. Before joining Loyola, Dr. Pappas was on the faculty of the Medical College of Wisconsin. He earned his medical degree from Rush Medical College and completed residencies in general surgery at Finch University of Health Sciences Chicago Medical School at Mt. Sinai Hospital and Northwestern Memorial Hospital. He also completed a basic science surgical oncology research fellowship at Northwestern. His clinical surgical oncology fellowship was at the University of Pittsburgh Medical Center.

Dr. Abood, an assistant professor in the Department of Surgery, earned his medical degree from The Ohio State University College of Medicine and Public Health. He completed his residency in general surgery and a research fellowship in tumor biology at Loyola. He completed his fellowship training in surgical oncology at the University of Pittsburgh Medical Center, with a special focus in minimally invasive approaches to complex GI malignancy.
New Physicians

Kate Goldhaber, PhD
Assistant Professor, Department of Psychiatry & Behavioral Neurosciences
SPECIAL INTERESTS: Depression, eating and personality disorders, anxiety, post traumatic disorder, family and couples therapy
FELLOWSHIP: Marital and Family Therapy, Family Institute at Northwestern University
DOCTORAL DEGREE: Clinical Psychology, University of Virginia, Charlottesville

Thaddeus Waters, MD
Assistant Professor, Department of Obstetrics & Gynecology, Division of Maternal/Fetal Medicine
SPECIAL INTERESTS: High-risk pregnancy, chronic villus sampling, premature births, gestational diabetes, risks of stillbirths in late preterm and early term periods of pregnancy
FELLOWSHIP: Maternal/Fetal Medicine, Metrohealth Medical Center
RESIDENCY: Obstetrics & Gynecology, Drexel University Graduate Hospital
MEDICAL SCHOOL: Drexel University College of Medicine

Michael Hakimi, PsyD
Assistant Professor, Department of Psychiatry & Behavioral Neurosciences
SPECIAL INTERESTS: Depression, anxiety, stress management, bipolar disorder, marital counseling, family therapy, ADD and ADHD, psychotherapy (child, adolescent and adult)
DOCTORAL DEGREE: Clinical Psychology, Illinois School of Professional Psychology

Sam G. Pappas, MD
Associate Professor, Department of Surgery, Division of Surgical Oncology
SPECIAL INTERESTS: Pancreas cancer, liver cancer, bile duct cancer, stomach cancer, esophageus cancer, small bowel cancer, gastrointestinal surgery, melanoma, GIST, spleen, bile duct disorders, stomach surgery
FELLOWSHIPS: Surgical Oncology, University of Pittsburgh Medical Center; Research Fellowship, Northwestern University Feinberg School of Medicine
RESIDENCIES: General Surgery, Chicago Medical School; General Surgery, Northwestern Memorial Hospital
MEDICAL SCHOOL: Rush Medical College of Rush University

Colleen M. Fitzgerald, MD, MS
Associate Professor, Department of Obstetrics & Gynecology, Division of Female Pelvic Medicine & Reconstructive Surgery
SPECIAL INTERESTS: Female pelvic pain, urgency-related pelvic girdle, low back pain, pelvic floor function
RESIDENCY: Physical Medicine & Rehabilitation, Northwestern University Medical Center
MEDICAL SCHOOL: Northwestern University Feinberg School of Medicine

Janelle Meyer, MD
Assistant Professor, Department of Medicine, Division of Hematology/Oncology
SPECIAL INTERESTS: Sarcoma, GIST, GI malignancies
FELLOWSHIP: Hematology/Oncology, Oregon Health Sciences University
RESIDENCY: General Internal Medicine, University of Arizona
MEDICAL SCHOOL: University of Utah School of Medicine

New Appointments

New Chair of Radiation Oncology Named

William Small Jr., MD, FACRO, FACR, FASTRO, has been named chair of Loyola’s Department of Radiation Oncology.

Dr. Small comes to Loyola from the Robert H. Lurie Comprehensive Cancer Center of Northwestern University, where he was vice chair of Radiation Oncology. He also went to medical school and did his residency at Northwestern.

Dr. Small has earned an international reputation in gynecological malignancies, and also specializes in GI and breast cancers. He is co-chair of the NCI-funded Radiation Therapy Oncology Group Gynecological working committee and serves on the NCI Gynecological Steering Committee. He recently was named chair-elect of the Gynecological Cancer Intergroup.

Dr. Small was awarded fellowships at the American College of Radiation Oncology, American College of Radiology and the American Society for Radiation Oncology. He is the former president of the Council of Regional Radiation Oncology Societies and the Chicago Radiological Society, and is the immediate past chair of the Gynecological Cancer Intergroup Cervix Committee.

Dr. Small replaces Bahman Emami, MD, FACR, FASTRO, who will continue as a tenured professor. Dr. Emami created a state-of-the-art department, managed a growing radiation oncology program at the Hines VA and collaborated with neurosurgery to introduce stereotactic radiosurgery at Loyola.
ABDOMINAL SACROCOLOPSEXY FOR PELVIC-ORGAN PROLAPSE

LOYOLA AUTHOR: Linda Brubaker, MD, MS
JOURNAL: Journal of the American Medical Association
FINDINGS: The initial success rates of abdominal sacrocolpopexy for management of pelvic-organ prolapse in women declines over the long term.

PARKINSON’S DISEASE PROTEIN

LOYOLA AUTHORS: Edward Campbell, PhD; Chris Wietthoff, PharmD, MS, PhD; David Freeman; Rudy Cedillos; Samantha Choyke; Zana Lukic; Kathleen McGuire; Shauna Marvin; Andrew M. Burrage; Ajay Rana
JOURNAL: PLOS ONE
FINDINGS: A protein known to be a key player in the development of Parkinson’s disease, alpha-synuclein, is able to enter and harm cells in the same way that viruses do.

SPORTS SPECIALIZATION AMONG YOUNG ATHLETES

LOYOLA AUTHORS: Neeru Jayanthi, MD, and Lara Dugas, PhD
MEETING: American Medical Society for Sports Medicine
FINDINGS: Young athletes who specialize in one sport and train intensively have a significantly higher risk of stress fractures and other severe overuse injuries, even when compared with other injured athletes.

FEW PATIENTS CONTRIBUTE TO PHYSICIAN RATINGS ON WEB SITES

LOYOLA AUTHORS: Ahmer Farooq, DO; Chandy Ellimoottil, MD; Marcus L. Quek, MD; Kristin Greco, MD; Alissa Hart
JOURNAL: Journal of Urology
FINDINGS: Millions of Americans read physician ratings on Web sites such as Healthgrades.com, but such ratings are based on scores from an average of only 2.4 patients.

BLOOD THINNERS SAFE FOR STROKE PATIENTS BEFORE MINOR SURGERY

LOYOLA AUTHORS: José Biller, MD, and Michael Schneck, MD
JOURNAL: Neurology
FINDINGS: A new guideline from the American Academy of Neurology advises that it is likely safe to continue taking blood thinners before minor procedures such as dental procedures, cataract surgery or dermatologic procedures.

CAREER BURNOUT AMONG “NEUROHOSPITALISTS”

LOYOLA AUTHOR: José Biller, MD
JOURNAL: Neurology® Clinical Practice
FINDINGS: Nearly 29 percent of surveyed neurologists who predominantly work with hospital inpatients said they had experienced burnout, and 45.8 percent said they were concerned about burnout but had not yet experienced it.

BOWEL DISORDERS DURING PREGNANCY

LOYOLA AUTHORS: Scott Graziano, MD, and Payton Johnson
MEETING: American Congress of Obstetricians and Gynecologists’ 61st Annual Clinical Meeting
FINDINGS: Nearly three out of four pregnant women experience constipation, diarrhea or other bowel disorders during their pregnancies.

BLOATING  
CONSTIPATION  
DIARRHEA  
IBS  

Prevalence (%)  

First Trimester  
Third Trimester  

FUNCTIONAL BOWEL DISORDER
Clinical Trials

Blood: Umbilical Cord Blood Transplantation

202837: A Phase I Trial to Determine Safety and Tolerability of Ex Vivo Expanded Human Myeloid Progenitor Cells (CLT-008) Infused 24 Hours Post-Transplant to Support Allogeneic Umbilical Cord Blood Transplantation for Hematologic Malignancies MT2008-38 (Including Amendment Six, June 1, 2010).
Principal Investigator: Patrick Stiff, MD
Enrollment Phone: (708) 216-2568

203687: RTOG 1071/NCCTGN0577: A Phase I/II Trial of Concurrent RAD001/Temolozolomide in newly diagnosed Glioblastoma.
Principal Investigator: Edward Santucci, MD
Enrollment Phone: (708) 216-2644

Brain

203666: RTOG 0834/EORTC 26053: A Phase III Trial on Concurrent and Adjuvant Temozolomide Chemotherapy in Non 1p/19q Deleted Anaplastic Glioma — the CATNON Intergroup Trial.
Principal Investigator: Edward Melian, MD
Enrollment Phone: (708) 216-2568

205228 / RTOG 0929: A Randomized Phase I/II Study of ABT-888 in Combination with Temozolomide in Recurrent (Temozolomide Resistant) Glioblastoma.
Principal Investigator: Kevin Barton, MD
Enrollment Phone: (708) 216-2568

203757 / RTOG 0913: A Phase I/II Trial of Concurrent RAD001 (Everolimus) with Temozolomide/Radiation Followed by Adjuvant RAD001/Temozolomide in newly diagnosed Glioblastoma.
Principal Investigator: Edward Melian, MD
Enrollment Phone: (708) 216-2568

Cancer: Breast

202755: I SPY 2 Trial Investigation of Series Studies to Predict Your Therapeutic Response with Imaging and Molecular Analysis Z.
Principal Investigator: Kathy Albain, MD
Enrollment Phone: (708) 327-3222

Principal Investigator: Bahman Emami, MD
Enrollment Phone: (708) 216-2568

Cancer: Colorectal

203653: A Randomized, Phase II Study of Bevacizumab/ mFolfox6 Versus Bevacizumab/folfiri with Biomarker Stratification in Patients with Previously Untreated Metastatic Colorectal Cancer. (Protocol Number: ML25710, Version Date: 3/30/2011)
Principal Investigator: Kenneth Micetich, MD
Enrollment Phone: (708) 327-2831

Cancer: Prostate

203330: A Randomized, Phase II Study of Androgen Deprivation Combined with IMC-A12 Versus Androgen Deprivation Alone for Patients with New Hormone-Sensitive Metastatic Prostate Cancer. (Protocol Number: S0925, Distributed: 1/15/2011)
Principal Investigator: Ellen Gaynor, MD
Enrollment Phone: (708) 327-2237

Cardiovascular Health

202146: Catheter Ablation Versus Antiarrhythmic Drug Therapy for Atrial Fibrillation Trial. (CABANA Trial IDE: G050233)
Principal Investigator: David Wilber, MD
Enrollment Phone: (708) 216-2644

204291: Early Ablation Therapy for the Treatment of Ventricular Tachycardia in Patients with Implantable Cardioverter Defibrillators.
Principal Investigator: David Wilber, MD
Enrollment Phone: (708) 216-2644

204692: Attain Performa Quadripolar Lead Clinical Study
Principal Investigator: Peter Santucci, MD
Enrollment Phone: (708) 216-2644

204621: Adjunctive Renal Sympathetic Denervation to Modify Hypertension as Upstream Therapy in the Treatment of Atrial Fibrillation.
Principal Investigator: David Wilber, MD
Enrollment Phone: (708) 216-2644

Central Nervous System

205235 / RTOG 1114: A Phase II Randomized Study of Rituximab, Methotrexate, Procarazine, Vincristine, and Cytarabine with and without Low-Dose Whole-Brain Radiotherapy for Primary Central Nervous Lymphoma.
Principal Investigator: Edward Melian, MD
Enrollment Phone: (708) 216-2568
Dermatology

204494: A Phase III Study to Evaluate the Efficacy and Safety of Induction and Maintenance Regimens of Brodalumab Compared with Placebo and Ustekinumab in Subjects with Moderate to Severe Plaque Psoriasis. (AMAGINE-3 Amgen)

Principal Investigator: James Swan, MD
Enrollment Phone: (708) 216-2026

Gastroenterology, Hepatology & Nutrition

205314: CLARITY — Clinical Investigation to Evaluate Removal of the Evolution Esophageal Stent — Fully Covered

Principal Investigator: Neil Gupta, MD
Enrollment Phone: (708) 216-2568

203024 / RTOG 0848: A Phase III Trial Evaluating Both Erlotinib and Chemoradiation as Adjuvant Treatment for Patients with Resected Head of Pancreas Adenocarcinoma.

Principal Investigator: Bahman Emami, MD
Enrollment Phone: (708) 216-2568

203315 / RTOG 1010: A Phase III Trial Evaluating the Addition of Trastuzumab to Trimodality Treatment of HER2-Overexpressing Esophageal Adenocarcinoma.

Principal Investigator: Bahman Emami, MD
Enrollment Phone: (708) 216-2568

204549: A Phase III, Randomized, Double-Blind, Placebo-Controlled Study of the Efficacy, Safety and Tolerability of a Single Infusion of MK-6072 (Human Monoclonal Antibody to C. Difficile Toxin B), and MK-3415A (Human Monoclonal Antibodies to C. Difficile Toxin A and B) in Patients Receiving Antibiotic Therapy for C. Difficile Infection (MODIFY II).

Principal Investigator: Jennifer Dorfmeister, MD
Enrollment Phone: (708) 216-2027

Head & Neck

203590 / RTOG 0920: A Phase III Study of Postoperative Radiation Therapy (IMRT) +/- Cetuximab for Locally Advanced Resected Head and Neck Cancer.

Principal Investigator: Bahman Emami, MD
Enrollment Phone: (708) 216-2568

203603 / RTOG 1008: A Randomized Phase II Study of Adjuvant Concurrent Radiation and Chemotherapy Versus Radiation Alone in Resected High-Risk Salivary Gland Tumors.

Principal Investigator: Bahman Emami, MD
Enrollment Phone: (708) 216-2568

Infectious Diseases

203103: A Phase III, Double-Blind, Randomized Study to Evaluate the Safety and Efficacy of BAL8557 Versus a Caspofungin Followed by Voriconazole Regimen in the Treatment of Candidemia and Other Invasive Candida Infections.

Principal Investigator: Jorge Parada, MD
Enrollment Phone: (708) 216-2026

Musculoskeletal: Rheumatoid Arthritis


Principal Investigator: Rochella Ostrowski, MD
Enrollment Phone: (708) 216-2057

204277: A Randomized, Double-Blind Study Comparing the Pharmacokinetics and Pharmacodynamics, and Assessing the Safety of PF-05280586 and Rituximab in Subjects with Active Rheumatoid Arthritis on a Background of Methotrexate who have had an Inadequate Response to One or More TNF Antagonist Therapies. (Protocol Number: B3281001)

Principal Investigator: Ruth Kadanoff, MD
Enrollment Phone: (708) 216-2026

Neurology

202571: Platelet-Oriented Inhibition in New TIA and Minor Ischemic Stroke (POINT) Trial: A Randomized, Double-Blind, Multicenter Clinical Trial to Determine Whether Clopidogrel 75 mg/day by Mouth after a Loading Dose of 600 mg of Clopidogrel is Effective in Preventing Major Ischemic Vascular Events (Ischemic Stroke, Myocardial Infarction and Ischemic Vascular Death) at 90 Days.

Principal Investigator: Michael Schneck, MD
Enrollment Phone: (708) 216-6638

204551: GORE® HELEX® Septal Occluder/GORE® Septal Occluder and Antiplatelet Medical Management for Reduction of Recurrent Stroke or Imaging-Confirmed TIA in Patients with Patent Foramen Ovale (PFO) — The Gore REDUCE Clinical Study: Demonstrate that Patent Foramen Ovale (PFO) Closure with the GORE® HELEX® Septal Occluder/GORE® Septal Occluder Plus Antiplatelet Medical Management is Safe, Effective and Reduces the Risk of Recurrent Stroke or Imaging-Confirmed Transient Ischemic Attack (TIA) when Compared to Antiplatelet Medical Management Alone in Patients with a PFO and History of Cryptogenic Stroke or Imaging-Confirmed TIA.

Principal Investigator: Michael Schneck, MD
Enrollment Phone: (708) 216-6638
### Osteoporosis

**204329**: A Multicenter, International, Randomized, Double-Blind, Alendronate-Controlled Study to Determine the Efficacy and Safety of Romosozumab in the Treatment of Postmenopausal Women with Osteoporosis. (Protocol Number: 20110142)

Principal Investigator: Pauline Camacho, MD
Enrollment Phone: (708) 216-8223


Principal Investigator: Matthew Harkenrider, MD
Enrollment Phone: (708) 216-2568

**203591**: PIPF-016 Entitled. A Randomized, Double-Blind, Placebo Controlled, Phase III Study of the Efficacy and Safety of Pirfenidone in Patients with Idiopathic Pulmonary Fibrosis.

Principal Investigator: Daniel Dilling, MD
Enrollment Phone: (708) 216-2026

### Prostate

**203420 / RTOG 0534**: A Phase III Trial of Short-Term Androgen Deprivation with Pelvic Lymph Node or Prostate Bed-Only Radiotherapy (SPPORT) in Prostate Cancer Patients with a Rising PSA after Radical Prostatectomy.

Principal Investigator: Matthew Harkenrider, MD
Enrollment Phone: (708) 216-2568

**203474 / RTOG 0815**: A Phase III Prospective Randomized Trial of Dose-Escalated Radiotherapy with or without Short-Term Androgen Deprivation Therapy for Patients with Intermediate-Risk Prostate Cancer.

Principal Investigator: Matthew Harkenrider, MD
Enrollment Phone: (708) 216-2568

**204293 / TDR11326**: A Randomized, Double-Blind, Placebo-Controlled Study of the Safety, Tolerability, Pharmacokinetics and Pharmacodynamics of Ascending Repeated Doses of SAR156597 in Patients with Idiopathic Pulmonary Fibrosis (IPF).

Principal Investigator: Daniel Dilling, MD
Enrollment Phone: (708) 216-2026

### Psychiatry, Depression

**205222**: A Phase III, Double-Blind, Placebo-Controlled Study of Cariprazine as Adjunctive Therapy in Major Depressive Disorder. (Protocol Number: RGH-MD-72)

Principal Investigator: Angelos Halaris, MD
Enrollment Phone: (708) 216-5090

**203368**: Cyclooxygenase-2-Inhibitor Combination Treatment for Bipolar Depression: Role of Inflammation and Kynurenine Pathway Biomarkers.

Principal Investigator: Angelos Halaris, MD
Enrollment Phone: (708) 216-5090

### Pulmonary & Critical Care Medicine

**205019**: Patient Registry to Observe the Real-World Dosing and Titration of Tyvaso®, Protocol RN-PM-404, TyTRATE Registry.

Principal Investigator: James Gagermeier, MD
Enrollment Phone: (708) 216-2057

**204293 / TDR11326**: A Randomized, Double-Blind, Placebo-Controlled Study of the Safety, Tolerability, Pharmacokinetics and Pharmacodynamics of Ascending Repeated Doses of SAR156597 in Patients with Idiopathic Pulmonary Fibrosis (IPF).

Principal Investigator: Daniel Dilling, MD
Enrollment Phone: (708) 216-2026

Visit [loyolamedicine.org/research](https://loyolamedicine.org/research) for a complete listing.

For enrollment, please use the phone number listed with the trial.
CME Events

**Trends in Cardiac Device Management**
Thursday, Sept. 5, 2013, 7 – 10 p.m.
2.25 AMA PRA Category 1 credits™
Location: DoubleTree Hotel, Oak Brook, IL
This activity is designed for specialty physicians who seek to develop expertise in treating patients needing CRM devices, including defibrillators and pacemakers, as part of their normal practice. The primary goal is to educate physicians regarding the benefits of device management, including lead extraction, and to increase understanding of how lead recalls affect their patients’ care. The activity will increase awareness of new Heart Rhythm Society guidelines regarding the appropriate referral of patients with cardiac devices for lead management strategies including lead extraction.

**Innovations in Glaucoma Management and Cataract Surgery**
Saturday, Sept. 7, 2013, 7:30 a.m. – 3:45 p.m.
5.5 AMA PRA Category 1 credits™
Location: Loyola University Chicago Stritch School of Medicine, Maywood, IL
This activity is designed for ophthalmologists and ophthalmology health care professionals who perform cataract surgery and/or treat and manage glaucoma as well as perform glaucoma surgery. The program will address the newest information, designs and techniques in these areas.

**Update on GI and Liver Disease**
Saturday, Oct. 5, 2013, 8 a.m. – 12:25 p.m.
3 AMA PRA Category 1 credits™
Location: Loyola University Chicago Stritch School of Medicine, Maywood, IL
This activity is intended for primary care physicians, gastroenterologists and surgeons. The program will educate physicians on the recommended HCV screening and provide new information regarding emerging therapies for Hepatitis C.

**Neurology of Pregnancy**
Saturday, Oct. 26, 2013, 7 a.m. – 5:15 p.m.
8 AMA PRA Category 1 credits™
Location: Loyola University Chicago Stritch School of Medicine, Maywood, IL
This program is designed for physicians, residents, nurse practitioners and physician assistants. The activity will educate participants on an array of practical issues pertaining to risk assessment, progression of these disorders, management (neurological/neurosurgical/obstetrical) and counseling of these patients and caregivers.

For additional information on upcoming Continuing Medical Education events, visit stritch.luc.edu/cme or contact the CME office at (800) 424-4850.