

# University of Arkansas for Medical Sciences

A Newsletter for Medical Professionals

**SUMMER 2023** 



The Orthopaedic & Spine Hospital opened in June.

## UAMS Opens New Facilities For Urology, Orthopaedics and Spine, and Radiation Oncology To House Arkansas' First Proton Center

It's been a busy year so far at the University of Arkansas for Medical Sciences (UAMS), and it's only July.

As it continues to blaze new trails in health care that are aimed at providing world-class care for all Arkansans, UAMS Health has been opening a lot of new doors.

In April, the **UAMS Health Urology Center** opened at 10915 N. Rodney Parham Road in the Premier Medical Plaza in Little Rock. In addition to routine urology services, the center offers specialized treatment for complex kidney stones, reconstruction of the urinary system and men's health – specifically for erectile dysfunction.

The clinic includes four procedure rooms and 15 exam rooms. In the

coming months, the 32,000-squarefoot space it occupies will also include an imaging center and a surgery and interventional radiology suite with two operating rooms and areas for pre-op and recovery.

"Our team offers treatments not available anywhere else in Arkansas, and we are pleased these services are now more convenient for our patients," said Timothy Langford, M.D., chair of the Department of Urology in the UAMS College of Medicine. "Patients can now receive care from our innovative team of expert urologists with a full suite of services available in a single location."

One of the attractions of the site is its ample parking, easy access to

public transportation and convenient location right off Interstate 430.

"We are committed to making health care more accessible in all forms," said Cam Patterson, M.D., MBA, UAMS chancellor and CEO of UAMS Health.

#### New Ortho & Spine Hospital

In June, UAMS opened **The Orthopaedic & Spine Hospital** on the southwest edge of its main campus in Little Rock. The newly built four-story structure has plenty of glass walls that provide an airy, light-flooded environment for more than 158,000 square feet of space devoted to orthopaedic surgery, spine care and pain management.

(Continued on page 2)

(Cover story continued)



The new Radiation Oncology Center opened in July.

The modern structure is easily accessible from Interstate 630, the main east-west corridor that runs through Little Rock, and patients can park onsite. It includes 24 private rooms for overnight observation and inpatient stays; 12 examination rooms for orthopaedic trauma, orthopaedic oncology, and physical medicine and rehabilitation; 12 operating rooms; eight exam rooms and two procedure suites for use by the pain management team; educational space for othopaedic surgery residents; and administrative and faculty offices.

The facility complements but doesn't replace existing UAMS orthopaedic clinics. It was built to accommodate a wide range of procedures, the latest equipment and technology, and space for multidisciplinary teams to easily work side by side.

"It will pay dividends for our state far into the future," predicted Gov. Sarah Huckabee Sanders.

#### New, Expanded Radiation Oncology Center Includes First & Only Proton Center in Arkansas

A new three-story, 52,249-squarefoot Radiation Oncology Center opened in mid-July on the eastern edge of the Little Rock campus. It houses the state's only proton center, which is set to open this fall in partnership with Arkansas Children's, Baptist Health and Proton International. It is one of only 42 such centers nationwide.

UAMS' radiation oncology center, part of the Winthrop P. Rockefeller Cancer Institute, continues to be the only such facility in Arkansas that treats children. It continues to offer cutting-edge technologies in radiation treatment, but in the coming months will also provide new services that use the expanded capabilities of three new linear accelerators, including edge radiosurgery, radiotherapy with motion management and adaptive therapy, the most advanced form of cancer therapy.

An alternative to radiation therapy, proton therapy uses a precisely focused, high-energy beam to target tumors, often in hard-to-reach areas, without affecting surrounding tissue. It is particularly effective in treating solid cancer tumors, including tumors of the brain, spine, head and neck, lung, prostate, colon and some breast tumors. It is also ideal for children because of its ability to limit radiation exposure to healthy, growing tissues.

"Patients in Arkansas will no longer have to leave the state for this highly effective treatment," Patterson said. "This is part of our continued commitment to improving the health and well-being of Arkansans."



UAMS Health Urology Center is located inside Premier Medical Plaza in West Little Rock



It's summertime in Arkansas, and what does that mean? It's tick season.

Common tickborne illnesses in Arkansas are Rocky Mountain spotted fever

(Rickettsia rickettsii), ehrlichiosis (Ehrlichia chaffeensis and Ehrlichia ewingii) and Southern tick-associated rash illness or STARI (Amblyomma americanum).

Lyme disease is uncommon in Arkansas, and according to the U.S. Centers for Disease Control and Prevention, we have reported less than 10 confirmed cases per 100,000 people for each of the past three years.

The most common symptoms of tickborne illness occur a few days to weeks after the bite and include headache, fever, myalgias and arthralgias, and for some, a skin rash that can range from a small bite to a bull's-eye enlarging rash to a whole body rash. Treatment with doxycycline is recommended to prevent severe disease.

Many years ago, the alphagal syndrome was recognized in people who were repeatedly bitten by the lone star tick (Amblyomma americanum), especially if the ticks remained embedded for several days. This syndrome is characterized by rash or hives or even anaphylactic reactions several hours after eating red meat. Treatment is avoidance of red meat and, for severe reactions, immediate access to an epinephrine auto-injector.

Stay safe!

Sincerely,

Michelle Mause

Michelle Krause, M.D. Senior Vice Chancellor, UAMS Health CEO, UAMS Medical Center Professor of Nephrology Department of Internal Medicine UAMS College of Medicine



Shashank Kraleti, M.D., Named Chair of UAMS Department of Family and Preventive Medicine

Shashank Kraleti, M.D., became chair of UAMS College of Medicine Department of Family and Preventive Medicine on July 1, succeeding **Richard Turnage**, **M.D.**, vice chancellor of Regional Campuses, who served as interim chair since July 2020.

Kraleti will also hold the Dr. Algermon Sidney Garnett Chair in Family Medicine.

He has served as director of the department's family residency program since 2016 and has been the director of primary care services since May 2022 – a position he will continue to hold.

He has received many honors at UAMS and at the national level. He earned his medical degree at Andhra Medical College in Visakhapatnam, India, in 2005, and is a member of the Arkansas Academy of Family Physicians.



Monique Spillman, M.D., Ph.D., Named Gynecologic Oncology Chief Board-certified

gynecologist-oncologist **Monique Spillman, M.D., Ph.D.,** has joined the UAMS Winthrop P. Rockefeller Cancer Institute as chief of the Division of Gynecologic Oncology, and is accepting new patients.

She previously spent nine years practicing gynecologic oncology at Texas Oncology, P.A., part of the Baylor Charles A. Sammons Cancer Center in Dallas. She completed a residency in obstetrics and gynecology at Brigham and Women's and Massachusetts General Hospitals in Boston and a fellowship in gynecologic oncology at Duke University Medical School in Durham, North Carolina. At the University of Colorado School of Medicine, she completed a postdoctoral fellowship in women's health and established her own molecular biology lab to investigate estrogen's role in ovarian cancer.

She earned her medical and doctoral degrees from the University of Texas Southwestern Medical and Graduate Schools, respectively.

To make a referral, call 501-296-1200.



#### New UAMS, Baptist Health Cancer Clinic Opens in Little Rock

A new cancer clinic and infusion center that is a joint venture between UAMS and Baptist Health is now open in Suite 500 of the Hickingbotham Outpatient Center on the Baptist campus in Little Rock. It offers the full spectrum of options for cancer patients and provides a multidisciplinary approach to cancer patients' health needs.

"Our vision is for Baptist Health patients to be able to receive the novel treatments provided by our UAMS cancer experts, including innovative clinical trials, at their Baptist Health clinic or hospital," said UAMS Chancellor Cam Patterson, M.D., MBA. "The more entry points we can give patients to exceptional care, the better chance they have of being diagnosed early and surviving this disease that is impacting Arkansans so significantly." Physician Relations & Strategic Development

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**CONSULT** is produced by the UAMS Office of Communications & Marketing and Physician Relations & Strategic Development.

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#### (Continued from page 3)



#### Rohit Dhall, M.D., **Named Chair of UAMS** Department of Neurology Rohit Dhall, M.D.,

became the chair

of the College of Medicine Department of Neurology on July 1, succeeding Lee Archer, M.D., who stepped down to focus on his patients in the UAMS Health Neurology Clinic.

Professor Dhall has served as vice chair for clinical research and director of neurodegenerative disorders in the department and continues to direct the UAMS Parkinson's Foundation Comprehensive Care Center, which obtained the designation under his leadership in 2022.

Dhall was recruited to UAMS in 2016 from Sunnyvale, Calif., where he directed the Parkinson's Foundation Center of Excellence. He had also directed a Center of Excellence in Phoenix, Arizona. He received his medical degree at All India Institute of Medical Sciences in New Delhi. India. interned in internal medicine at the University of Texas Medical School in Houston and completed a neurology residency at the University of Alabama at Birmingham.



Oleksiy Gudz, M.D., Ph.D., Leaves Ukraine to Join **UAMS** as Vascular Surgeon

Oleksiy Gudz, M.D., Ph.D., has joined the UAMS Department of Surgery as a vascular surgeon and an assistant professor.

Skilled in advanced endovascular techniques and procedures for limb salvage, he practiced vascular surgery in Ukraine for more than five years before being granted asylum in the United States.

Gudz earned his medical degree In 2009 from Ivano-Frankivsk National Medical University in Ukraine, where he earned his doctoral degree in 2015 and completed a general surgery residency in 2012. He completed a fellowship in vascular surgery at the National Medical University in Lviv in 2016.

"We are so pleased to welcome Dr. Gudz to our Division of Vascular and Endovascular Surgery," said Mohammed Moursi, M.D., chief of vascular surgery at UAMS. Moursi said that Gudz will also be "heavily involved in vascular surgery research at UAMS."



### Website for **Referring Physicians**

- Appointments & Transfers
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- EpicCare Link
- Referring Physician **Quick Reference**
- Physician Call Center
- Physician Directory
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- Physician Relations Staff
- UAMS Library

**The UAMS Physician Recruitment & Provider Placement Program** has a team of placement specialists dedicated to serving the recruitment needs of our partner communities, UAMS **Regional Campuses** and UAMS faculty. Physician/provider opportunities are available in all specialties throughout Arkansas.

#### **FEATURED JOBS**

Family Medicine Opportunities: new family physician opening at Mid-Delta Health Systems in Clarendon.

Academic Dermatologist: UAMS is seeking a dermatologist with an academic appointment at an assistant or associate professor level.

Northwest Arkansas Opportunities: Washington Regional Medical Center is seeking a hospitalist in Fayetteville, AR.

Recruitment Services Contact: Carla Alexander at 501-686-7934 or carla@uams.edu

Visit MedJobsArkansas.co for a complete listing of job descriptions and opportunities. Follow MedJobArkansas on Instagram, LinkedIn, Facebook and Twitter. Contact Carla Alexander (501-686-7934 or carla@uams.edu) to find out more about recruitment services.



## UAMS Is Only Provider in State to Offer New Treatment for Uterine Fibroids

A new minimally invasive treatment for women who have symptomatic uterine fibroids and would otherwise require a myomectomy or hysterectomy is now available at the University of Arkansas for Medical Sciences (UAMS).

UAMS is the only hospital in Arkansas to offer the outpatient procedure, which is called the Acessa procedure.

Luann Racher, M.D., an associate professor of obstetrics and gynecology at UAMS, said she performs the procedure while the patient is under general anesthesia. Heatcarrying arrays are inserted into the fibroids laparoscopically to destroy and shrink the fibroids.

Racher said this procedure allows her simultaneously to see inside the uterus with ultrasound to map the size and location of all fibroids, and then target them individually using a laparoscopic camera to guide the placement of the radiofrequency heat arrays.

She begins by making three small incisions, through which she inserts a 5mm laparascope, a 10mm ultrasound probe and an assistant instrument. The Accesa hand piece is inserted percutaneously.

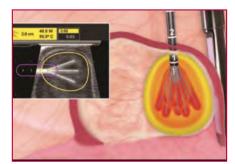
While viewing the uterus through a laparoscopic camera positioned above the umbilicus, she laparoscopically introduces the ultrasound probe to visualize the anatomy and target the individual fibroids. Using the two views, she then inserts the tip of the Acessa hand piece into each fibroid and deploys it, causing its seven needle-like arrays to emit radiofrequency energy that generates heat. The heat causes immediate thermal destruction of the fibroids, resulting in coagulative necrosis. The treated tissue then softens and shrinks over time, allowing symptoms to resolve with little or no pain. In contrast, a uterine artery embolism shrinks fibroids using vascular necrosis, which results in 6 to 12 months of pain during the degenerative process.

Racher, who has been performing the procedure since 2021, said she is able to confirm that the fibroids have been fully treated before finishing the procedure.

Typically, symptomatic fibroids are treated with surgery — either a hysterectomy in which the uterus is removed, or a myomectomy, which removes fibroids. While a hysterectomy can require four to six weeks of recovery, women who undergo the Accesa procedure can resume their normal activities in less than a week, Racher said.

The treatment is for women who want to keep their uterus; however, it is not yet FDAapproved for women who want to become pregnant in the future.

To make a referral to Dr. Racher, call 501-296-1800.



After the hand piece tip is inserted into a fibroid and the seven needle-like arrays are deployed, emitting radiofrequency energy, the heat generated causes thermal destruction of the fibroid.

## **PHYSICIAN PROFILE**



#### DEANNA SASAKI-ADAMS, M.D. Professor, Department of Neurosurgery

**College of Medicine** 

#### What inspired you to become a doctor?

I always wanted to help people and make a difference in people's lives. I worked in high school as a volunteer with children with special needs, accompanying them to their doctor visits and spending time with their families. I saw firsthand what an impact a physician could have. I decided that I wanted to go to medical school and be a doctor at an academic medical center, where we not only would care for patients but also be at the forefront of research and innovation that could give hope to some of these patients with difficult diagnoses.

## What do you like most about your specialty?

Neurosurgery allows me to see patients of all ages and backgrounds, often during a time when they are experiencing great distress. I enjoy being able to be a positive force in their lives and work to help them. I am always humbled by the trust patients put in me, and I strive every day to be able to make their lives better.

## What makes you unique among your peers?

I am an optimist and a creative thinker and am always trying to find novel solutions.

#### Why did you come to UAMS?

I came to UAMS to join a team of excellent faculty who are committed to providing the best care for our patients. It is all about the people and culture. UAMS has a rich neurosurgical history, and I hope to be able to contribute to its historic legacy.

#### What are your clinical specialties?

I care for patients with brain vascular disease such as aneurysms, arteriovenous malformations and stroke. I also care for patients with tumors along the skull base that lie in close proximity to essential nerves and blood vessels.

## What is the number doctors can use to make a referral to you?

The phone number for referrals is 501-686-5270, and the fax number for referrals is 501-686-7928.

#### **Initial Contact**

A 38-year-old dialysis-dependent patient with end-stage renal disease brought on by Type 1 diabetes and hypertension had been under evaluation for a kidney transplant for months, but questions about a lung nodule that kept showing up on his imaging tests prevented him from being placed on the waiting list. Transplant protocol prevents anyone from being placed on the list if there is a possibility that the person has cancer.

Because of the patient's relative youth and the fact that the nodule didn't appear to be growing, transplant doctors initially thought it would go away on its own. But in April 2023, as the patient's condition worsened and the nodule remained present, the transplant team at the University of Arkansas for Medical Sciences (UAMS) referred the patient to **Nikhil Meena, M.D.,** an interventional pulmonologist in the UAMS Health Surgical Oncology Clinic.

Since September 2021, when Meena became the first physician in Arkansas to use a new lung biopsy robot capable of locating and biopsing lung nodules that were previously undetectable, he has performed over 200 minimally invasive surgeries using the lon Endoluminal Robotic Bronchoscopy System.

The state-of-the-art equipment has enabled him to locate and biopsy nodules as small as 5 milimeters in diameter, whereas previous technology required nodules to be 1 ½ to three times larger to be detected. The ion robot also allows Meena to see further into the lungs than previous technology allowed, making it possible to catch and treat tumors in their earliest stages.

#### Assessment

Meena said that if the nodule turned out to be cancerous, then even if it could be removed with clear margins, the patient couldn't be placed on the kidney transplant waiting list immediately. Transplant patients have to wait until tests confirm that they have been cancer-free for at least two years before they can be placed on the list. Meanwhile, the patient would have to remain on hemodialysis, with a lower quality of life.

But if the nodule wasn't cancerous, the patient could be immediately placed on the transplant list, greatly increasing his chances of survival.

#### Procedure

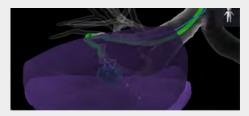
Meena first used a computerized tomography (CT) scan to obtain detailed images of the patient's lungs, with a focus on the very bottom of the left lung, where the nodule had been spotted.

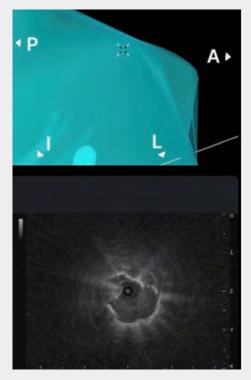
Then, with the patient under general anesthesia, Meena inserted an ultra-thin, flexible catheter containing a tiny camera through the patient's mouth. Meena watched on a screen while he steered the catheter down the patient's throat and into the left lung, until he reached the periphery of the airway where the nodule resided.

He used images from an ultrasound to confirm that he was in the right location and then marked the spot, enabling him to easily find the nodule again even when the patient's breathing caused the nodule to move around. The ability to mark the location is one of the advantages of using the robot, and makes the procedure less timeconsuming.

"In the past, the scopes would not stay where positioned, so it was hard to find your way back," Meena said. But with the robot,

(Continued on page 7)





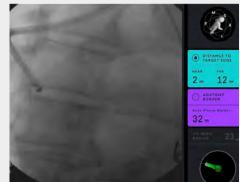


Image 1: In this image from the patient's procedure, the small scope is driven into the very periphery of the lung. The nodule is blue and the visceral pleural (lining of the lung) is in purple.

Image 2: The top image is the navigation view to the nodule. The bottom image is the ultrasonographic view of the endobronchial nodule.

Image 3: Fluoroscopy image of the scope in the patient's thorax. The distance to the target is about 2 millimeters and the far edge is 12 millimeters. The purple demonstrates the distance from the edges of the lung.

#### (Continued from page 6)

"once you park it somewhere, it knows where it is in the lung and doesn't move," making it easy to take multiple biopsies of the suspect lesion.

His plan was to employ a flexible biopsy needle inside the catheter to collect tissue for evaluation. If it proved cancerous, **Katy Marino, M.D.**, a thoracic surgeon, was on hand to surgically remove the lesion — and part of the lung as well, if necessary.

Meena said that because the lesion was so small, Marino probably wouldn't have been able to find it easily without the fiducial marker as a guide.

He was able to sample the tissue to confirm it wasn't cancerous — something that wouldn't have been possible using previous technology.

Following Meena's part of the surgery, which lasted for about 40 minutes, Marino took over, performing a second minimally invasive procedure while the patient remained under anesthesia.

The video-assisted thoracoscopic surgery (VATS) procedure lasted about 2 ½ hours, during which time Marino used a thoracoscope (a tube with a light and a camera) to see inside the body while placing surgical tools through small incisions to remove a triangle-shaped wedge of the clotted tissue. It was examined and was also found to be noncancerous.

#### Discussion

By having two surgeries during one bout of anesthesia, the patient had a much shorter recovery time that allowed him to be discharged two days later and then cleared for placement on the transplant list. Meena said that without the aid of the ion robot, the nodule could have prevented the patient from receiving a new kidney until his health deteriorated to the point that he was no longer eligible for a transplant.

# Ø

Medicine Division of Pulmonary ar

Critical Care Medicine

Imonary Fellowship

#### pirector of medical intensive care onin

**Education** Doctor of Medicine, All India Institute of Medical Sciences New Delhi, India

**Residency** Internal medicine and Pediatrics University of Arkansas for Medical Sciences (UAMS Health)

Pulmonary and Critical Care Medicine, Interventional Pulmonology, University of Arkansas for Medica Sciences (UAMS Health)

#### Katy A. Marino, M.D.



Assistant Professor Department of Surgery Division of Thoracic Surgery

Surgical Oncology Clinic

Winthrop P. Rockefeller Cancer Institute

#### Education

Doctor of Medicine, Louisiana State University Health Sciences Center Shreveport, Louisiana

#### Residency

General surgery, University of Tennessee Health Science Center Memphis, Tennessee

#### Fellowship

Cardiothoracic surgery, University of Louisville Louisville, Kentucky



## Liver, pancreas and bile duct services centralized at UAMS

For comprehensive surgical services for the treatment of benign and malignant liver, pancreas and bile duct disease, visit **UAMS' Winthrop P. Rockefeller Cancer Institute** on the Little Rock campus.

Our multidisciplinary team includes the only board-certified surgical oncologists and liver transplant surgeons in Arkansas, as well as interventional radiologists, advanced gastroenterology specialists and experts in radiation oncology and medical oncology.

Let us assess and evaluate hepatopancreato-biliary conditions for surgical and non-surgical treatments.

To make a referral, call 501-296-1200 or, if using Epic, make an ambulatory referral to Surgical Oncology-HPB.



### New Orthopaedic & Spine Clinic Opens in North Little Rock

UAMS Health's new Orthopaedic & Spine Clinic at 4261 Stockton Drive, Suite 100, in North Little Rock is ready to treat a wide variety of aches and pains, from sprains to strains to surgery and rehabilitation.

Our team of physicians, nurses and therapists provides expert, specialized care to improve mobility, reduce pain and, most importantly, get our patients back to living their normal lives.

Among the specialties provided are hand and upper extremities orthopaedics, shoulder and elbow orthopaedics, hip and knee orthopaedics, foot and ankle orthopaedics, sports medicine, spine care and interventional pain management.



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To request speakers or topics or to learn more about how the UAMS Physician Relations & Strategic Development team can help you, visit **UAMShealth.com/MD**  July 11 Acessa Procedure LuAnn Racher, M.D. Department of Obstetrics and Gynecology

July 18 Hospice and Palliative Care Masil George, M.D. Department of Geriatrics

July 25 Ethical Issues at the End of Life Lauren Bunch, Ph.D., HEC-C Department of Medical Humanities and Bioethics

August 1 Transplant Update Martha Estrada, M.D. Department of Surgery/ Transplant

August 8 Exciting Updates in Gynecologic Cancer Treatment

Monique Spillman, M.D., Ph.D. Department of Obstetrics and Gynecology August 15 Evaluation of Thyroid Nodules Arwa Albashaireh, M.D. Department of Endocrinology

All classes are FREE!

August 22 Hip and Knee Arthritis: Conservative to Surgical Benjamin Stronach, M.D. Department of Orthopaedics

August 29 Tweet Others as You Wish to be Tweeted: Social Media Issues in the Medical Landscape Mark Hagemeier, J.D. Vice Chancellor of Compliance/Managing Associate General Counsel UAMS Legal

September 5 Holiday - No LOD

September 12 Chest Pain Tushar Tarun, M.D. Department of Cardiology September 19 Orthopaedic Update Larry Balle, II, M.D. Department of Orthopaedics

September 26 Epic Care Link-Tools You Can Use Traci Sheridan, Manger IT, Patient Access Systems and Carmen Coates, Application Analyst -EC Plus Team Lead UAMS EPIC



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