New Endovascular Suite Operational

ENHANCING PATIENT CARE, ATTRACTING RESEARCH FUNDS

University Hospital’s new endovascular operating suite is outfitted with digital fluoroscopic imaging equipment, allowing surgeons to “mix modalities” and perform advanced minimally invasive endovascular procedures while maintaining open surgical capabilities, Professor and Section Chief of Vascular Surgery William D. Jordan, MD, says.

Endarterectomy, bypass procedures, and aneurysm repair can improve the health of patients suffering from vascular disease, but not all elderly patients can tolerate open surgery. Consequently, minimally invasive endovascular techniques are becoming more common, Dr. Jordan says. “Often, we combine stent technology and bypass procedures for optimal results. In the new suite, we can perform ‘hybrid revascularizations’ in a single setting.”

RESEARCH

“Although some endovascular treatments, such as abdominal aortic aneurysm repair, reduce morbidity and mortality, compared with the open procedures, other areas of endovascular therapy require intense research and clinical evaluation to improve results,” Dr. Jordan says. “The endovascular suite greatly enhances our ability to conduct such research and attract government and industry research funds.”

Jefferson County Medical Society Announces Officers

Jefferson County Medical Society (JCMS) Executive Director Martha Wise announces a new slate of officers who began serving the society in January. They are: President James G. Davis, MD; President-elect Bruce M. Key, MD; Vice President Nancy E. Dunlap, MD, PhD; Secretary-Treasurer A. Scott Tully, MD; and Past President Jerry W. Jackson, MD.

The 2005 Board of Directors consists of Christopher E. Haberman, MD, Elizabeth Hodges, MD, Charles R. Shumate, MD, Dennis P. Owens, MD, Abraham Schuster, MD, R. David Glasgow, MD, James R. Dollar, MD, Dennis W. Boulware, MD, David M. Ennis, MD, and Juan Johnson, MD.

The endovascular suite’s flexibility and advanced technology enhance patient care, allow cutting-edge development and refinement of endovascular procedures, and provide a training ground for physicians to learn new techniques, he says.

“The need for enhanced revascularization techniques is increasing along with an expanding elderly population,” Dr. Jordan says. “An estimated 20% of people older than age 70 have lower extremity vascular disease, and 50% of those are symptomatic, experiencing severe leg pain when walking. The elderly also suffer high rates of cerebrovascular disease. As Alabama’s population ages along with the rest of the nation, the prevalence of vascular disease and stroke continues to grow.”
Marchase Named Vice President For Research

Richard B. Marchase, PhD, has been named UAB vice president for research, President Carol Z. Garrison, PhD, says. He has served as acting vice president since August 2004.

“Dr. Marchase’s nearly 20 years experience at UAB and his reputation within the international research community are tremendous assets that will prove invaluable in this role,” Dr. Garrison says. “He has worked diligently and effectively to enhance UAB’s infrastructure so that we can support faculty as they continue to grow our research enterprise."

The Section of Vascular Surgery recently recruited two vascular specialists to advance minimally invasive techniques and facilitate research projects: Gilberto C. Russo, MD, PhD, who combines clinical interests in vascular surgery and evidence-based medicine with research focusing on applications of modern engineering in surgery, and Steven M. Taylor, MD, whose research focuses on alternative conduits for lower extremity bypass and combination endovascular and open procedures for treatment of vascular diseases.

A $1.4 state economic development grant funded construction of the endovascular suite and recruitment of additional vascular surgery faculty, explains UAB Chief Planning and Strategy Officer Martin Nowak. “UAB’s Department of Surgery has played a leading role in developing minimally invasive techniques for treatment of vascular disease. The new suite and faculty will continue that progress, bringing economic multipliers of research and clinical care to Alabama and greatly enhancing medical services for our citizens.”

Who Is Michael O. Leavitt?

Michael Leavitt is the 20th secretary of the U.S. Department of Health and Human Services (HHS). Previously, he was Environmental Protection Agency administrator, three-term governor of Utah, and president and CEO of a regional insurance firm, establishing it as one of America’s top insurance brokers.

According to a HHS release, the 54-year-old Leavitt is a health-care innovator, welfare reformer, and advocate for the application of technology. In 1994, the Utah legislature passed Governor Leavitt’s “Healthprint,” a comprehensive, incremental approach to health-care improvement in the state. A decade later, Utah has more than 400,000 additional people with health insurance, increased

Dr. Jordan is principal investigator for the UAB arm of the 51-site CREST study (Carotid Revascularization with Endarterectomy versus Stenting Trial) that will help determine the appropriate role for carotid stenting. He also has begun recruitment for a trial evaluating use of thoracic aortic stents for endovascular repair of thoracic aneurysms.
MARCH 14, 2005

How Much Aspirin For Primary Prevention Of Coronary Artery Disease?

The UAB Drug Information Bulletin notes that cardiovascular disease is the leading cause of death in the United States, and aspirin is recommended for patients who have known heart disease. Yet, the use of aspirin in healthy people with no known cardiovascular disease remains controversial.

Five randomized trials have examined aspirin use in healthy people: The British Doctor’s Trial (BMD), the Physician’s Health Study, the Thrombosis Prevention Trial, the Hypertension Optimal Treatment Study (HOT), and the Primary Prevention Trial in a five-state region.

numbers of children with health-care coverage, improved immunization rates, and lowered per capita cost of health care 25% below the national average. As HHS secretary, “he is committed to unleashing the power of technology to improve quality of care, reduce mistakes, and manage costs.”

LoBuglio Is Distinguished Professor/Director Emeritus

Albert F. LoBuglio, MD, who stepped aside as UAB Comprehensive Cancer Center director October 1, 2004, has been recognized as Distinguished Professor and Director Emeritus. The University of Alabama Board of Trustees bestowed the honors during its February 4 meeting. Cancer Center Senior Scientist Peter D. Emanuel, MD, has been named Cancer Center acting director until a national search is completed.

The resolution honors Dr. LoBuglio’s 21 years of service as physician, researcher, and administrator. He joined UAB as Cancer Center director in 1983. During his tenure, he developed an infrastructure to attract national multimillion dollar cancer research grants, and he recruited top cancer scientists, physician-scientists, and clinicians. He led the Cancer Center’s successful competition for continual Core Grant funding from the National Cancer Institute (NCI) and for continual designation as a “Comprehensive” Center. The Cancer Center remains the only NCI-designated Comprehensive Cancer Center in a five-state region.

Dr. LoBuglio established a priority for investigator-initiated translational research. He was the driving force behind the Cancer Center’s successful efforts to win four highly competitive SPORE (Specialized Program of Research Excellence) grants from the NCI, for translational research in ovarian, breast, pancreatic, and brain cancers.

Dr. LoBuglio, who served 4 years as School of Medicine associate dean for research, has played a major role in planning UAB’s physical growth. He led institutional planning to establish the first Department of Genetics and was instrumental in securing funding through grants and gifts for the Kaul Genetics Building to house the Howell and Elizabeth Heflin Center for Human Genetics, which opened in 2001. In addition, he was architect of the university’s reorganization, review process, and funding mechanisms for university-wide interdisciplinary research centers.

In 1984, Dr. LoBuglio organized the UAB Comprehensive Cancer Center Supporters Board, a volunteer community organization that has raised more than $6 million for the center.

How Much Aspirin For Primary Prevention Of Coronary Artery Disease?

The UAB Drug Information Bulletin notes that cardiovascular disease is the leading cause of death in the United States, and aspirin is recommended for patients who have known heart disease. Yet, the use of aspirin in healthy people with no known cardiovascular disease remains controversial.

Five randomized trials have examined aspirin use in healthy people: The British Doctor’s Trial (BMD), the Physician’s Health Study, the Thrombosis Prevention Trial, the Hypertension Optimal Treatment Study (HOT), and the Primary Prevention Trial in a five-state region.

NEW HANDBOOK ON ACADEMIC MEDICINE

The Association of American Medical Colleges has just published The Handbook of Academic Medicine: How Medical Schools and Teaching Hospitals Work. The comprehensive reference on the fundamentals of academic medicine explains what medical schools and teaching hospitals are, how they work and interrelate, and the prominent issues they face. This resource is recommended reading for academic leaders, board members, university officials, reporters, and legislators. For more information: www.aamc.org/publications

To access a Synopsis article from the last 2 years, visit our Web site at www.health.uab.edu/synopsis. You can search by date or subject in the left sidebar.

UAB physicians: visit MSI, the password-protected Medical Staff intranet site, at https://horizon.hs.uab.edu.
Prevention Project (PPP). All except the BMD trial showed reductions in rates of cardiac events, however, only two (HOT and PPP) included women, and these presented conflicting results about the benefits of daily aspirin in women. No trial showed a reduction in deaths from any cause, but scientists believe the trials were underpowered.

The doses used in the five primary prevention trials varied from 75 mg to 500 mg once daily. The minimum effective dose ranged from 75 mg to 160 mg.

The American College of Clinical Pharmacy and the American Heart Association recommend that individuals at moderate risk for a coronary event take an aspirin daily at doses between 75 mg and 162 mg, unless contraindicated. They defined moderate risk as greater than a 10%, 10-year risk of a cardiac event based on a Framingham score that includes age, total and HDL cholesterol, smoking status, and systolic blood pressure.

The U.S. Preventive Services Task Force recommends that only people at high risk for heart disease discuss risks and benefits of aspirin with their practitioners.

The UAB Health System Pharmacy and Therapeutics Committee recommends people at a 10% or greater risk of cardiovascular disease take daily aspirin at a dose between 81 mg and 162.5 mg. The risks and benefits should be discussed with each patient.

**MINIMUM EFFECTIVE DOSE OF ASPIRIN**

- Men at high cardiovascular risk: 75 mg
- Hypertension: 75 mg
- Stable angina: 75 mg
- Unstable angina: 75 mg
- Acute MI: 160 mg
- TIA and ischemic stroke: 50 mg
- Severe carotid stenosis: 75 mg
- Acute ischemic stroke: 160 mg

**Appointments**

**ACTIVE STAFF**

Valerie L. Brown, MD, 975-0512, SW W957, Hospitalist Service, Effective January

Thomas R. Hunt III, MD, 996-2688, FOT 930, Orthopedic Surgery, Division Director, Effective January

Michal Mrug, MD, 934-3594, KAUL 752, Genetic & Translational Medicine, Effective January

**WHO IS LESTER CRAWFORD?**

Lester Crawford, a Demopolis, Alabama, native and Auburn graduate, is the new Food and Drug Administration (FDA) commissioner. He has served as acting FDA commissioner since March 2004, prior to that as deputy commissioner, serving a 9-month tenure as acting commissioner before the appointment of Mark McClellan, MD, as commissioner. In addition to his doctorate of veterinary medicine degree from Auburn, Dr. Crawford earned a doctorate in pharmacology from University of Georgia.

Dr. Crawford envisions a new culture of openness, improved oversight, and enhanced independence. The FDA will create a new independent Drug Safety Oversight Board to oversee drug safety issues and will provide emerging information to doctors and patients about the risks and benefits of medicines.