Study shows positive outcome in breast reconstruction surgery

A NEW MGH STUDY is one of the first to detail the outcomes of breast reconstruction surgery after having a nipple-sparing mastectomy, and this new, hard data, researchers say, is good news. In the journal Plastic and Reconstructive Surgery, researchers looked at 500 reconstructions performed at the MGH over a five-year period.

“Immediate breast reconstruction after a nipple-sparing mastectomy is quite successful for the vast majority of patients, and the complication rate is low,” says Amy S. Colwell, MD, of the Division of Plastic Surgery and lead author of the report. “Nationally, when the procedure was first performed, there was a relatively high rate of nipple and skin loss. We aren’t seeing that as much anymore.”

Nipple-sparing mastectomies have become increasingly popular. Patients often say they want to preserve as much of their own breast as possible, including the nipple. “Reconstruction after nipple-sparing mastectomy often yields better cosmetic results since the natural nipple is preserved,” says Colwell. “With the popularity of the surgery, we wanted to really analyze the patient outcomes and make sure that this was a successful and safe procedure for women undergoing breast cancer treatment or taking preventative measures.”

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The art of inclusion

WHEN BILLY MEGARGEL WAS SEARCHING for his voice, he found it in his paintings.

Diagnosed with autism at age 2, Megargel, now 24, has barely uttered a word throughout his entire life. Instead, he communicates through a voice output Toughbook personal computer and with an arsenal of tools including brushes, rollers and bubble wrap.

“Complex medical issues prevented Billy from attending school,” says his mother Eve Megargel. “Homebound due to chronic pain, Billy began to paint.”

The family converted their garage into a studio where Megargel listens to opera, jazz and rock ‘n’ roll while painting with combustions of color and texture that his mother says evoke whatever mood he may be in on any given day. His talent has caught the attention of several area business and organizations, and he has had exhibits at Jewish Family & Children’s Service in Waltham, Lesley College, several Starbucks locations and, most recently, a display at the MGH where he is a patient.

“When I first saw Billy’s artwork, it was through a video that his mom Eve shared with our Pediatric Family Advisory Council,” says Debbie Burke, RN, MGH associate chief nurse. “I felt like displaying his art at the hospital was a way to give a voice to those with autism who may not be able to express themselves in other ways.”

On Feb. 25, five pieces of Megargel’s art were hung in the Center for Perioperative Care on Wang 3 and Lunder 3 and two more will be delivered to the hospital next week. His work also is on display at the Lurie Center for Autism at the MassGeneral Hospital for Children.

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Partners HealthCare at 20 – moving forward together

On March 18, 1994, Partners HealthCare was born, the realization of an agreement between the MGH and Brigham and Women’s Hospital. The vision of those hospitals’ leaders was to build an integrated health care system that would excel in patient care, teaching, research and community service. At a Dec. 8, 1993, press conference announcing the plan, then-BWH President Richard Nesson, MD, said the merger was about “how we can better serve the community and serve our mission.”

Since then the system has expanded and now includes more than a dozen acute, non-acute and specialty hospitals, community physicians, partnerships with dozens of community health centers, and a managed care organization offering affordable care to the underserved.

Over the years, Partners has undertaken a number of broad, multi-year initiatives that leverage all systems together in support of this vision. Among them are:

- Pledging to find $300 million in operational efficiencies and cost savings across the organization to support patient affordability.
- Acting as an Accountable Care Organization aimed at improving care while reducing costs through better coordination and reorganizing the way care is delivered for the most complex patients.
- Affiliating with Neighborhood Health Plan to improve access to community-based care – particularly for underserved patients – to coordinate that care more effectively, and to provide it more affordably.
- Investing in a single electronic health record – Partners eCare – that will ensure that providers have all the information they need to provide the very best patient care.

“After 20 years, our vision is as clear and focused as ever,” said Partners President and CEO Garry Gottlieb, MD. “Our commitment to our mission, our patients, and the communities we serve is paramount. We embrace our role as a leader in delivering the highest-quality care that is affordable and accessible for those we serve – today, tomorrow and for generations to come.”

Preparing for the future with Job Shadow Day

The MGH is a popular place for high school students seeking exposure to health careers, so in demand that Tracey Benner, coordinator of Youth Programs in the MGH Center for Community Health Improvement, decided to expand the hospital’s annual National Job Shadow Day into two days. On Jan. 31 and March 14, 100 students visited with 46 MGH staff members in 31 departments for a glimpse into various careers at the hospital. “Job Shadow Day helps students gain awareness of the skills needed for certain jobs, identify career interests and understand the relevance of school-to-work and careers,” Benner said.

East Boston High School students Reda Darouanou, Marvin Landaverde and Christian Franco shadowed Joe Catricala, lead anesthesia technician in the Department of Anesthesia, Critical Care and Pain Medicine, during his morning on Gray 4. Catricala says he had participated in a job shadow program – following EMTs and nurses – when deciding on a career path and the experience played a key role in his decision to enter the medical field. He thoroughly enjoyed offering the opportunity to the next generation of health care professionals. “I was extremely impressed with the students’ questions and their willingness to learn all aspects of our work environment.”

The Department of Anesthesia, Critical Care and Pain Medicine also provides jobs for students during the summer and a five-week curriculum for 10th- and 11th-graders in the MGH Youth Scholars Program during the school year. For more information about volunteer opportunities, contact Margo McGovern at mjmcgovern@partners.org.

Building a system: affiliation chronology

1994 The MGH, Brigham and Women’s Hospital, McLean Hospital, Spaulding Rehabilitation Hospital, plus several hospital-affiliated community health centers
Partners Community HealthCare, Inc. (PCHI)

1996 North Shore Medical Center (Salem Hospital and Shaughnessy-Kaplan Rehabilitation Hospital)
Joint venture with DFCI establishes Dana-Farber/Partners CancerCare

1997 AtlantiCare (Union Hospital) joins NSMC and Partners

1998 Faulkner Hospital

1999 Newton-Wellesley Hospital

2000 Youville Hospital joins SRH and Partners
Partners Home Care

2006 Martha’s Vineyard and Nantucket Cottage hospitals join MGH and Partners

2009 Massachusetts Mental Health Center, in collaboration with the Massachusetts Department of Mental Health

2010 Spaulding Rehabilitation Network formed, including Rehabilitation Hospital of the Cape and Islands

2012 Neighborhood Health Plan

2013 Cooley Dickinson Hospital
"I THOUGHT VERY HARD about whose name I wanted to wear across my chest and it had to be the MGH, there was no other option for me," says Bridget Hanahan, 29.

Hanahan was so determined to run the Boston Marathon for the hospital, she and her friends launched a Twitter campaign #draftBridget to get her onto the Emergency Response Fund Team. Her efforts charmed the committee, and she earned a spot. "The MGH meant so much to me when I was down and out, and I've never had a better hospital experience than I had there," Hanahan says. "I'm really proud to represent the MGH."

When she was 7 years old, Hanahan, who grew up in Philadelphia, had a tumor removed from her abdomen. Exactly 20 years later, the scar tissue wrapped around her intestines caused extreme pain and led to a bowel resection at another Massachusetts hospital. After the surgery and several complications left her with scars all over her stomach and a damaged abdominal wall, she came to the MGH last year to have the damage repaired.

"After dealing with doctors for years, I was blown away with the way Drs. Peter Fagenholz and Miguel Medina got to know me as a patient and applied that to their treatment," Hanahan says of the MGH surgeons who cared for her. "Literally eight weeks after the last surgery, I was lacing up and training for the 2013 Boston Marathon."

Although a seasoned marathon runner, Hanahan says she viewed her first Boston Marathon as a way to bounce back from a difficult year. She had trained extensively and had just crossed the finish line when the first bomb exploded. "In the months that followed, I had such a hard time reconciling this event that was so important for me. It was supposed to have signified a comeback in my own life," she says.

She turned to her running community for support, but it was while listening to a radio interview with Fagenholz when inspiration struck. "Hearing Dr. Fagenholz I thought,'Oh my God, that's my doctor. Look what he's doing. That's my hospital,'" Hanahan says. "I was so inspired by the work of the doctors and nurses. I really needed to be a part of it this year, and I needed to be on the MGH team."

As she trains for next month's race, Hanahan says she feels like a Bostonian for the first time since she moved here four years ago. The running community and the hospital have brought her closer to the city than she ever imagined.

"Last year I felt like the MGH gave me the opportunity to run through my surgery and this year they did it again through my bib number," Hanahan says. "I'm just so excited to be part of this team, and I'm so thankful for the opportunity." For more information about this year's teams visit, www.runformgh.org.

*This story is part of a series of articles that MGH Hotline will publish about the teams and team members supporting the MGH as part of this year's Boston Marathon.*

**Boston + Mass General: Together We Finish**

*The 2014 Boston Marathon* is fast approaching and the hospital has many opportunities for staff to show their MGH pride and support the 218 runners, including more than 80 staff members, who are running for the MGH’s three teams this year. To purchase Boston + Mass General: Together We Finish and Boston Strong/MGH Proud T-shirts, mugs, water bottles and more, visit the MGH Gift Shop. Or to purchase Boston + Mass General: Together We Finish T-shirts online, visit [http://www.runformgh.org/2014shirt](http://www.runformgh.org/2014shirt). MGH runners look forward to seeing supporters lining the marathon route in the MGH gear. A portion of the proceeds from merchandise sales will benefit the causes of the marathon teams: Pediatric Hematology/Oncology, Emergency Response and Cystic Fibrosis.
MGH physicians receive Harold Amos Faculty Diversity Award

THREE MGHERS have been awarded Harvard Medical School’s Harold Amos Faculty Diversity Award: Aaron Styer, MD, associate director of the Basic Science Research Program for the Reproductive Endocrinology and Infertility Fellowship, Marcela del Carmen, MD, gynecologic oncologist – both in the MGH Vincent Department of Obstetrics and Gynecology – and Tracey Cho, MD, associate director of the Neurology-Infectious Diseases Program in the Department of Neurology.

The award is named for Professor Harold Amos, a renowned microbiologist, who was the first African-American department chair at Harvard Medical School and taught at the school for nearly 50 years. It was established to recognize individuals who promote diversity and have made significant achievements in moving the institution toward being a diverse and inclusive community.

“It is indeed an honor to be one of the recipients of the Amos Award,” said del Carmen following the March 13 awards ceremony at Harvard Medical School. “I am grateful to Dr. Isaac Schiff (chief of the Vincent Department of Obstetrics and Gynecology and the department’s leadership in their support of our diversity program and efforts.”

ART
(Continued from page 1)

“When I received the call from Debbie that we had someone who wanted to donate artwork, I had no idea it was a patient,” says Dawn Tenney, RN, associate chief nurse of Perioperative and GI Endoscopy Services. “We were overwhelmed by how good they were. The idea of Billy’s connection, the autism and wanting to donate was very powerful.” Now when Megargel visits the Lurie Center, his mom says he walks right up to his art and smiles. “It is my belief that for all the pain Billy has had, art is a great solace,” says Eve Megargel. For a brief moment, he is truly present and whole. It is a joy to behold.”

For more information about Megargel’s art, visit www.wmmartgallery.com/. ■

BREAST RECONSTRUCTION
(Continued from page 1)

The majority of breast reconstructions in the recent study were performed in one surgery immediately following the nipple-sparing mastectomy. That means the breast tissue underneath the skin and nipple were removed and replaced with an implant in one step allowing the patient to awake from surgery with a new breast. “Most centers in the country typically need two or three surgeries to complete the breast reconstruction process,” says Colwell. “At the MGH, we work as a team with our breast surgeons to offer complete reconstruction in one surgery for many patients.”

Barbara L. Smith, MD, PhD, director of the MGH Breast Program in Surgical Oncology, adds, “An increasing number of patients are now eligible for nipple-sparing mastectomy procedures with immediate reconstruction for cancer treatment and for risk-reducing surgery. The MGH is one of the leaders in this area – in January we crossed the 1,000 nipple-sparing mastectomy total and are one of the largest centers in the country for this type of surgery. I think we will see more of these procedures here and across the country.”