Study combines two minimally invasive procedures to treat atrial fibrillation

**A NEW CLINICAL TRIAL** is now underway at the MGH to investigate whether combining two catheter-based procedures will improve the long-term outcome in the treatment of atrial fibrillation, the most common heart rhythm disorder. The MGH is the first hospital in New England – and only the second in the nation – to pair renal artery sympathetic denervation with pulmonary vein isolation (PVI) for patients with atrial fibrillation and hypertension.

“Typically these procedures are done separately,” said Moussa Mansour, MD, director of the Atrial Fibrillation Program in the MGH Institute for Heart, Vascular and Stroke Care. “In this trial, renal denervation is not only performed to treat the patient’s hypertension, which is the usual goal of the procedure, but as an adjunct to PVI to improve the outcome of atrial fibrillation ablation. We see real potential in this treatment for patients who continue to experience atrial fibrillation symptoms in spite of medical treatment as well as for those who cannot tolerate antiarrhythmic drugs. Atrial fibrillation affects more than three million people in the U.S. and is a major cause of stroke.”

On June 17, MGH physicians used the combined techniques to treat a 60-year-old patient with chronic heart disease. PVI – in which a flexible catheter is passed into the heart through a vein in the leg to disrupt the electrical connection between the pulmonary veins and the rest of the heart – can eliminate atrial fibrillation in most patients. Renal sympathetic denervation uses radiofrequency pulses to interrupt nerves in the vascular wall of the kidney. It is believed the procedure reduces the activity of the sympathetic nervous system.

*First-in-New-England procedure part of clinical trial in patients whose symptoms persist despite treatment*

Pie raises dough

**THEY CAME WEARING SCRUBS,** white coats and comfortable shoes. Each also came armed with safety goggles, helpful assistants and plenty of clean linens. But no amount of preparation and precautionary measures proved effective – the nine participants left the MGH’s first pie-eating contest with blueberry stains and whipped-cream-streaked hair.

The event, held during the June 28 annual Employee Summer Picnic, served as the unofficial kick-off to the My Giving Helps: The MGH Fund + United Way employee campaign. More than 900 employees raised nearly $47,000 for the campaign, which will officially run Sept. 3-27.

While many of the contestants tackled the pies in a traditional way – including cardiologist Stephanie Moore, MD, who took top honors with 12 pies, therefore living up to her “pie princess” name – others took a different, more unique approach. In an attempt to make the event a healthier one and to tap into the creativity of the research. (Continued on page 2)
 Residents and fellows storm the State House

RESIDENTS AND FELLOWS from pediatric residency programs throughout the state joined in an effort to advocate for children during the annual Residents and Fellows Day at the Massachusetts State House (RFDASH) on June 20. The event, founded eight years ago by residents at MassGeneral Hospital for Children (MGH/C), was organized this year by pediatric residents Rachel Sagor, MD; Lily Maltz, MD; and Sylvia Romm, MD (below, from left).

“RFDASH is a great opportunity for pediatricians in training to learn how to advocate for important children’s issues,” says James Perrin, MD, FAAP, former director of the MGH/C Division of General Pediatrics and president-elect of the American Academy of Pediatrics, who served as the event’s keynote speaker. “The energy and clinical experiences that medical students and residents bring to the legislature tremendously help enhance legislators’ understanding of child health issues.”

Since its inception the event has allowed residents and fellows to express their support for 23 bills. This year the group advocated for several gun safety bills, legislation establishing universal immunization and the creation of an immunization registry. The residents received lobbying and advocacy training from experts in the field, as well as briefings about the bills by area medical professionals, before meeting with representatives to discuss the bills.

John C. Dalton, MD

JOHN C. DALTON, MD, who worked at the MGH for more than 55 years, died June 23 at the age of 86. Dalton’s legacy as a kind and compassionate physician will live on at the MGH thanks to his appreciative patients who previously paid tribute to him by naming the 16th floor of the Ellison Building and the Surgical Services waiting room in his honor.

“John was an excellent, incredibly caring doctor,” says W. Gerald Austen, MD, chair of the MGH Chiefs Council, who fondly recalls working with Dalton in the early stages of their careers. “He and I became friends and shared many cardiac patients for many years. I always had the highest regard for him not only as a doctor, but as a really, really nice human being.”

Born in Norfolk, Virginia, Dalton attended the University of Virginia and the University of Virginia Medical School before graduating from Harvard Medical School (HMS) in 1950. During World War II, Dalton served in the U.S. Navy and later in the Marine Corps for two years during the Korean conflict. Dalton was a resident at Boston City Hospital and the Peter Bent Brigham Hospital before becoming a cardiac resident at the MGH. He also was a member of the visiting staff of the Chelsea Soldiers Home where he served as chief of the Fifth Medical Service.

John D. Stoeckle, MD, who was a close colleague of Dalton during his own 50-year career in primary care, recalls Dalton’s unwavering willingness to mentor HMS students as part of the Introduction to the Clinic course. “He was an excellent teacher,” Stoeckle says. “His genial nature with his patients – whether in the office, over the telephone or during home visits – made them extremely devoted to him. I admired him very much.”

Dalton is survived by his wife of 62 years, Olga Fehr Wells; daughters, Deborah D. Robertson and Susan Spitzer; son, Randolph Dalton; nine grandchildren; and six great-grandchildren. Memorial services were held on June 26.

“He was an absolutely superb physician, and he paid meticulous attention to detail,” says cardiologist Roman DeSanctis, MD. “John was always the consummate gentleman. He was as good as they get.”

— Atrial fibrillation procedure (Continued from page 1)

nervous system which in turn leads to reduction in atrial fibrillation.

“This procedure capitalizes on the strengths of the electrophysiologists in the use of ablation catheters, and the vascular medicine physician in the imaging of the renal arteries and associated interventions in this locale,” said Joseph Garasic, MD, director of Peripheral Vascular Intervention in the Cardiology Division, Institute for Heart, Vascular and Stroke Care. “It also marks the first time we have performed the renal denervation procedure at the MGH. Increasing evidence has shown that this procedure may have even more far-reaching benefits in the treatment of other diseases beyond uncontrolled hypertension – including heart failure, sleep apnea and cardiac arrhythmias.”

The patient treated in June will now continue to be evaluated on a regular basis to study the procedure’s effectiveness. The clinical trial is slated to last about two years, and the MGH expects to treat two to three patients a month with the new procedure.

“This clinical trial is unique in that it allows for a solid collaboration and integration of skills between experts in the MGH Atrial Fibrillation Service and Vascular Medicine Service, both key components of the Institute for Heart, Vascular and Stroke Care,” Mansour said. “This is the most recent and most advanced treatment option to help treat our cardiac patients and improve their heart health and their overall lives.”
MGH named as ‘Leader in LGBT Healthcare Equality’

THE MGH IS PROUD to be recognized as a “Leader in LGBT Healthcare Equality” by the Human Rights Campaign (HRC) Foundation in its Healthcare Equality Index 2013. The hospital earned top marks for its commitment to equitable, inclusive care for lesbian, gay, bisexual and transgender patients and their families in the annual survey, conducted by the educational arm of the country’s largest LGBT organization.

“Since 2008, when we first participated in this annual survey, we have looked at the Healthcare Equality Index as an opportunity to learn where we can better serve our patients,” says Jeff Davis, senior vice president for Human Resources. “We are very proud of the work that has gone into our attaining ‘leader’ status, but we know that there are always ways to make our hospital a more welcoming place for everyone, and we will continue in those efforts.”

The MGH was one of a select group of 464 health care facilities nationwide to be named Leaders in LGBT Healthcare Equality. Facilities awarded this title meet key criteria for equitable care, including nondiscrimination policies for LGBT patients and employees, a guarantee of equal visitation rights for same-sex partners and parents, and LGBT health education for key staff members.

HRC Health & Aging Director Shane Snowdon congratulated the MGH: “LGBT patients deeply appreciate the welcoming environment provided by a Leader in LGBT Healthcare Equality. It makes a big difference to know that your local health care facility is fully committed to giving you the same care it gives your neighbors and co-workers.”

For more information about the Healthcare Equality Index 2013, or to download a free copy of the report, visit www.hrc.org/hei.

Cooley Dickinson Health Care joins the MGH

MGH PRESIDENT PETER L. SLAVIN, MD, spoke to members of the Cooley Dickinson Health Care staff using telemedicine technology, above, after the Northampton, Mass. hospital officially became an affiliate of the MGH and Partners HealthCare on July 1.

“We are pleased that Cooley Dickinson Hospital has become part of the MGH and look forward to working with the board, management, physicians and staff to help preserve and enhance the outstanding care that patients and families in western Massachusetts have counted on for so long,” Slavin said.

The MGH and Cooley Dickinson Hospital have enjoyed a successful collaboration in cancer care since 2009. Through this new closer affiliation, the two hospitals will build on that collaboration to ensure local access to high-quality, cost-effective care through telemedicine, cooperative clinical programs and shared expertise. The MGH also will be able to provide expertise and training to help Cooley Dickinson prepare for and implement population health management.

Recognizing excellence in research

FRIENDS AND COLLEAGUES GATHERED on June 18 to celebrate the second annual Herman K. “Chip” Gold, MD, MGH Young Investigator Award. The award, given in honor of the former director of the Cardiac Catheterization Laboratory, recognizes excellence in clinical or translational research by an interventional fellow in the MGH Cardiology Division.

Beau M. Hawkins, MD, a fellow in the Vascular Diagnostic and Intervention Program, was honored for his study, “The Impact of Academic Year Timing on PCI Outcomes at Training Institutions;” performed under the guidance of Robert Yeh, MD, of the Cardiac Cath Lab.

A native of the Oklahoma City area, Hawkins has joined the cardiology faculty at the University of Oklahoma. His clinical interests include transradial coronary intervention, critical limb ischemia, and peripheral venous intervention.

HONORING EXCELLENCE: Robert C. Leinbach, MD, of the Cardiology Division; G. William Dec, MD, chief of the Cardiology Division; Cary W. Atkins, MD, cardiac surgeon; Gold’s wife, Barbara J. Nath, MD, MGH gastroenterologist; Hawkins; and Michael A. Fifer, MD, director of the Cardiac Catheterization Laboratory.
Announcements available online
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Designated glitter

RED SOX SLUGGER DAVID ORTIZ laughs with his son D’Angelo Ortiz, after MassGeneral Hospital for Children (MGH/C) patient Melissa Mauro, 11, far left, douses him with a handcrafted confetti device. Ortiz visited pediatric patients – including Henry Jacobsen, 6, at right – on July 2 after meeting with Ronald Kleinman, MD, MGH/C physician-in-chief, to present the hospital with a $20,000 donation from the David Ortiz Children’s Fund.

— Picnic

(Continued from page 1) community, MGH President Peter L. Slavin, MD, worked with a team of scientists from the MGH Nanotechnology Lab to create “nanopies.” Slavin explained that his pie plate contained 1,100 of the nanopies, each measuring only about one millimeter in diameter – and that he had another 900 in a backup reserve if needed. As the crowd laughed and broke into applause, Slavin also read a humorous letter from the MGH Office of General Counsel proclaiming the pies as acceptable entries into the competition.

The other worthy competitors were Keith Lillemoe, MD, chief of Surgery – who took the honor of having the most supporters with 218 donations – as well as Harry Orf, PhD, senior vice president for Research Management; Walter O’Donnell, MD, clinical director of the Pulmonary/Critical Care Unit; Kevin Whitney, RN, associate chief of Nursing; William Maynard, manager of Environmental Services; Alasdair Conn, MD, chief of the Department of Emergency Medicine; and Milton Calderon, coordinator of the Volunteer Department. Jerod Mayo and Sebastian Vollmer from the New England Patriots also joined in the fun, with Mayo elbowing up to the table as a participant and Vollmer serving as a guest referee.

To view a video of the contest on the MGH YouTube channel, visit: http://bit.ly/130Zoi