

# UPSTATE

CANCER CENTER

Syracuse, NY | September 2014

## UPSTATE STRENGTHENS CANCER CARE OPTIONS WITH NEW CANCER CENTER

**T**he gleaming new 90,000-square-foot Upstate Cancer Center serves as more than a hub for a nearly \$18 million investment in revolutionary cancer-fighting equipment available nowhere else in the region.

The newly opened center signals a progressive multidisciplinary approach to cancer care at Upstate University Hospital.

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**Within the Upstate Cancer Center building will be a meditation room and a Family Resource Center with access to Upstate's academic medical library, plus space for nutritional assessment and guidance, genetic counseling, tobacco cessation classes, cancer rehabilitation and consultations for pain management and integrative medicine.**

**Upstate strengthens cancer care** *continued from page A1*

Cancer care is coordinated across disciplines, rather than segregated by department, says associate administrator Dick Kilburg. “For example, if a patient has breast cancer, a medical oncologist, radiation oncologist and surgeon may come together to plan the best therapy. We needed the physical structure to match what we were beginning to accomplish organizationally.”

### **All ages**

The center provides comprehensive care for children and adults with cancer or blood disorders, with new technology that complements Upstate's existing diagnostic and treatment arsenal and gives patients an unmatched breadth of options in the Central New York region.

### **Under one roof**

Upstate's departments of medical oncology, pediatric oncology and radiation oncology will be based in the center, and surgical oncology has a dedicated multidisciplinary space there.

Patients receiving outpatient care in the center can easily get to imaging and testing appointments in the hospital. And, hospital inpatients will have easy access to diagnostic and treatment services available in the center.

The center — which is LEED-silver-certified and has a unifying “healing through nature” theme — is connected to Upstate University Hospital in downtown Syracuse.



**Ajeet Gajra, MD, is one of the many cancer experts who will see patients in the new Upstate Cancer Center.**

### **Advanced technology**

Highlights of the new technology include the **Varian TruBeam**, with a rotating arm that allows physicians to target tumors with extreme precision, while sparing healthy tissue. In addition, Upstate's **Vero SBRT** (stereotactic body radiotherapy system) for advanced treatment of lung, liver, prostate and other cancers, is the third installation of this equipment in the country.

"The Vero system permits what I refer to as 4-D imaging, with the fourth dimension being time," says Jeffrey Bogart, MD, professor and chair of radiation oncology and co-director of the prostate cancer program. "By that I mean we can visualize the tumor in the patient's anatomy in three

dimensions and also track its changes across time and modify our treatment accordingly."

### **Novel surgical suite**

The intra-operative suite, dedicated to cancer procedures and neurosurgery, is the first facility in the country to offer advanced magnetic resonance imaging and bi-plane angiography in rooms connected to a full-service operating room.

### **Laboratory service**

The expert diagnostic capabilities of Upstate's laboratory testing service will provide rapid turnaround times, with phlebotomists and laboratory technologists dedicated to patients of the cancer center.

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Radiation oncologist Anna Shapiro, MD, talking with a patient at Upstate's new Vero SBRT.

**Upstate strengthens cancer care** *continued from page A3*

**Community-outreach screening programs**

Medical director Leslie Kohman, MD, says, “the Upstate Cancer Center is committed to reducing the burden of cancer in the communities we serve.”

Even before the new building opened, Upstate began offering an ongoing lung cancer screening program. Upstate has been screening people for colorectal cancer through a partnership with the American Cancer Society and Kinney Drugs and offers screening mammograms for breast cancer through the Syracuse Healthy Neighbors Partnership. ■

**Center complements existing services**

Upstate continues to offer **TomoTherapy, RapidArc, Calypso** and **Gamma Knife Perfexion**, in addition to **brachytherapy** options.

The **da Vinci robot** also remains an option for some cancer patients who need surgery, in the hospital's operating suites.

Upstate offers the **Philips UroNav Fusion Biopsy System**, a major breakthrough in the fight against prostate cancer, at its urology offices at Upstate Specialty Services at Harrison Center (550 Harrison St.), adjacent to the cancer center. “UroNav incorporates precise knowledge of the needle location within the prostate and, using a technology similar to GPS navigation, it directs the biopsy needles to the heart of the suspicious lesion,” says Gennady Bratslavsky, MD, professor and chair of the urology department.

**Breast imaging**

Upstate also offers **Positron Emission Mammography**, a high-resolution scanner that focuses on the metabolic activity of lesions to more accurately detect the presence of a breast cancer. Upstate breast imaging also offers diagnostic services including **3D tomosynthesis, digital mammography** and **breast MRI**.

## WHICH SURGERY PROVIDES BEST LONG-TERM OUTCOME FOR KIDNEY CANCER?

Used to be, surgery for kidney cancer meant a nephrectomy. Now research shows patients fare better 10 years out if they undergo partial nephrectomy instead.

It makes for a trickier operation, but the kidney-sparing surgery gives patients a decreased risk of developing chronic kidney disease, according to an Upstate study published recently in the journal, *Urologic Oncology*.

Urology resident Michael Daugherty, MD, and his mentor, Gennady Bratslavsky, MD, analyzed a national database, concentrating on people between the ages of 20 and 44 who underwent surgery for small, localized kidney tumors. “We looked at these younger patients because we wanted to see what effects the surgery itself would have on patients and their long-term outcomes. With the younger patients, they were assumed to have less underlying diseases, less chance of having hypertension or heart disease or things that would possibly cause them to have an earlier death.”

They compared cancer-specific survival and overall survival between those who had their kidney removed and those who just had the tumors removed. They found no difference in cancer-specific survival, “which means the surgical removal got rid of the cancer in both ways equally,” he says. In overall survival, however, “those treated with the entire removal of the kidney did worse at 10 years. Those that had the nephron-sparing surgery did better in the long term.”

Not all kidney cancers are treated with surgery. Many factors including the type of cells involved help determine the best course of treatment. “These cancers may be very different in their sizes, their behaviors and their prognoses,” says Bratslavsky, who leads the department of urology at Upstate.

Some kidney cancers are hereditary; some are not.



**Gennady Bratslavsky, MD**

Some are discovered incidentally. But many are discovered only after a patient notices blood in his or her urine.

“Unfortunately when patients present with symptoms, the disease may be much more advanced,” says Bratslavsky.

Upstate physicians offer methods of destroying tumors without traditional surgery, and newer treatments that tap into the body’s own immune system to destroy cancer cells. “Active surveillance” is another important option when tumors that are slow growing or for patients for whom surgery would be too risky. Most of the surgeries for kidney cancer at Upstate are done laparoscopically using robotic assistance.

No matter which type of cancer is diagnosed, Bratslavsky says, “it’s very important that patients with kidney tumors are managed in a setting where they can be provided with a multidisciplinary approach, such as at Upstate.”

Radiologists, pathologists, medical oncologists, urologists and others come together in one room to discuss a particular patient’s options. This is where the question is asked, and answered: Which treatment, which surgery offers the patient the best outcome? ■



**Listen to an interview on this topic at [www.upstate.edu/healthlinkonair](http://www.upstate.edu/healthlinkonair) by searching for “Bratslavsky.”**

## UPSTATE ROUNDUP



**Sharon Brangman MD, Christopher Morley PhD, and John Epling MD**

Upstate Medical University is among nine SUNY campuses to share \$900,000 in funding for biomedical research projects supported by the State University of New York Health Network of Excellence. Each of six projects will receive about \$150,000 and will engage students, faculty and their partners in the private sector to research causes, treatments and cures for diseases and brain disorders.

### The three projects taking place at Upstate:

- **Sharon Brangman, MD**, will establish the SUNY Network Aging Partnership to coordinate collaborative research across SUNY's four medical universities to facilitate competition for scientific funding, accelerate publication of research projects and recruit and mentor trainees. The partnership will investigate frailty and ways to enhance lifespan across the health spectrum.
- **Christopher Morley, PhD, and John Epling, MD**, will produce a road map to the creation of a SUNY-wide centralized "big data" repository of SUNY electronic health record data called a Clinical Integrated Data Repository.
- **Sharon Brangman, MD**, will create a rapid and highly sensitive hand-held biosensor platform to advance clinical health care and accelerate diagnosis and detection of human neural pathologies including stroke, Alzheimer's disease and traumatic brain injury.

**G**ary Nieman, associate professor of surgery and senior research scientist at Upstate, has been awarded a \$50,000 grant from the SUNY Technology Accelerator Fund to develop a minimally invasive infusion and suction therapy device to remove harmful abdominal fluid buildup caused by trauma, sepsis, or burns. Nieman's grant was announced by the governor's office in April as one of five TAF grants awarded to researchers at SUNY institutions to aid in the development of the next generation of life-saving technologies.



**Gary Nieman**

**R**esearchers in the **Department of Psychiatry** at Upstate received a \$2.8 million award through the Mental Health Research Grants program at the National Institute of Mental Health. Over the next five years, they will investigate genetic susceptibility to a wide variety of childhood psychiatric disorders.

**T**he Council on Accreditation for Public Health has approved a five-year accreditation for the **Central New York Master of Health Program**, a joint program of Upstate Medical and Syracuse universities. Two degrees are offered: an MPH and a joint MD/MPH. Students may attend full or part time. More at [www.upstate.edu/cnymph](http://www.upstate.edu/cnymph)



**C**onstruction is underway to expand the **Joslin Diabetes Center** and ultimately increase patient capacity. The center, at 3229 E. Genesee St., Syracuse, is growing by 4,500 square feet and adding 10 exam rooms and four provider offices. This should allow Joslin staff to accept more patients and to see referred patients sooner.



**A Black Hawk helicopter from the Fort Drum army post near Watertown landed on the helipad atop Upstate University Hospital in June during a joint training exercise for staff from Fort Drum and Upstate trauma and emergency services.**

Upstate's Emergency Medicine Medical Service Group has contracted with River Hospital in Alexandria Bay to provide emergency medical physicians as providers and supervisors. Gary Johnson, MD, emergency medicine chairman, said Upstate appreciates "this chance to continue to improve the relationship with Upstate Medical University and Northern New York."



**Gary Johnson, MD**

Upstate University Hospital's Community Campus has opened a Transitional Care Unit. The 20-bed operates on the fifth floor of the hospital, offering specialized care to medically complex senior patients who, while clinically stable, require ongoing physician oversight and the specialized services of hospital staff. This complements GEM Care, the senior emergency unit at the community campus.

A new publication called Cancer Care is dedicated to cancer patients, families and friends, caregivers, researchers and everyone else touched by cancer. The premiere issue was distributed during open houses of the new Upstate Cancer Center. Get a free subscription to your home or office by emailing your name and address to [magazine@upstate.edu](mailto:magazine@upstate.edu) with "Cancer Care" in the subject line.

