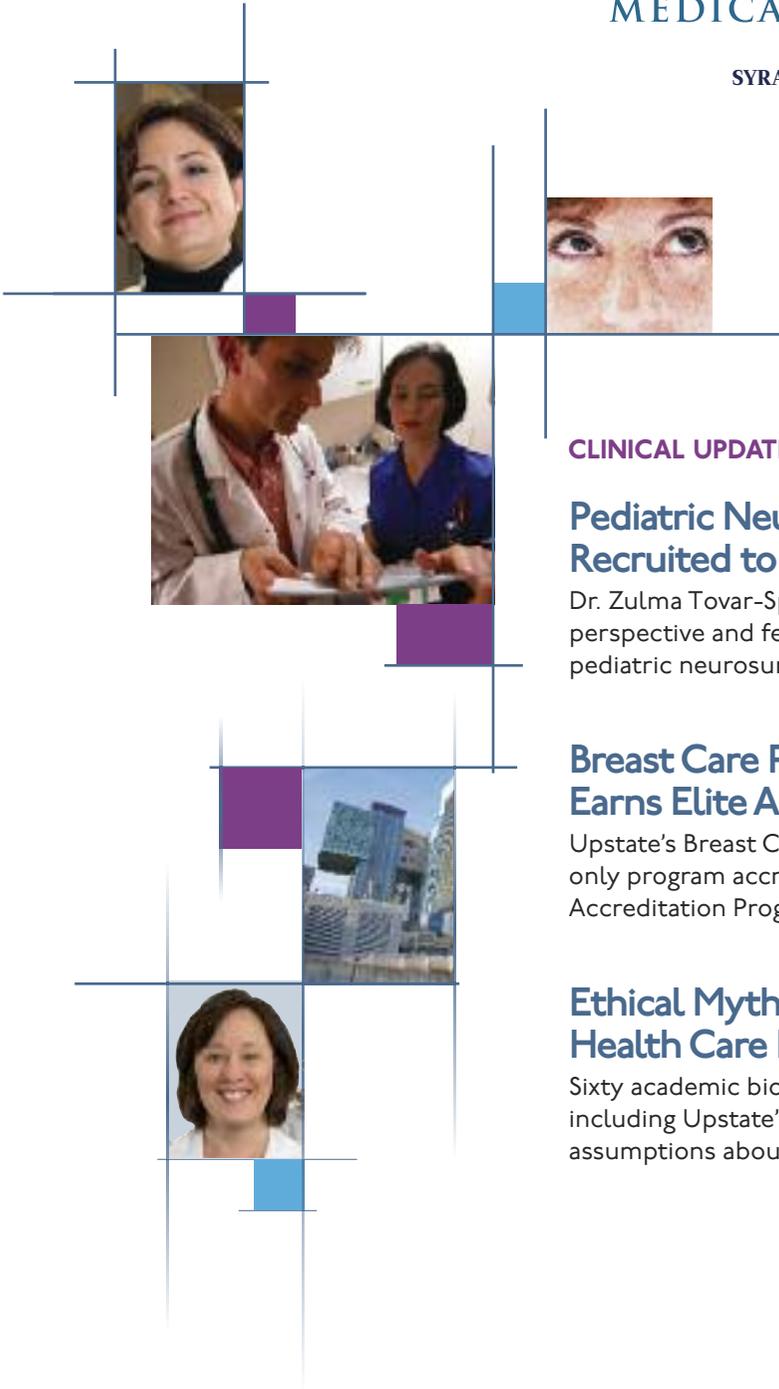


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UPSTATE

MEDICAL UNIVERSITY

SYRACUSE, NEW YORK



CLINICAL UPDATE

November 2009

Pediatric Neurosurgeon Recruited to Upstate

Dr. Zulma Tovar-Spinoza brings global perspective and fellowship training in pediatric neurosurgery and epilepsy.

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Breast Care Program Earns Elite Accreditation

Upstate's Breast Care Center is the region's only program accredited by the National Accreditation Program for Breast Centers.

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Ethical Myths in Health Care Reform

Sixty academic bioethics programs – including Upstate's – join forces to challenge assumptions about health care reform.

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Pediatric Neurosurgeon Recruited to Upstate

Zulma Tovar-Spinoza MD

In keeping with its mission, the Upstate Golisano Children's Hospital is helping to attract highly specialized pediatric experts to the region. One recent example is pediatric neurosurgeon Zulma Tovar-Spinoza MD.

Dr. Tovar-Spinoza, an assistant professor and director of pediatric neurosurgery in Upstate's Department of Neurosurgery, brings fellowship training plus a global perspective to Upstate. She earned her medical degree *cum laude* at Universidad de Los Andes in Merida, Venezuela, where she also completed residencies in surgery, trauma and neurosurgery. She completed a neurosurgery residency at the University of Tel Aviv in Israel and a fellowship in pediatric neurosurgery and epilepsy at the Hospital for Sick Children at the University of Toronto, Canada.

As director of pediatric neurosurgery, Dr. Tovar-Spinoza offers a broad range of advanced procedures — and the latest technologies — for brain tumors, hydrocephalus, spina bifida and other conditions.

“At Upstate, we have the triple advantage of advanced expertise, world-class technology and a brand new children's hospital that is second to none,” she says.

Epilepsy Focus

Dr. Tovar-Spinoza specializes in epilepsy surgery, “which can be curative or can reduce the frequency of seizures and improve the quality of life,” she explains. “The most common options include resective surgery, where we remove the most active epileptogenic part of the brain, or lesion-ectomy, where we remove only the focal point of the seizure.”

Dr. Tovar-Spinoza's epilepsy research has been published in recent issues of *Neurosurgery*, *Epilepsy Research* and *Neurosurgery Focus*. She has also written book chapters on epilepsy surgery.

Building Program

“Our plan is to create a pediatric epilepsy surgery program here,” reports Dr. Tovar-Spinoza. In addition to the Pietrafesa Center for Children's Surgery at Upstate University Hospital, the new children's hospital has seven patient rooms wired to monitor seizure activity.

Long-Term

One reason Dr. Tovar-Spinoza selected pediatric neurosurgery is the often-extended interaction with patients and families. With hydrocephalus, for instance, the relationship may begin with prenatal counseling regarding surgical solutions.

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Upstate Connect: 800-544-1605 for Physician-To-Physician Service

“Sometimes we perform neurosurgery immediately after birth – and follow patients to adulthood,” she explains.

Tailored to Kids

Dr. Tovar-Spinoza especially enjoys her interaction with pediatric patients. “It is very different from dealing with adults, who make their own decisions,” she says. “Children have more difficulty understanding what is happening to them and more difficulty expressing themselves.

“This is why children’s hospitals are so important. Children require a different approach. We recognize the importance of families – and that family situations can be complex.

A major attraction, in my decision to come to Syracuse, was the opportunity to treat children locally, with minimal disruption to the family dynamic.”

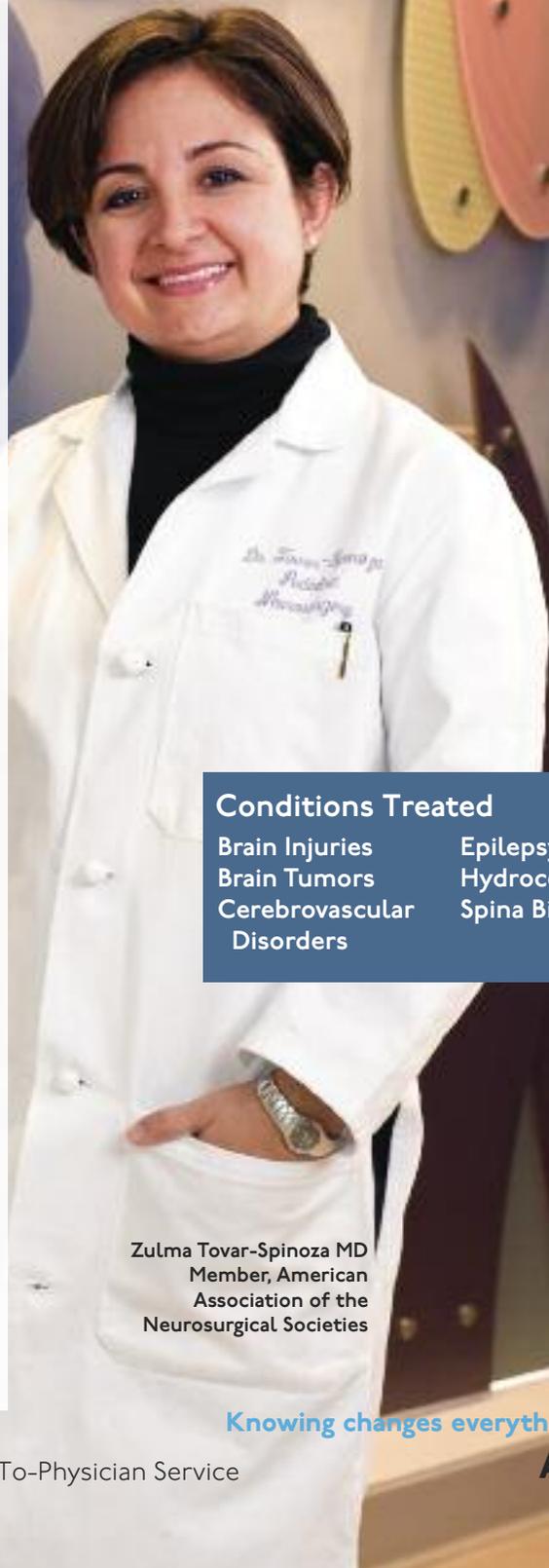
Community Activist

Dr. Tovar-Spinoza is also passionate about engaging with the community, especially on issues related to prevention of head injury.

“I see a lot of head trauma. When talking to the community, my theme is ‘I don’t want to see you as my patient because of a brain injury,’” says Dr. Tovar-Spinoza. “My summer message, my winter message, my year-round message is to please wear a helmet when you’re on a bike, rollerblades, skateboard or skis.

“This includes teens and adults. Protect your brain,” she insists. “It can save your life. Preventable trauma is very sad. Once you have a brain injury, your life is never going to be the same.”

For more information or to make a referral to Dr. Tovar-Spinoza, please call 315-464-4470 or 800-255-5011 or link to www.upstate.edu/neurosurgery



Conditions Treated
Brain Injuries Epilepsy
Brain Tumors Hydrocephalus
Cerebrovascular Spina Bifida
Disorders

Zulma Tovar-Spinoza MD
Member, American
Association of the
Neurosurgical Societies

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Members of Upstate's multidisciplinary breast cancer team include, from left, program coordinator Lisa Cico MSN, NP, radiologist Jennifer Barna MD, medical oncologist Sheila Lemke MD, surgeon Kara Kort MD and radiation oncologist Hemangini Shah MD.

Upstate's Breast Care Program Earns National Accreditation

NAPBC distinction shared by only three programs in New York state

Upstate University Hospital's Breast Care Program has earned the National Accreditation Program for Breast Centers (NAPBC) designation, placing Upstate in a league with the nation's premier breast care providers.

Only two other New York breast care programs – both located downstate – share the distinction.

Upstate University Hospital's cancer care is also accredited by the American College of Surgeons' Commission on Cancer.

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The National Accreditation Program for Breast Centers represents more than a dozen national, professional organizations, including the American College of Surgeons and American Cancer Society. Established to ensure quality of care for patients with diseases of the breast, the NAPBC focuses on setting standards of care; monitoring compliance to these standards (as well as monitoring patient outcomes); validating scientific research; and offering patient and professional education.

The group's ultimate mission is to reduce the morbidity and mortality of breast cancer by improving screening mammography and advocating for increased access to clinical trials.

Rigorous Review

To earn NAPBC accreditation, Upstate was required to demonstrate that it offers comprehensive care, including a full range of state-of-the-art services; a multidisciplinary team approach to coordinating the best treatment options; and easily accessed information about clinical trials and new treatment options. The rigorous evaluation process and performance review also examined the center's leadership, clinical management, research, community outreach, professional education and quality improvement.

For more information on Upstate's Breast Care Program at Upstate University Hospital, please contact Upstate Connect at 800-544-1605 or link to www.upstate.edu/surgery/healthcare/breastcare/bcp/



Dr. Numann's Legacy

The Upstate University Hospital Breast Care Program was established in 1986 under the leadership of Upstate's Patricia J. Numann MD, a nationally prominent breast and endocrine surgeon. The visionary Dr. Numann understood the community's need for a dedicated, comprehensive and compassionate center for personalized breast and breast cancer care.

The center has served many thousands of patients. Its multidisciplinary team include surgeons, medical oncologists, radiation oncologists, radiologists, pathologists, genetic counselors and nurse practitioners.

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3 Myths

about the

Ethics of Health Care Reform

The Association of Bioethics Program Directors (ABPD) represents the leadership of 60 academic bioethics programs across North America, including the program at Upstate Medical University. At this critical juncture in the national debate about health care reform in the United States, its membership wishes to send a clear message about some myths that challenge the ethics of reform proposals.

Myth #1:

Health care reform will mean giving up control of my own health care decisions.

Fact:

The field of bioethics has long championed the rights of individual patients to make their own health care decisions in consultation with their physicians. If we thought the major proposals being considered posed a serious threat to these rights, we would be the first to speak out. But that is NOT the case. The right of individuals to make decisions about their health care is engrained in the ethics of American medical practice and that won't change under any of the approaches to health care reform currently under discussion.

Myth #2:

Health care reform will control health care costs by depriving patients of important, but costly, medical treatments.

Fact:

This is also untrue. If anything, the provisions in current health care proposals will increase the likelihood that patients will get quality medical care and decrease the likelihood of medical errors that kill thousands of patients every year. There are unethical ways to control costs, including refusing to treat the uninsured or those who have insurance but cannot afford the exorbitant out-of-pocket costs of expensive treatments—that is the status quo. Health care reform offers a more coherent approach to delivery of health care that aims to control costs while maintaining the quality Americans have come to expect and deserve.

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Myth #3:

Health care reform will deny older Americans medical treatments at the end of life.

Fact:

This may be the most pernicious myth of all. In proposed approaches to reform, there is a provision that supports the rights of individuals and their families to make decisions at the end of life by institutionalizing a process for patients and families to express their desires to their physicians and other health care professionals. This right is part of the culture of American medicine, defended since the beginnings of the field of bioethics, and supported by case law going back over 50 years. Some opponents of health care reform have twisted both the intent and effect of this provision, making unsupported claims about how it will push older Americans into hospice against their will, and even euthanasia. Nothing could be further from the truth. Straightforward conversations about end of life are critical to quality health care, with decisions continuing to be made by individuals and their families in ways that are consistent with their values and in consultation with their physicians.

Here is the real bottom line: The current state of health care is unethical. It is neither just nor fair. There is no morally defensible reason why some Americans get excellent medical care at costs they can afford and other Americans lose their homes or go into bankruptcy attempting to secure treatment for a seriously ill loved one. The current proposals being debated in Congress all go a long way toward making health care in America more just. At the same time, there is nothing in the current proposals that threatens a patient's right to choose, a critical feature of an ethically acceptable health care system.

We commend efforts to reform the health care delivery system with commitments to cover all Americans while protecting choice and maintaining the high quality care that our fellow citizens deserve. We stand ready to aid however we can in this vital effort.

This statement, issued by the ABPD Board of Directors, appears in the October 2009 issue of *Bioethics in Brief*, published by the Center for Bioethics and Humanities at Upstate Medical University.