U.S. News & World Report ranks Aurora St. Luke’s cardiology, heart surgery program in nation’s top 50

For the second year in a row, the cardiology and heart surgery department at Aurora St. Luke’s Medical Center, Milwaukee, was the only heart program in Wisconsin nationally ranked by U.S. News & World Report in its 2013-14 evaluation of the nation’s best hospitals.

Aurora St. Luke’s cardiology and heart surgery department ranked 39th nationally among 720 programs that qualified for review. It was the only heart program in the state ranked among the nation’s top 50.

“Now we’ve made it two years in a row, which is pretty impressive,” said A. Jamil Tajik, MD, president of Aurora Cardiovascular Services.

More patients who had specified disorders or received specified procedures in 2009, 2010 and 2011 were seen at Aurora St. Luke’s than at any other hospital in the state.

The department was the only one in the state to score in the top classification (“much better than expected”) for survival of patients.

Aurora St. Luke’s gastroenterology and GI surgery, neurology and neurosurgery, and pulmonology departments also ranked nationally among the top 50 hospitals in their respective categories, contributing to the tertiary care facility’s ranking as one of the best hospitals in the state. Aurora BayCare (Green Bay), Aurora Sinai (Milwaukee) and Aurora West Allis also were listed as among the best hospitals in the state.

Additionally, Aurora West Allis ranked among the top 50 hospitals nationally for gynecology and Aurora Sinai ranked among the top 50 hospitals in the nation for geriatrics.

“The Best Hospitals rankings assembled by U.S. News & World Report confirm our belief that Aurora Health Care continues to be a leading provider of advanced, high-quality health care services,” said Nick Turkal, MD, president and chief executive of Aurora Health Care. “These rankings are a notable accomplishment as only about 15 percent of hospitals are recognized for high performance among the region’s best, and just 3 percent of all hospitals earn a national ranking in any specialty.”

“We are proud of this recognition and remain committed to providing the cutting-edge, most comprehensive and highest quality cardiovascular care supported by robust educational and research programs,” said A. Jamil Tajik, MD, president of Aurora Cardiovascular Services.

This year, 25 fellows-in-training are participating in Aurora Health Care’s active Cardiovascular Disease, Interventional Cardiology and Electrophysiology fellowship programs, which include basic, translational and clinical research components. Aurora cardiologists published 44 manuscripts in 2012.
Vinay Thohan, MD, is the new head of Aurora Health Care’s Advanced Cardiac Care, Heart Transplant and Ventricular Assist Device Program, signing on as medical director in July.

Prior to joining Aurora, Dr. Thohan was medical director of Heart Failure and Cardiac Transplantation at Wake Forest University Baptist Medical Center, Winston-Salem, N.C., where he also served as professor of medicine in cardiology.

“Aurora Health Care, and particularly Aurora St. Luke’s, has a history of excellence in caring for complex cardiovascular conditions,” Dr. Thohan said. “I see the potential to expand and extend this model of care to improve the health of our region and continue to reach out nationally and internationally to be the destination center for the treatment of advanced cardiovascular diseases.”

Dr. Thohan has joined a heart transplant and left ventricular assist device (LVAD) program with a long, distinguished history and multidisciplinary team.

Vinay Thohan, MD
Medical Director of the Advanced Cardiac Care, Heart Transplant and Ventricular Assist Device Program

In 1988, Aurora St. Luke’s Medical Center, Milwaukee, was one of a few hospitals in the nation, and the only hospital in Wisconsin, to implant a deceased donor heart into a local 46-year-old homemaker, Betty Amick. Amick went on to become a national celebrity. She was featured in numerous news articles and national magazines as the longest living heart transplant patient in the country. Fast forward 46 years, and Aurora St. Luke’s remains one of the most renowned and highest-volume heart transplant programs in the country.

With the highest volumes in the state and current patient survival outcomes exceeding national benchmarks, Aurora St. Luke’s continues to offer unparalleled treatment and lifesaving options for patients suffering from advanced heart failure. Aurora St. Luke’s is the only Medicare-certified adult heart transplant program in southeast Wisconsin, and the only hospital in the area to be accredited by the Joint Commission for LVAD destination therapy.

The multidisciplinary team Dr. Thohan has joined includes Nair Z. Sulamanjee, MD, advanced heart failure and transplant cardiologist and program director of the Advanced Heart Failure Fellowship Program, T. Edward Hastings, DO, co-director of Heart Failure and Transplant Cardiology, Omar M. Cheema, MD, heart failure and transplant cardiologist, and Diana Zwicko, MD, medical director of the Pulmonary Hypertension Clinic.

The heart transplantation and LVAD program at Aurora St. Luke’s works in collaboration with all referring physicians from across Wisconsin, the nation and the world, with an emphasis on communication and partnership with each patient’s local care team.

Referrals and consultations are welcome 24/7, with a surgeon, transplant cardiologist and registered nurse coordinator on call at all times. To refer or for further information, call 414-646-5410 or 888-292-6668.

Currently, Aurora St. Luke’s Medical Center is the only U.S. hospital to implant the Jarvik-7, an artificial heart as a bridge to transplant.

A leader in heart failure treatment, Aurora St. Luke’s Medical Center in Milwaukee recently celebrated a new milestone.

Within 36 hours, the center’s Advanced Cardiac Care, Heart Transplant and Ventricular Assist Device Program surpassed the 800 mark by performing three heart transplants from Aug. 8 to 10. More heart transplants have been performed at Aurora St. Luke’s than at any other center in the state.

“Heart transplantation is a time-sensitive, highly coordinated and demand-driven surgery,” said Vinay Thohan, MD, medical director of the program. “I was privileged to see each of the three transplanted hearts resume when implanted into these patients.”

The team that participated in the 800th and two subsequent transplants included Dr. Thohan and surgeons Daniel O’Hara, MD, John Crouch, MD, Thomas Barragry, MD, and Frank Downey, MD.

“This highly coordinated effort is emblematic of the quality of individuals and services that are responsive to the patient,” Dr. Thohan said. “Surgeons, physicians, nurses, coordinators, engineers, operating room technicians and organ procurement services came together to make the difference in the lives of these very fortunate people.”

Each of the recipients was supported with chronic left ventricular assist devices, implanted for life-threatening cardiac diseases at Aurora St. Luke’s.

“These individuals were not waiting in the hospital for months, but actually leading full lives in their communities when they received the phone call,” Dr. Thohan said.

The United Network of Organ Sharing, a national computerized list, matches transplant recipients with available organs.

“The donors and their families have provided the gift of life to the recipients,” Dr. Downey said. “We thank them for their choice.”

The first heart transplant at Aurora St. Luke’s occurred in 1968. After advances in immunosuppression research allowed heart transplant operations to ramp up starting in 1984, the center celebrated its 100th heart transplant in 1990 and its 500th heart transplant in 2003.

“I am so proud to be part of this vital resource for our region,” Dr. Thohan said. “These milestones are why Aurora St. Luke’s will continue to be a destination for advanced cardiac care.”

Other milestones

1986 - Wisconsin’s first hospital to implant the Jarvik-7 artificial heart as a bridge to transplant

1991 - Wisconsin’s first hospital to implant the pneumatic Heartmate, a ventricular assist device

1994 - First hospital in the Midwest to offer a vented electric Heartmate ventricular assist device, and first to manage care of a patient at home while heart was being supported by the device

1998 - First hospital in the Midwest to implant a permanent ventricular assist device

2006 - Wisconsin’s first hospital to implant the only U.S. Food and Drug Administration-approved temporary total artificial heart
A heartbeat away from tragedy
Uncovering a hidden heart issue helped Aurora patient stay on a healthy path

Angelica Maglio is an exercise buff. Wanting a healthier lifestyle, she changed her diet and began exercising, ultimately losing 90 pounds. She keeps fit through regular, varied workouts.

One of her favorite types of workouts is cycling—on-road and off-road. Maglio often trains for races at an intense indoor cycling or “spin” class. She credits her weight loss, healthier lifestyle and spinning for helping to save her life.

Unusual result
During one spin class, Maglio’s instructor had the group members check their heart rates. Maglio was told to expect a heart rate of about 160 bpm. She was surprised that hers was in the mid-80s.

After class, she spoke with her instructor, who urged her to see a doctor. Maglio met with her primary care doctor, Dr. Ellen Leeney, MD, and told her about the low heart rate during exercise. She also told her about symptoms she had been having—dizziness, lightheadedness and feeling very fatigued.

“I had dealt with that for a long time, but I always assumed they were due to stress,” Maglio said. “There are so many things you can blame it on.”

Dr. Leeney ordered an electrocardiogram, which showed a problem—Maglio had first-degree heart block.

Heart-stopping news
“It was pretty scary,” Maglio said. “I needed more testing, so Dr. Leeney referred me to Dr. Dhala.”

Anwar Dhala, MD, an electrophysiologist for Aurora Cardiovascular Services, ran more tests on Maglio’s heart. He found that Maglio had not first-degree heart block, but third-degree. And despite the fact that she was young, active and had a healthy lifestyle, she needed a pacemaker.

“I was shocked. I thought, ‘I’m young. I’m healthy... people my age don’t get pacemakers,’” Maglio said.

At her family’s urging, she decided to pursue a second opinion in a different health care system. When the second opinion confirmed that a pacemaker was required, Maglio came back to Aurora for surgery.

“I was so scared. I thought, ‘I’m young. I’m healthy... people my age don’t get pacemakers,’” Maglio said. “It was a really difficult experience for me.”

Maglio also appreciates the compassionate care she received.

“I really felt they all cared about me—not just as a patient, but as a person,” she said. “I feel very grateful.”

Full speed ahead
Maglio now has a new lease on life. No longer is she dragged by dizziness, feeling faint or fatigued. She has the energy for the workouts she loves.

“Now I can work out and my heart rate is in the 140s or 150s,” she said.

Compassionate care
Maglio was pleased she chose to stay within the Aurora Health Care system for her care.

“I’m very grateful to Aurora,” she said. “The doctors are wonderful. I can’t say enough about them. They made a really difficult experience easier.”

Maglio was impressed by the communication between the doctors.

“Dr. Dhala’s assistant will find out how my echocardiogram with Dr. Tajiq went,” she said. “They’ll know that I had my medication adjusted, and ask about that. There’s such great communication between all my doctors and their staffs—they cover all bases. I really feel like I’m being taken care of.”

Maglio encourages people to learn about heart health, and to pay attention to their bodies.

“It’s amazing how little people know about how your body works, or what your heart rate is supposed to be,” she said. “If you feel something’s not right, you need to say so. Listen to your body.”

For referrals to the Adult Congenital Heart Disease Center at Aurora St. Luke’s, please call 414-385-7102.

Learning opportunities
Aurora Health Care cardiology specialists will share their expert knowledge Dec. 6 and 7 at the AF/VF/VF Summit, to be held at Settles Chicago Water Tower, Chicago.

Course directors include clinical adjunct professors Jaisbir Sra, MD, and Masood Akhtar, MD, of Aurora Cardiovascular Services, Aurora faculty invited to present are: Arshad Jahangir, MD, David C. Kress, MD, and Imran Niazi, MD.

The course is attended by electrophysiologists, cardiology, fellows and other health care personnel interested in cardiac arrhythmias. The latest results of basic and clinical research in ablation, imaging technologies and device therapies will be presented through lectures, panels and prerecorded “live” cases delivered by national and international leaders in the field.

The symposium is cosponsored by Heart Rhythm Society and Aurora Health Care, which is accredited by the Wisconsin Medical Society to provide continuing medical education for physicians. Attendees can claim a maximum of 1.80 AMA PRA Category 1 Credits.

To register, visit Aurora.org/CMEActivities. Click on Live Courses, then December, then select AF/VF/VF Summit 2013. Click Register. Follow prompts on screen.

For information, visit afvfsummit.com. To register, contact Laurel Landis at laurel.andis@aurora.org or 414-219-7684.

Aurora Health Care cardiology specialist Bijoy K. Khandheria, MD, is among the program directors of PACE Excellence in the Practice of Cardiovascular Ultrasound to be held Dec. 5 to 8 at the Omni Island Marriott in Coronado, Calif.

Aurora faculty invited to present are: Suhail Aliaghband, MD, Christopher Krueger, BDCS, Timothy E. Paterek, MD, Shannon Treiber, BDCS, and Matt Umland, BDCS.

The program is designed to provide a review of the current and innovative practices of two- and three-dimensional echocardiography, myocardial mechanics, Doppler and color-flow imaging in the assessment of myocardial ischemic, ischemic, pericardial and valvular heart disease.

The program is sponsored by Global Education Group, MedMeetings Etc. Ltd. and Intersected Accreditation Commission, in collaboration with University of California, San Diego and Aurora Health Care, Milwaukee.

For information, contact Denise Mezullo at denise@medmeetingsetco.org or 414-412-2837.
Clinical trial: Researchers test safety, effectiveness of heart failure management system

Principal investigator Nasir Z. Sulemanjee, MD, implanting electrophysiologist Imran Niazi, MD, and their team are evaluating the safety and clinical effectiveness of a physician-directed, subject self-management system that is guided by left atrial pressure measurements for use in subjects with heart failure at Aurora St. Luke’s Medical Center.

Aurora St. Luke’s is the only site in Wisconsin participating in the research study. Left Atrial Pressure Monitoring to Optimize Heart Failure Therapy (LAPTOP-HF) clinical trial, NCT01121107.

“Left atrial pressure monitoring is a unique approach to prevent worsening heart failure and hospital readmissions by using state-of-the-art technology to allow the subjects to regulate their own medications,” Dr. Niazi said. “An increase in left atrial pressure is a very accurate estimate of worsening heart failure.”

The HeartPOD LAP System (St. Jude Medical Inc., St. Paul, Minn.), monitors left atrial pressures using a sensor lead that is implanted into the atrial septal wall via a transvenous approach. The system is currently being studied in the LAPTOP-HF clinical trial to investigate if utilizing left atrial pressures with physician-directed, subject self-managed care can reduce hospitalization for acute decompensated heart failure. “The subject carries a handheld device, the FAM,” (Patient Advisor Module), which is about the size and shape of a cell phone, to measure left atrial pressures. Measurements are taken twice a day and, based on the results, subjects receive instructions to adjust medications, if necessary.

The left atrial pressure monitoring system is limited by federal law to investigational use and available only to subjects randomized to the investigational arm of the research study. Patients randomized to the control arm of the research study receive only a standard of care rhythm management device and a handheld patient advisor module that provides a daily reminder of their medication schedule.

Des. Sulemanjee and Niazi are studying the safety and efficacy of the systems in improving heart failure outcomes among the study subjects.

“Direct measurements of the heart may provide a better way of managing heart failure before symptoms are noticed or hospitalizations is required,” Dr. Sulemanjee said. “Adjustment of medications may prevent hospitalizations.”

Clinicians seeking information on alternative heart failure management methods may contact clinical research coordinator Jennifer Cooper, RN, CCRC, at 414-385-2504 or jennifer.cooper@aurora.org.

Electrophysiologist joins Aurora staff

Electrophysiologist Imran H. Sheikh, MD, joined the Aurora Health Care cardiac electrophysiology department in September after participating in the organization’s Cardiovascular Disease and Clinical Cardiac Electrophysiology fellowship programs at Aurora St. Luke’s Medical Center, Milwaukee.

Dr. Sheikh worked as an electrophysiologist in Phoenix after his training. Dr. Sheikh’s research interests include cardiac implantable electronic devices and ablation strategies, including the use of stem cells. His work, “The Addition of Linear Lesions Results in Improved Clinical Outcome in Patients Undergoing Atrial Fibrillation Ablation,” was published in Circulation.

Dr. Sheikh is board certified in cardiovascular disease. He is a member of the Heart Rhythm Society, American Heart Association and American College of Cardiology.

“I am very excited about returning to Wisconsin to be a part of Aurora Health Care’s team of excellent cardiologists,” Dr. Sheikh said. He is based at Aurora BayCare Medical Center, Green Bay, Wis.

Recent publications

Aurora Cardiovascular Services physicians have a long history of publishing cutting-edge articles in peer-reviewed medical journals.

In a multisite effort, Aurora vascular and interventional radiologist Mark Mewissen, MD, and his colleagues published “Three-Year Results of the VIABAHN Endoprosthesis vs. Bare Nitinol Stent Implantation for Complex Superficial Femoral Artery Occlusive Disease” in the August issue of the Journal of Vascular Network of Wisconsin.

The investigators concluded that the long-term outcomes of complex superficial femoral artery disease intervention were similar using either a VIABAHN endoprosthesis (Gore Medical, Flagstaff, Ariz.), which includes an expanded polytetrafluoroethylene liner, or a bare nitinol stent.

“Not only does the VIABAHN endoprosthesis mitigate ingrowth of intimal hyperplasia, its long-term clinical outcomes are similar to the use of bare nitinol stents,” Dr. Mewissen said.

Recognition

On September 11, the Aurora Research Institute held its 4th Annual Greater Milwaukee Clinical Research Recognition Event.

“Cardiovascular medicine was again very well represented at this year’s event,” said A. Jamil Tajik, MD, president of Aurora Cardiovascular Services.

Aurora Cardiovascular Services

Medical education events

To request information or register, please contact Laurel Landis at laurel.landis@aurora.org or 414-219-7684, unless otherwise noted.

Dec. 5 to 8, 2013 | San Diego, CA eCIC Excellence in the Practice of Cardiovascular Ultrasound – Denise Mazdyso 414-412-2837 | denise@medmeetingsecc.com

Dec. 6 to 7, 2013 | Chicago, IL AF/VT/VP Summit

Feb. 15, 2014 | Pewaukee, WI 23rd annual New Developments in Cardiology

April 4 to 5, 2014 | Milwaukee, WI Valvular Heart Disease: Newer Management Strategies, Case-Based Approach

May 22 to 25, 2014 | New York, NY Sights and Sounds of Echocardiography: In the Heart of the Big Apple – Denise Mazdyso 414-412-2837 | denise@medmeetingsecc.com
