

Fall 2018

# healthpoints

## In This Issue

- 2** Cleft Lip and Palate Team Day
- 3** Hernia Surgery: From Simple to Complex Repairs
- 4** The Diaphragm Center: Giving Back the Breath of Life

### healthpoints

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*More from the Department of Surgery experts at:*

## Message from the Chairman



Craig Smith, MD

Dear Reader,

At NewYork-Presbyterian/Morgan Stanley Children's Hospital we recently held *Cleft Lip and Palate Team Day*, a new patient awareness day designed to support children and their parents dealing with the challenges of this condition.

Please mark your calendars for *Pancreatic Cancer Awareness Day*. Last year's program drew over 100 people, and we expect a healthy turnout on November 3, 2018.

Our surgeons have developed new and better ways to repair hernias.

**Dr. Yuri Novitsky**, director of our Comprehensive Hernia Center, has pioneered new minimally invasive techniques that allow patients to heal faster and with less pain. And we now have the world's only center for disorders of the diaphragm, helping a wide range of patients—from those who are short of breath and losing lung capacity to those who are dependent on a respirator. Read more below.

Warmly,

**Craig R. Smith, MD, FACS**  
*Chairman, Department of Surgery*

## Annual Pancreatic Cancer Awareness Day

Saturday, November 3, 2018 • 1:00 to 3:00pm

Vivian and Seymour Milstein Family Heart Center

Myrna L. Daniels Auditorium

173 Fort Washington Avenue, NYC



Join us for an afternoon of learning and sharing with the experts of the NewYork-Presbyterian/Columbia University Irving Medical Center, Pancreas Center, Muzzi Mirza Pancreatic Cancer Prevention & Genetics Program and Herbert Irving Comprehensive Cancer Center

In addition to clinical lectures, survivors will share their personal experiences. Following the presentations we will host a health fair in the Riverview Terrace where refreshments will be served. Various vendors will be on hand providing useful literature, materials & giveaways. You will also have the opportunity to interact with our staff and faculty. Open to the public, free of charge.

To RSVP and for more information call 212-304-7814 or email [cmr2146@cumc.columbia.edu](mailto:cmr2146@cumc.columbia.edu) • [www.pancreasmd.org](http://www.pancreasmd.org)  
Register online: [www.ColumbiaSurgeryCME.org](http://www.ColumbiaSurgeryCME.org)

## Cleft Lip and Palate Team Day

NYP/Morgan Stanley Children's Hospital are recognized leaders in Craniofacial Surgery



*Thomas Imahiyerobo, MD*

Being born with a cleft lip and cleft palate is tough for a child. This congenital defect leaves a hole or split in the lip or the roof of the mouth, making it difficult to eat or speak. Ear infections are common as are hearing and dental problems. This condition affects roughly 1 in 700 children and many need specialized care to reach

their full potential.

“Much can be accomplished with surgery and even more by a multidisciplinary team like ours that follows these children as they grow, responding to their needs,” says **Dr. Thomas Imahiyerobo**, Co-Director Craniofacial Surgery, NYP/Morgan Stanley Children's Hospital. “With our comprehensive and highly personalized approach, we are recognized leaders in this field.”

The hospital recently hosted its first annual Cleft Lip and Palate Team Day for patients, families, and friends, giving them an opportunity to share their inspirational stories and experiences. The program featured a children's lunch, a DJ, face painting, a photo booth and many speakers, including Patricia Simon, R.N., author of *Smile with Simon*, an illustrated children's book that helps children with cleft palate understand their condition and develop the resiliency needed to cope with it in the years ahead.

“It takes an enormous amount of courage for parents to hand their child over to a physician, whom they've only met a few times and are probably just beginning to trust, and say, Please do surgery on my child,” says Dr. Imahiyerobo. “We want families to know that we are going to be here to help them meet their challenges head on, while providing the best possible care.” ■

*Read more about The Cleft and Craniofacial Center*

[www.nyp.org/morganstanley/clinical-services/craniofacial-center](http://www.nyp.org/morganstanley/clinical-services/craniofacial-center)

The Center is located at

NewYork-Presbyterian Morgan Stanley Children's Hospital, 161 Fort Washington Ave., Suite 511 New York, NY 10032.

To make an appointment, please call 212-305-4346



## Hernia Repair

### A Minimally Invasive Hernia Repair – Then Back to Golf for Larry Grunfeld



Larry Grunfeld

At 74, Larry Grunfeld was having a wonderful retirement, with plenty of time on the Connecticut golf course, hiking, and swimming to his heart's content. Then in early 2018, he had pain in his side while walking, and while lying down. The discomfort was so intense, he couldn't sleep. After his local physician found a hernia in his groin, Larry came to Columbia's Comprehensive Hernia Center because he wanted the best possible care. He was treated by **Dr. Yuri Novitsky**, the Center's director, and a pioneer in minimally-invasive repair that leaves patients with less pain, and little downtime.

An inguinal hernia stems from a congenital weakness or a tear in the groin. This opening may allow fatty tissue or the intestines to push through. Untreated, this type of hernia can get larger and become more painful, eventually

requiring emergency surgery.

"Though Larry's hernia was very big, his repair was pretty straightforward," says Dr. Novitsky. "I fixed it using a minimally invasive approach and made the repair with a highly porous light-weight mesh, or patch. The patch was secured using minimal fixation, meaning with the fewest possible staples--an approach we use to reduce post-operative pain. The procedure took just 45 minutes and required only 3 small incisions around the belly button." Larry went home the same afternoon.

"I felt better right away, and in a couple days, I was back to all the summer activities I enjoy," Larry says. "I knew from the moment I met Dr. Novitsky that I was in the best possible hands. He took the time to answer all my questions. I walked away really understanding how a hernia develops and knew exactly what he was going to do to fix it. That gave me a great deal of confidence." ■

### After Hernia Surgery, Daniel Borg Has a Larger Life



Daniel Borg

When he was only 4 years old, Daniel Borg was diagnosed with Crohn's disease, a debilitating condition that causes weight loss, fatigue, diarrhea, pain and cramping, and bleeding from the rectum. For Daniel, this meant a pretty challenging childhood—one marked by several operations, home schooling, and a restricted social life.

Ten years later, Daniel's pain was so intense his doctors performed an ileostomy, making an opening in his belly that allowed his body waste to pass into an external pouch. His pain disappeared and he began to feel almost like a normal teenager.

After graduating from college, Daniel worked as a teacher and moved to Colorado. In his 30's, he started vomiting and having trouble eating. "It wasn't Crohn's," he said, "For years, I had hernia after hernia after hernia in my belly. The surgeons would fix it and then the problem would come back."

A ventral hernia occurs when an organ pushes through an opening in the muscle or tissue where old incisions were made. This can be painful, and also cause an obstruction of the digestive tract, leading to risky surgical emergencies and removal of the intestines. It can also be life-threatening.

Daniel often was so dehydrated from an obstruction that he had to go to the Emergency Room but somehow he managed to complete his master's in Social Work. By age 39, however, he was so worn down by these episodes that he moved back to New York to be near his family and went on disability.

In 2007, Daniel had yet another hernia operation at a medical center on Long Island. "Almost immediately I obstructed and five days later, I had another surgery and developed a life threatening infection. Not too long after that, the hernia came back and this time, nobody wanted to operate. The surgeons said I had too many adhesions. And by now, it

wouldn't just be a matter of fixing the hernia but of repairing my abdominal wall." By age 51, Daniel was coping with the pain the best he could. He had endured 24 surgical procedures in all.

Desperate for relief, he came to Columbia's Comprehensive Hernia Center and consulted with its new director, **Dr. Yuri Novitsky**, a world renowned Hernia surgeon who is known for helping complex patients like Daniel.

By 2018, the left side of Daniel's abdomen was so distended it looked like a grapefruit. The hernia would have to be repaired, or pushed back into his belly, and a piece of mesh sewn into his abdominal wall to keep the bulge from reforming. Dr. Novitsky planned to use a newer lightweight mesh made of more porous polypropylene that is more like fishnet. This mesh material, needed to reinforce the repair, maintains its flexibility and is known to rapidly integrate into tissue to minimize pain and infections. In addition, Dr. Novitsky planned to employ his innovative technique that would also reconstruct Daniel's abdominal wall, tighten his belly, aiming for the best possible cosmetic result.

In April, Daniel's father came in from Long Island to provide support, staying on a special floor of the hospital reserved for families. "Surgery went much better and much faster than I expected," Daniel says. "No complications. And I was back home in just five days."

Now, for the first time in years, Daniel is fully engaged in life. "I feel terrific," he says. "I've been spending the summer fishing, walking on the beach, taking my dog into town, visiting friends. I have fewer problems with food --- no reactions to certain dishes anymore. My belly is flat and looks pretty good."

At 52, he's thinking of buying a business and looking forward to dating. "It's never too late," Daniel says. "Thanks to Dr. Novitsky and his team, I've got my best years ahead." ■

*The Comprehensive Hernia Center surgeons are uniquely skilled to perform both laparoscopic and robotic hernia repairs. These approaches are associated with less pain and faster recovery. Read more here [www.columbiasurgery.org/hernia](http://www.columbiasurgery.org/hernia)*

*To schedule an appointment, please call 212.305.5947*

## The Diaphragm Center:

### Giving Patients Back the Breath of Life

For most of us, breathing is a reflex, requiring little or no thought. It's something we do automatically, between 17,000 and 30,000 times a day. Yet this simple act depends upon the diaphragm, a dome-like muscle separating the chest cavity and the abdomen. When you breathe, this muscle contracts and moves downward, increasing the space around your lungs, leaving more room for them to inflate.

When the diaphragm is impaired or paralyzed, breathing becomes labored, difficult. Severely ill patients have to rely upon a ventilator, a machine that removes carbon dioxide from the body and forces oxygen into the lungs.

“There are many degrees of impairment,” says **Dr. Mark Ginsburg**, co-director of the Diaphragm Center at NYP/Columbia with **Dr. Keith Brenner**. “Patients with paralysis on both sides of diaphragmatic may have a 70-80 percent reduction in their lung capacity while those with paralysis one side may have a 50 percent reduction.”

The good news is that safe and minimally invasive surgical procedures can bring significant relief to those with diaphragm paralysis.

Founded in 2017, the Diaphragm Center the only program in the world dedicated to disorders of the diaphragm, a major cause of respiratory insufficiency in children and adults.

“We’ve been spreading the word, and In the past year, we have become the premier center for the treatment of diaphragm disorders,” says Dr. Ginsburg, “Our patients come from across the country and around the globe. And we help everyone struggling with this problem—from those with central sleep apnea to those on respirators after traumatic injuries, neuromuscular diseases or diaphragm impairment due to birth trauma.”



Doctors perform a video-assisted thoracoscopic procedure (VATS).

The Diaphragm Center uses VATS (video-assisted thoracic surgery) and robotic techniques to correct diaphragm disorders. Recovery time is minimal. Operating time is less than an hour and most patients go home the next day.

- A procedure called a minimally-invasive plication tightens the diaphragm and sets it in a lower position, greatly increasing the resting size of the lungs. After this procedure, most patients experience a 35% improvement in lung function. When exercising, they are less short of breath and have greater reserves.
- The insertion of a phrenic pacemaker can help a smaller group of patients—paraplegics and victims of traumatic injury breathe without the aid of a respirator, by signaling the diaphragm to contract and make space for the lungs. This type of surgery is also helpful for patients suffering from multiple sclerosis, muscular dystrophy or ALS (Lou Gehrig’s disease.)

“The majority of our patients benefit significantly from plication.” Says Dr. Ginsburg. “They come to us because they

are short of breath. They can’t lie down or sleep in a prone position, or bend down to tie their shoes without struggling. Often just one side of their diaphragm is affected. The good news is that we can provide a cure with a relatively simple surgery, with little down time, and give these people back the breath of life.”

#### After Plication, a Rock Singer Hits the Road Again

Charlie Adams was always active—lifting weights, running, and even hiking across the United States. But his passion lies in music. Charlie, an energetic 71, is a singer who has fronted many rock bands over the years. In 2015, he started to get winded easily and soon his health and his musical career were suffering.

Charlie first started to notice the change during his workouts. After a few reps with weights or a few minutes on the treadmill, he was struggling for air. Soon even getting up and down the stairs was challenging.



Charlie Adams

Being able to finish a phrase is essential for a singer and that was becoming difficult, too. “I would have to stop in the middle of a verse to catch my breath,” says Charlie.

A pulmonologist told Charlie he was only using 50 percent of his lung capacity due to a problem with his phrenic nerve. The phrenic nerve signals the diaphragm to contract and move downward, making room for the lungs to fill with air. That same nerve also signals the diaphragm to expand upward, forcing air out of the lungs. In addition to struggling for breath, people who have trouble exhaling fully are at risk for lung infections like pneumonia.

Charlie’s pulmonologist couldn’t correct this condition. So he suggested management techniques and prescribed an inhaler, and for the next two years, Charlie stopped singing the songs he loved.

In 2017, he came to Dr. Mark Ginsburg, director of Columbia’s Diaphragm Center and the world’s leading authority on minimally-invasive procedures to restore the function of the phrenic nerve.

In an operation called a plication, Dr. Ginsburg was able to tighten Charlie’s diaphragm, leaving his lungs more room to expand. Charlie noticed a difference immediately, and over time he continued to improve. Three months after surgery, Charlie had a 25 percent increase in breathing capacity, and at six months, he had a 40 percent increase.

Today, Charlie is using 80 percent of his total lung capacity--not far off from healthy adults his age, who tend to be using roughly 90 percent.

The best part? Before the year was out, Charlie could sing again. He performed his first show a year after surgery and has since released a brand new album, playing guitar as well. “I was a little nervous,” he says, “but the songs came easy.” ■

[Learn about The Diaphragm Center here](#)

[For an appointment, please call 212.305.3408 or visit \[www.columbiasurgery.org/diaphragm\]\(http://www.columbiasurgery.org/diaphragm\)](#)

**Still can’t find what you are looking for?**

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