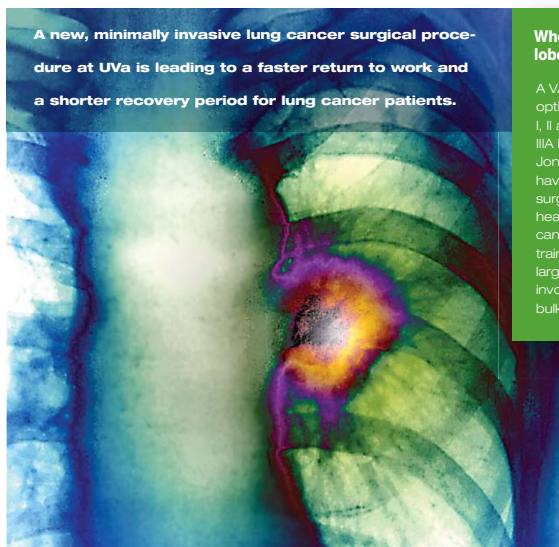




Lung Cancer Patients Benefit from Minimally Invasive Surgery



A new, minimally invasive lung cancer surgical procedure at UVa is leading to a faster return to work and a shorter recovery period for lung cancer patients.

Who is an ideal VATS lobectomy candidate?

A VATS lobectomy is an option for most Stage I, II and selected Stage IIIA lung cancer patients, Jones says. Patients who have had previous chest surgery, including lung or heart surgery, can still be candidates. Relative contraindications are very large tumors, chest wall involvement, and large, bulky lymph nodes.

Unlike traditional lobectomies, a retractor – the major source of post-operative pain – is not inserted to spread the ribs and access the lung. During a VATS lobectomy, a surgeon instead makes two or three small incisions, none larger than about 5 cm, to remove the tumor, helping reduce patients' recovery time and the length of their

inpatient stays. A typical VATS lobectomy patient has an inpatient stay of three days, compared to five or six days for a patient who has the open procedure.

Patients at UVa benefit from a multidisciplinary approach at the state's largest lung cancer surgery program, which last year performed more than 900 major thoracic procedures and is generally able to see new patient referrals within seven days. UVa's mortality index was also below the state average for patients treated between mid-2005 and mid-2006.

Lung cancer patients are seen in a single day and assessed by a multidisciplinary team, including medical oncologists, radiation oncologists, thoracic surgeons, pathologists and radiologists, who review lab and radiology studies together and plan a multidisciplinary treatment course.

To refer a patient for an assessment for a VATS lobectomy, call UVa Physician Direct at 800-552-3723.

UVa is one of the most experienced hospitals in the Mid-Atlantic in performing video-assisted thoracic surgery (VATS), using the procedure for 50 to 60 percent of its lung cancer surgeries, says David R. Jones, M.D., UVa's chief of general thoracic surgery. VATS can also be used for other procedures, such as removing mediastinal tumors and cysts, benign esophageal tumors, thymectomies for small tumors and myasthenia gravis.

"There has been a push toward minimally invasive thoracic surgery and UVa has been at the leading edge of this advance," says Jones, who has been performing VATS lobectomies since 2002. "We do the same cancer operation, but with a smaller incision," Jones says. The result: an equally effective oncologic procedure with much less patient discomfort.

Advanced Monitoring Supports Accurate Sleep Apnea Diagnoses

Approximately 18 million Americans have sleep apnea, according to the National Heart, Blood, and Lung Institute. However, many don't know they have the disorder, which can lead to more serious health problems including heart attack and stroke.

Patients at UVa's Sleep Disorders Center benefit from leading-edge technology and multidisciplinary diagnosis and treatment. In particular, a focus on accurate diagnostics has allowed UVa physicians to understand and address root causes of sleep apnea.

The eight-bed sleep lab's state-of-the-art monitoring equipment allows UVa's treatment team to more accurately measure breathing, says Paul Suratt, M.D. While the equipment at most labs measures temperature changes during breathing, Suratt says, UVa's equipment is better able to measure gradations in breathing changes, air flow and the number of times a patient stops breathing during sleep. This helps

detect hypopneas and apneas, helping better diagnose breathing problems.

UVa offers all treatment options, says Steve Koenig, M.D. These include continuous positive airway pressure devices – which fill a patient's airway with pressurized air to keep their throat from collapsing during sleep – dental devices and surgery. A respiratory therapist is available during the day to help patients adjust to the CPAP device, which can be uncomfortable.

Sleep apnea patient Jeff Cutruzzola says the sleep lab "felt like home. The technicians were extremely kind and helpful. They explained the entire process and answered all my questions. It was a very smooth process." Patient comfort was reflected in the most recent patient satisfaction ratings from Press Ganey, which rated the center in the 97th percentile for overall care compared to other hospitals in the American Hospital Association's Region 3, which includes Virginia.

WHEN TO REFER

While sleep apnea is more common in overweight patients, they aren't the only people diagnosed with sleep apnea. "I have a few marathon runners

- who have sleep apnea," says Koenig. Patients should be referred if:
- They are excessively sleepy during the day or wake up unrefreshed
 - They stop breathing during sleep
 - They wake up choking or snoring or snore nightly
 - They have hypertension and obesity
 - They have large necks (larger than 17 inches for men and 14.5 inches for women)

To refer a patient to the UVa Sleep Disorders Center, call UVa Physician Direct at 800-552-3723.

UVA HEALTH SYSTEM

CONTINUING MEDICAL EDUCATION

Spring/Summer 2007 Conferences

All conferences offered in Charlottesville, Va., unless otherwise noted.

- ▶ **2007 MORPHOGENESIS AND REGENERATIVE MEDICINE SYMPOSIUM**
Newcomb Hall
University of Virginia, May 23-25
- ▶ **LARS LESKELL LECTURES**
Jordan Hall/Boar's Head Inn
May 24-25
- ▶ **UVA REUNIONS WEEKEND**
Newcomb Hall
University of Virginia, June 1-2
- ▶ **31ST ANNUAL FITZ-HUGH SYMPOSIUM: GETTING BACK TO BASICS IN OTOLARYNGOLOGY-HEAD & NECK SURGERY**
Jordan Hall Conference Center
UVa Health System, June 6-8
- ▶ **WEB-BASED CME ACTIVITIES**
Cardiovascular medicine:
www.cardioivillage.com

Cervical cancer and HPV:
www.cxscreening.org

For information on additional conferences, call 434-924-5310 or visit www.cmevillage.com.

Accreditation: The UVa School of Medicine is accredited by the Accreditation Council for Continuing Medical Education. Specific information about the designated number of AMA Category 1 credits for conferences can be obtained by calling 434-924-5310.