

PARTNERS IN PEDIATRICS

A QUARTERLY PUBLICATION FOR PHYSICIANS

VOLUME 5 ISSUE 2

PHOENIX CHILDREN'S CENTER FOR CANCER AND BLOOD DISORDERS BUILDING AN IMPRESSIVE TEAM



PHOENIX CHILDREN'S HOSPITAL ANNOUNCES AFFILIATION WITH
UNIVERSITY OF ARIZONA COLLEGE OF MEDICINE – PHOENIX

PEDIATRIC ORTHOPAEDIC SURGEON AND COLLEAGUES FROM
PHOENIX CHILDREN'S PRESENT AT AMERICAN ACADEMY OF
PEDIATRICS NATIONAL CONFERENCE

PHOENIX CHILDREN'S GROWS
GASTROENTEROLOGY DEPARTMENT

PARTNERS IN PEDIATRICS

Partners in Pediatrics welcomes story suggestions and feedback from all providers.

Please contact:
Mark Tsuchiya (602) 546-5859, mtsuchiya@phoenixchildrens.com

Contributors:
Murray Pollack, MD, MBA
Kristin Ditsch

Photography:
Brad Armstrong Photography
Ben Arnold Photography
Aaron Aslanian Photography
Tim Lanterman
Brad Reed Photography

Design:
Susan Zobott

Editorial Board:
Murray M. Pollack, MD, MBA – *Chief Medical and Academic Officer*
Robert L. Meyer – *President and CEO*
Debra Stevens – *Director, Marketing/Communications*
Lynda Christel – *Manager, Physician Relations*
Jessica Catlin – *Manager, Marketing/Communications*
Mark Tsuchiya – *Senior Communications Specialist*

Phoenix Children’s Hospital
1919 East Thomas Road
Phoenix, AZ 85016
(602) 546-1000
www.phoenixchildrens.com

ON THE COVER:
Roberta Adams, MD (left), director of the Center for Cancer and Blood Disorder’s Blood and Marrow Transplant Program, shares a laugh and smile with a young patient as she conducts an examination.



NOTE FROM THE CHIEF MEDICAL OFFICER



As our state contemplates the steps it will take to get our economy churning again, I’d like to bring forth one ingredient to add into the mix: educating more physicians in Arizona so they stay in Arizona, a state that is severely underserved by physicians, including pediatricians.

While the national average is 299 physicians/100,000 people, Arizona has only 213/100,000, and we are not narrowing the gap. More important to the general health of our children, there are only 1.0 primary care physicians per 1,000 persons in Arizona, compared to an average of 1.2/1,000 in the rest of the country. In other words, we are 17 percent below the average in the U.S. in primary care physicians like pediatricians. (Data sources: The Henry J. Kaiser Family Foundation, www.statehealthfacts.org; U.S. Census Bureau. http://www.census.gov/compendia/statab/rankings.html; www.statemaster.com; AMA Physician Masterfile)

One of the reasons physicians do not stay in Arizona is our lack of post-residency training opportunities (called fellowships); as physicians leave the state to gain more training they become attached to their new communities and choose to launch their careers there.

Of all pediatric fellowships, approximately 85 percent are east of the Mississippi, in states where the pediatric population is stagnant or shrinking. Yet it is here – in the sunbelt states – where the pediatric population is growing rapidly and outpacing the growth of both general pediatricians and pediatric subspecialists.

As the largest pediatric training program in Arizona, Phoenix Children’s Hospital has a clearly-defined challenge: We need to increase both the numbers of physicians we train and the numbers of these physicians who stay in Arizona, especially those devoted to primary care.

These are not “quick fix” problems. It is not easy to expand training slots in this economic climate. The state cutbacks in graduate medical education (GME) funds are significant and directly affect how many physicians we can train. And, it takes a lot of work – not to mention financial backing – to develop new fellowship training programs. A medical school partner is an important part of training pediatric specialists.

Phoenix Children’s took a significant step in that direction recently by signing an affiliation agreement with the University of Arizona College of Medicine – Phoenix (read the story on page 4). Under the agreement, the College of Medicine – Phoenix designates the Hospital as its principal pediatric affiliate while the Hospital names the university as its principal academic affiliate.

The affiliation opens many doors for physician training here in Arizona. It makes Phoenix a more attractive location for medical students. It offers more opportunities for residents. It will open up opportunities for scholarly work needed in training new pediatric specialists. And it enables us to recruit top physician scientists, who are key in building fellowship training programs for specialty physicians as well as providing the highest quality care our children deserve.

During the course of our expansion, Phoenix Children’s has had to recruit many of our pediatric specialists from out of state. But this new affiliation allows us to build a better future by enabling us to train and retain our own top talent, right here in Arizona. It’s just one part of solving our physician shortage problem and helping our economy get back on track, but we hope it inspires others to place a high value on the investment in the physicians of tomorrow. It’s good for our children, and it’s good for Arizona.

Sincerely,

Murray M. Pollack, MD, MBA
Chief Medical and Academic Officer
Phoenix Children’s Hospital

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Phoenix Children's President and CEO Robert L. Meyer (left) and University of Arizona College of Medicine – Phoenix Dean Stuart Flynn, MD, signed the agreement that established the formal affiliation between the two institutions at an August event.

EXPANDED PARTNERSHIP WITH UNIVERSITY OF ARIZONA WILL ELEVATE RESEARCH, TRAINING IN ARIZONA

The University of Arizona College of Medicine – Phoenix and Phoenix Children's Hospital announced on Friday, Aug. 6, 2010, an agreement to expand their affiliation, a move designed in part to address Arizona's severe shortage of pediatricians.

Under the agreement, the College of Medicine – Phoenix designates the Hospital as its principal pediatric clinical affiliate while the Hospital names the university as its principal academic affiliate.

“Our formal affiliation positions the College of Medicine – Phoenix and Phoenix Children's Hospital as one of the nation's

premier sites for pediatric healthcare, training, and research,” said Stuart Flynn, MD, dean of the College of Medicine – Phoenix. “We are creating a dynamic partnership to bring the top physicians and scientists to make lifesaving discoveries and expertly train the next generation of pediatricians.”

The Hospital is in the midst of a \$588 million expansion that will make Phoenix Children's one of the largest freestanding children's hospitals in the nation. As part of that expansion, Phoenix Children's has spent the last four years recruiting internationally renowned clinical leaders who are now guiding the Hospital's clinical, research, and educational offerings. The affiliation with the University of Arizona is the next logical step for the Hospital, whose vision is to be a leader – regionally, nationally, and internationally – in pediatric healthcare.

The partnership is expected to add medical residencies to a state desperately in need of them. Arizona's ratio of medical residents to its population is among the lowest in the United States.

“The Hospital will now be able to educate its very own top talent and continue to recruit some of the best and brightest minds in



UA's Vice President for Health Affairs William M. Crist addresses Phoenix Children's executives and physicians at a recent reception.

pediatric medicine,” noted Robert L. Meyer, president and CEO of Phoenix Children's.

The two entities also plan to partner on a variety of research projects aimed at preventing, curing, and treating childhood diseases and injuries.

“Phoenix Children's has long been conducting cutting-edge research, and this affiliation with the University of Arizona – and the tremendous amount of research infrastructure that comes along with it – will allow us to jointly take pediatric research in Arizona to the next level,” said Meyer.

At the announcement on the campus of the University of Arizona College of Medicine – Phoenix, Meyer and Flynn signed the agreement in front of a crowd of U of A faculty and administration, Phoenix Children's physicians and staff, and members of the Hospital's current class of medical residents.

“We are creating a dynamic partnership to bring the top physicians and scientists to make lifesaving discoveries and expertly train the next generation of pediatricians.”

- Stuart Flynn, MD, dean, University of Arizona College of Medicine – Phoenix

HOSPITAL BRIEFS

TWO PHOENIX CHILDREN'S PHYSICIANS EARN COVETED ARIZONA BIOMEDICAL RESEARCH COMMISSION GRANTS

P. David Adelson, MD, FACS, FAAP, Director of the Hospital's Children's Neuroscience Institute, and Jeffrey Buchhalter, MD, PhD, chief of the Division of Neurology, have earned grants from the Arizona Biomedical Research Commission.

Dr. Adelson, in partnership with co-investigator Dr. Stephen Tillery of ASU, received \$457,000 over three years to support his study, "A Practical Brain-Computer Interface Based on Micro-ECoG Technology." This grant will support further development of computer technology that can help patients with neurological disorders use the power of their brain to create movement.

Dr. Buchhalter's grant totals \$300,000 over three years to fund his study, "Implementation of a Research Patient Data Repository at PCH," on which he's partnered with co-investigators Robert Greenes, Bob Sarnecki, Douglas Fridsma, and Craig Parker.

Of the 109 proposals submitted, only 21 were funded.

PCH REOPERATION RATE FOR POSTERIOR SPINAL FUSION SURGERY HALF THE NATIONAL AVERAGE



Lee Segal, MD, Herbert J. Louis, MD, Endowed Chair of Pediatric Orthopaedic Surgery, Chief, Center for Pediatric Orthopaedic Surgery



M. Wade Shrader, MD



Greg White, MD



Judson Karlen, MD

Hospital pediatric orthopaedic surgeon M. Wade Shrader, MD, who collaborated with colleagues Lee Segal, MD, Greg White, MD, and Judson Karlen, MD, on the study, "Reoperation Rate After Posterior Spinal Fusion for Adolescent Idiopathic Scoliosis," presented his team's findings in October at the 2010 American Academy of Pediatrics National Conference and Exhibition in San Francisco.

Segmental instrumentation for posterior spinal fusion (PSF) for adolescent idiopathic scoliosis (AIS) has a high success rate for deformity correction and patient satisfaction. Reoperation for infection, hardware prominence, or pseudarthrosis can negatively affect patients and their quality of life. Previous studies from several institutions reported a reoperation rate as high as 13 percent.

This study determined the reoperation rate at Phoenix Children's for 121 patients who underwent PSF for AIS. The mean follow-up was five years (range, two to 10 years), and the mean age at the time of surgery was 15 (range, 11 to 16). The Phoenix Children's reoperation rate for PSF for AIS was only 6.5 percent, half of the national average. For more information, please call (602) 241-0276.

In other news related to the Center for Pediatric Orthopaedic Surgery, Segal and Shrader recently had three papers published in peer-review journals:

- Thomson JD, Segal LS.: Orthopedic management of spina bifida. *Developmental Disabilities Research Reviews*. 2010;16(1):96-103.
- Zibis AH, Shrader MW, Segal LS. Case Report: Mesenchymal chondrosarcoma of the lumbar spine in a child. *Clinical Orthopaedics and Related Research*. 2010.
- Sucato DJ, Tulchin K, Shrader MW, DeLaRocha A, Gist T, Sheu G. Gait, hip strength and functional outcomes after a Ganz periacetabular osteotomy for adolescent hip dysplasia. *Journal of Pediatric Orthopaedics*. 2010; 30(4):344-50.

For more information on any of these papers, please call (602) 241-0276.

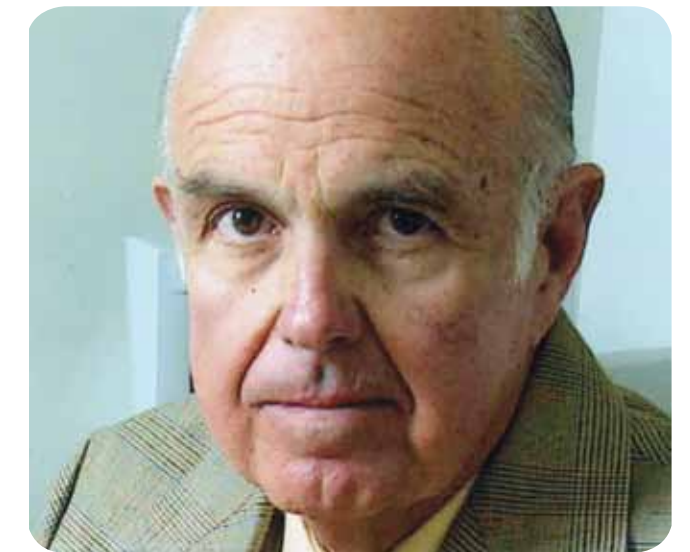
HOSPITAL SURGEON, BOARD MEMBERS RECOGNIZED AT ANNUAL HEALTHCARE HEROS AWARDS BANQUET

Phoenix Children's was well represented at the recent 2010 Health Care Heroes Awards, presented by the *Phoenix Business Journal*. Pediatric surgeon Stuart Lacey, MD, was named a finalist in the "Physician" category for his outstanding teaching expertise, dedication to his patients, and as a mentor and role model to his colleagues at the Valley's teaching hospitals. He's active on several boards, has received teaching awards from several universities and Mayo Clinic, and serves as a clinical professor of surgery at the University of Arizona. Additionally, he's been included in "Best Doctors of America" since 1996.

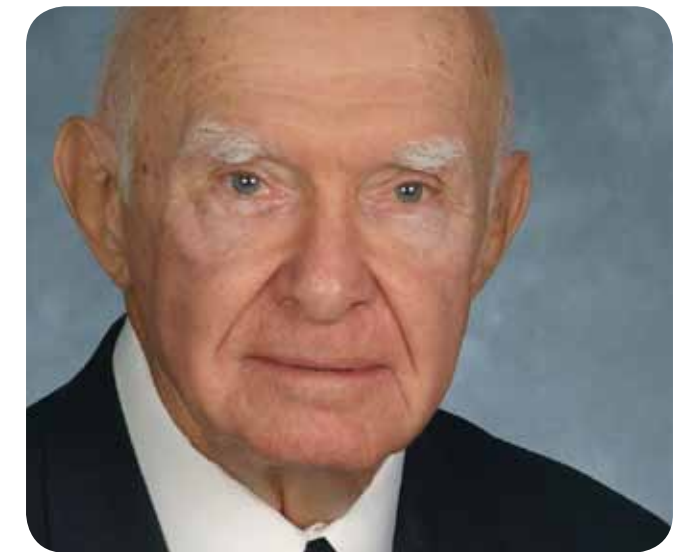
Orme Lewis and Edwin Van Brunt, longtime board members of Phoenix Children's, won in the "Volunteer" category. The two men were recognized for their collective 52 years of service. Both were founding Phoenix Children's board members, providing leadership to what was then a fledgling hospital. Both have contributed far more than anyone would expect of a volunteer; their passion never waned. Both are retiring from active board service, but not before seeing through the completion of the planning and design phases of Phoenix Children's latest expansion. Their contributions and dedicated service are found throughout the Hospital. Without their efforts as board members and volunteers, Phoenix Children's would not be what it is today.



Stuart Lacey, MD



Orme Lewis



Edwin Van Brunt

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<http://www.youtube.com>
Search word: PhxChildrensHospital



This could very well be an image of a mother comforting her child. But in this case it's Pooja Hingorani, MD, a physician with the Center for Cancer and Blood Disorders, comforting a crying patient.

PHOENIX CHILDREN'S CENTER FOR CANCER AND BLOOD DISORDERS BUILDING AN IMPRESSIVE TEAM

SEVEN SUBSPECIALTY
PROGRAMS REPRESENT
CENTER'S FOUNDATION

DEDICATED TEAM COMMITTED TO PROVIDING STATE-OF-THE-ART CARE

Abby Fraser has always had an outgoing, engaging personality. She makes friends wherever she goes, can't stop laughing, and is one of the loudest in the room.

It was those qualities Abby would lean on when in February 2007 she was diagnosed with alveolar rhabdomyosarcoma, a rare soft-tissue cancer. It was in the roof of her mouth.

"We had no idea [something was wrong]," says Abby's father Bruce Fraser. "She discovered it when her girl scout troop was working on a health badge; they were looking in each others' mouths with a flashlight, and they noticed Abby had a weird bump."

An ear, nose, and throat physician referred the family to the Center for Cancer and Blood Disorders (CCBD) at Phoenix Children's Hospital.

"The impact of the diagnosis on our family was more than anyone can imagine," Bruce says. "After the initial shock went away, we really went into action mode and did what we had to so that Abby didn't get sick from cold or flu and made her as comfortable as possible."

Under the care of Masayo Watanabe, MD, director of the CCBD's Solid Tumor Program, Abby underwent 42 weeks of chemotherapy and four weeks of radiation treatment. She lost all her hair – even her eyelashes.



Center for Cancer and Blood Disorders patient Kyler Kessler (left) gets some encouragement from Kathy Hinkle, RN, BSN, while undergoing treatment.

What Abby and her family didn't lose during treatment was hope. Throughout her recovery, an entire team of clinical professionals helped the Frasers as they battled.

"We feel Abby received the best care she could have possibly gotten, but we also felt we needed to take an active role in that care as well," Bruce says. "When we were at the clinic, the doctors and nurses helped us with this process and helped us learn what was normal for Abby."

Bruce's feeling was spot on.

"The patient and the family are the biggest part of the team," Watanabe says. "Without them telling us what their needs are, we can't serve them correctly, so I make sure they understand they are the captain and coach of the team."

The experts at CCBD join the team, too, bringing to every diagnosis the comprehensive, multidisciplinary care required to combat these diseases.

That same dedicated, multidisciplinary team approach guides the work of the Center for Cancer and Blood Disorders' six other subspecialty programs, too.

"Each program has people who are focused on that particular disease who are also networking around the country with similar hematologists and oncologists who focus on those diseases," says Michael Etzl, MD, division chief of the Center for Cancer and Blood Disorders and director of the Jaydie Lynn King Neuro-oncology Program.

Every subspecialty clinic boasts its own dedicated team of physicians, nurse practitioners, physician assistants, nurses, social workers, Child Life specialists, and other clinical professionals who provide compassionate, family-centered care in a setting especially for children and their loved ones.

"We feel Abby received the best care she could have possibly gotten, but we also felt we needed to take an active role in that care as well. When we were at the clinic, the doctors and nurses helped us with this process and helped us learn what was normal for Abby."

- Bruce Fraser, Abby's father

CCBD is the state's only fully dedicated treatment facility of its kind, offering seven comprehensive, multidisciplinary programs all in one location, including:

- Blood and Marrow Transplant Program
- Jaydie Lynn King Neuro-oncology Program
- Hematology Program
- Solid Tumor Program
- Survivor Program
- Early Drug Development Program
- Liquid Tumor Program

PROGRAM HAS SEEN SIGNIFICANT GROWTH

Five years ago, CCBD consisted of seven physicians and two pediatric nurse practitioners. Today, the division employs 17 physicians, five pediatric nurse practitioners, and one physician assistant.

“Over the past few years we’ve developed several subspecialty programs and rounded out the care in each of those programs to include not just physicians,

“Our goal is to be recognized nationally and internationally as one of the top pediatric hematology/oncology programs in the country.”

- Michael Etzl, MD, division chief of the Center for Cancer and Blood Disorders and director of the Jaydie Lynn King Neuro-oncology Program

but nurses, social workers, and other support staff who possess expertise in the diagnosis, treatment, and latest research of the major pediatric hematologic and oncologic diseases,” Etzl says.

Recently, that expertise expanded to the East Valley, where three of the Center's physicians regularly see patients at the Hospital's Specialty and Urgent Care – East Valley Center in Mesa.

“The increased presence in the East Valley will allow us to improve communication and coordination of care with referring physicians,” Etzl says. “What's more, patients will now have access to the breadth of our disease-focused expertise, the collective experience of all of our physicians, and the latest clinical and research treatment options without having to travel far from home.”

The physician recruitment, program development, and expanding care area are for good reason.

“Our goal is to be recognized nationally and internationally as one of the top pediatric hematology/oncology programs in the country,” Etzl says.

RESEARCH, COLLABORATIONS, KEY COMPONENTS TO SUCCESS

In order to give children and families the best hope for cure, CCBD has built partnerships with a variety of pediatric cancer research groups, relationships that bring to the Hospital the most cutting-edge cancer-fighting drugs and experimental therapies.

One of those groups is the Pediatric Oncology Experimental Therapeutics Investigation Consortium (POETIC), an association that includes 10 leading pediatric cancer centers in North America that conducts Phase I clinical trials. Phoenix Children's is the only location in

SUBSPECIALTY PROGRAM HIGHLIGHTS AND CLINICAL PROVIDERS

Blood and Marrow Transplant Program

- Largest pediatric blood and marrow transplant program in the state
- As many as 20 transplants completed last year alone

Jaydie Lynn King Neuro-oncology Program

- The only program in the state conducting both clinical and translational research in pediatric brain tumors
- Cases are presented to the Tumor Board, a group composed of physicians from a wide spectrum of specialty areas who identify the best course of treatment for each patient

Hematology Program

- Provides dedicated, pediatric-focused clinics for children with bleeding and clotting disorders, including hemophilia, thrombosis, and Sickle cell disease
- Thrombosis Clinic currently is developing a multidisciplinary approach to caring for patients throughout several divisions of the Hospital

Solid Tumor Program

- Program offers a multidisciplinary, disease-focused approach to the treatment of individual subtypes of tumors such as neuroblastomas, kidney tumors, liver tumors, and sarcomas, offering each patient the latest treatments for specific disease types

Survivor Program

- Offers multidisciplinary care for survivors of childhood cancer, regardless of where the patient was originally treated
- Team works collaboratively with primary care providers to develop recommendations for ongoing treatment

Early Drug Development Program

- Evaluates the most promising new therapies for childhood cancer
- Program offers Phase I, II, and III clinical trials, giving patients access to the most cutting-edge agents available

Liquid Tumor Program

- Only comprehensive program in the state offering treatment expertise for children with acute lymphoblastic leukemia, acute myelogenous leukemia, lymphoma, and histiocytosis
- Utilizes the most up-to-date clinical trials, research collaborations, and evidence-based practices currently available to treat children diagnosed with a wide variety of liquid tumors

CLINICAL PROVIDERS

Blood and Marrow Transplant Program

Roberta Adams, MD, Director
Dorothea Douglas, MD
Dana Salzberg, MD
Niketa Shah, MD
Kristen Beebe, PA
Kyrie Hospodar, CPNP

Jaydie Lynn King Neuro-oncology Program

Michael Etzl, MD, Director
Amy Rosenfeld, MD
Britt Olson, CPNP

Hematology Program

Christine Knoll, MD, Director
Francis Eshun, MD
Michael Henry, MD
Galit Rosen, MD
Sanjay Shah, MD
Britt Olson, CPNP
Emily Parenteau, FNP

Survivor Program

Galit Rosen, MD, Director
Britt Olson, CPNP

Early Drug Development Program

Jessica Boklan, MD, Director
Francis Eshun, MD
Michael Etzl, MD
Pooja Hingorani, MD
Amy Rosenfeld, MD

Liquid Tumor Program

Jessica Boklan, MD, Co-director
Dana Salzberg, MD, Co-director
Meenakshi Goyal-Khemka, MD
Michael Henry, MD
Galit Rosen, MD
Victoria Land, CPNP
Britt Olson, CPNP

the three-state region of Arizona, Nevada, and New Mexico where these cutting-edge treatments are available.

“You cannot deliver state-of-the-art, cutting-edge pediatric hematology/oncology patient care without being involved in clinical research,” Etzl says.

Additionally, the Center has relationships with Children's Oncology Group (COG), the Clinical Trials Network, Translational Genomics Research Institute, University of Arizona, Arizona State University, and Mayo Clinic, among others.

“We've been developing all phases of clinical research including early drug development and expanding our collaborations both within and outside of Arizona,” Etzl says. “The next step is to develop our own basic and translational research programs.”

These collaborations, which include increased interaction with most of the other expanding divisions at Phoenix Children's, have resulted in robust

research opportunities ultimately benefitting patients and their families.

COLLECTION OF SUBSPECIALTY HEMATOLOGY AND ONCOLOGY CARE UNIQUE TO THE VALLEY

Marketers often use descriptors such as “largest of its kind” and “only one of its kind” when pitching their products to consumers. For many, it's just hyperbole.

But at Phoenix Children's Center for Cancer and Blood Disorders, using those phrases to paint the picture of the subspecialty programs comprising the center is not only justified, it gets downright redundant.

The Blood and Marrow Transplant Program is the largest of its kind in the state, as is the Survivor Program.

The Jaydie Lynn King Neuro-oncology Program is Arizona's only comprehensive, multidisciplinary treatment center for children diagnosed



Francis Eshun, MD (left), an expert in the treatment of sickle cell disease, contributes his talents to the Hematology, Solid Tumor, and Early Drug Development Programs.

with central nervous system tumors, a distinction shared by the Solid Tumor and Liquid Tumor Programs.

The center's Hematology Program is the only one of its kind in the state conducting hematology research, among other unique designations.

"We are one of only two federally funded Hemophilia Treatment Centers in Arizona caring for patients with bleeding disorders and thrombosis/thrombophilia," says Christine Knoll, MD, director of the program.

The Early Drug Development Program rounds out the care by offering access to Phase I trials – the only location in Arizona where those cutting-edge therapies are offered to pediatric patients.

COMMUNICATION WITH COMMUNITY PHYSICIANS IMPORTANT TO ONGOING CARE

According to Etzl, most – if not all – patients are referred to the center. It's a priority for Etzl and the other CCBP practitioners to maintain positive relationships with primary care providers.

"It's important that we keep the referring physicians informed about the clinical course of their patients and work together to ensure care is coordinated and transparent," he says. "When patients complete their treatment here the referring physicians will continue to treat other health problems, so good communication is vital and something we continue to work on."

Galit Rosen, MD, director of the Survivor Program, agrees.



Abby Fraser (pictured on the left during treatment) underwent 42 weeks of chemotherapy and four weeks of radiation to treat her alveolar rhabdomyosarcoma, which was discovered on the roof of her mouth. Today, Abby is an outgoing 14-year-old with a bright future.

"We're always sure community providers receive a comprehensive written review of our consultation and they are critical collaborators in the medical management of our survivors," she says.

30 MONTHS OF REMISSION

Today, Abby is a 14-year-old freshman at Perry High School in Gilbert. Sometimes the after-effects of treatment still show up, but her father says she's doing really well.

"We are two-and-half years in remission, and we have another two-and-half years to go before we can say she's cured," Bruce says.

"Certainly there is some level of fear when we have scans every four months, but we are optimistic about reaching the five-year mark."

Seeing a patient like Abby doing well is what it's all about, says neuro-oncologist Amy Rosenfeld, MD.

"It means a lot," she says. "It's often hard to prescribe medications you know will make a patient sick and where you won't see the effects immediately. But when patients get better from interventions you implemented, it's very rewarding and makes it all worthwhile."

For Abby's family, they wouldn't have sought treatment anywhere else. Why? Because it wasn't just Abby who experienced Phoenix Children's special brand of care, it was the entire family.

"Abby received the best treatment we think she could have received anywhere," Bruce says. "But the staff recognizes that it is not just one child that is sick – it's the whole family."



PHOENIX CHILDREN'S GROWS GASTROENTEROLOGY DEPARTMENT



Phoenix Children's Gastroenterologist Dana Ursea, MD, FAAP, examines 7-year-old Angelica Quiroz-Popoca who is being treated for dysphagia, oral aspiration, and G-tube dependency.

DIVISION ADDS EXPERTISE AND TECHNOLOGY TO MEET VALLEY'S EVER-EXPANDING GI NEEDS

When Tayler Renshaw began to feel ill in August 2008, she had no idea her stomach cramping and body aches would be diagnosed as Crohn's disease, a form of inflammatory bowel disease (IBD).

The then 16-year-old member of her high school's varsity soccer team was forced to leave the playing field to focus on healing and learning how to live with her new diagnosis.

After several months of intense treatment at Phoenix Children's Hospital under the care of pediatric gastroenterologist Dana Ursea, MD, FAAP, Tayler was back to normal health and ready to play soccer her senior year at Xavier College Preparatory in Phoenix.

"Dr. Ursea has been extremely helpful and quick to react to my needs," Tayler said. "She has been very involved in getting to know my complete health condition," adding the multidisciplinary care she received and the expertise of Ursea helped get her back on the soccer field faster.

LITTLE CHANGES MAKE A BIG DIFFERENCE

Since his appointment as Division Chief of Gastroenterology (GI), Gary Silber, MD, has focused on improving the quality of care offered to Phoenix Children's GI patients like Tayler.

Having worked tirelessly to achieve that goal, Silber has utilized new technologies and increased staff size to meet the needs of pediatric GI patients in Arizona.

"In the past, it could take up to three months to see a physician in our GI division," Silber said. "We've worked hard to recruit the very best specialists and to offer services at our satellite offices, solutions that have dramatically improved access to care."

Under Silber's direction, the GI Division has added five physicians in the last three years. The addition of these physicians – along with the division's expansion to three satellite locations in the East Valley, Northwest Valley, and Scottsdale – has increased patient access and reduced wait time. The division also has instituted technological advances to offer less invasive and faster treatment options.



Phoenix Children's Gastroenterology Division Chief Gary Silber, MD, has worked to recruit gastroenterologists to meet the growing demand across the Valley for the division's services.

“In the past, it could take up to three months to see a physician in our GI division. We've worked hard to recruit the very best specialists and to offer services at our satellite offices, solutions that have dramatically improved access to care.”

- Gary Silber, MD, division chief, Gastroenterology

“Here at Phoenix Children's, with so many subspecialists that address very unique needs, we are able to help children from all over the state,” described Mark McOmber, MD, a pediatric gastroenterologist and endoscopic retrograde cholangiopancreatography (ERCP) expert. “At the same time, we can each work together as a team of gastroenterologists, pulmonologists, neurologists, and more to treat the complete child.”

Combining the efforts of specialists from several divisions to develop an expert multidisciplinary team to heal the whole child is a philosophy Silber adopted. It's become the strategy of the entire division.

“There are usually multiple factors to GI diseases,” Silber explains. “The GI tract has so many different variables that it requires a multidisciplinary approach. If you don't look at the problem with a multidisciplinary approach, you're probably missing something.”

NEW PROGRAMS OFFER UNPARALLELED EXPERTISE TO PATIENTS

Taking his goal of providing premium quality care beyond hiring the best physicians, Silber worked to create three new programs to extend the expertise the division offers its patients.

With four physicians available every Monday afternoon in the IBD Clinic, the division serves the growing population of children with this diagnosis. The clinic allows patients to be seen by physicians, nutritionists, social workers, and research assistants who pair patients with appropriate studies to offer the most advanced treatments available.

The division's new Feeding and Swallowing Clinic provides a multidisciplinary analysis of why a child is unable to eat, with the goal of moving a child to oral feeding. The clinic is associated with the Occupational Therapy division of the Hospital's Frances H. McClelland Rehabilitation Program. With access to nutritionists and physical therapists, the clinic provides nutritional and rehabilitation assistance to kids trying to return to normal eating habits.

Among the most significant improvements to the division has been the addition of McOmber, who has helped develop an ERCP program.

“The ability to have Dr. McOmber available almost 24-7 allows people to be seen much more quickly for a growing problem,” explains Silber.

As one of fewer than two dozen physicians in the country with the training to complete pediatric ERCP procedures, McOmber provides clinical expertise patients won't find anywhere else in the state.

“ERCP allows me to evaluate and treat the small drainage tubes of the liver and pancreas,” says McOmber. “Because of their smaller anatomy, this procedure is especially challenging in young children.

“The number of cases that have avoided unneeded surgery and been treated by ERCP is more than twice what was previously anticipated. I am proud that we can offer this at Phoenix Children's Hospital.”

CUTTING-EDGE RESEARCH PROVIDES NEW TREATMENT OPTIONS

To provide the most innovative and advanced treatment opportunities to their patients, the division has invested an enormous amount of resources to bring the most beneficial research programs to the Hospital.

The division just completed a program with the Food and Drug Administration (FDA) allowing patients to receive pediatric options to new pharmaceuticals for eosinophilic esophagitis, a condition that results in inflammation in the esophagus.

“We've been involved in a multitude of pharmaceutical studies,” Silber said. “Participating allows our patients to receive the latest pharmaceuticals in pediatric dosages.”

PHOENIX CHILDREN'S GASTROENTEROLOGY CLINIC LOCATIONS

Phoenix Children's Hospital – Main Campus
1919 East Thomas Road
Phoenix, AZ 85016

Specialty and Urgent Care – East Valley Center
5131 East Southern Avenue
Mesa, AZ 85206

Specialty and Urgent Care – Northwest Valley Center
20325 North 51st Avenue, Suite 116
Phoenix, AZ 85308

Phoenix Children's Specialty Care – Scottsdale
10210 North 92nd Street, #101
Scottsdale, AZ 85260

For more information call (602) 546-0940.

Phoenix Children's was in the top tier of patient participation in the eosinophilic esophagitis study, and the division is optimistic as it begins participating in another study that provides pediatric dosages of a new IBD pharmaceutical treatment. By incorporating these extensive opportunities for patients in the division, the team has broadened its standard of pediatric GI care in the Valley.

“Our pediatric specialization allows our patients to be treated in an age-appropriate fashion from the moment they walk into the Hospital,” says Silber. “I am very proud of the care our physicians, nurses, and nutritionists provide to patients of all ages throughout the state, regardless of the complexity of the gastrointestinal condition.”

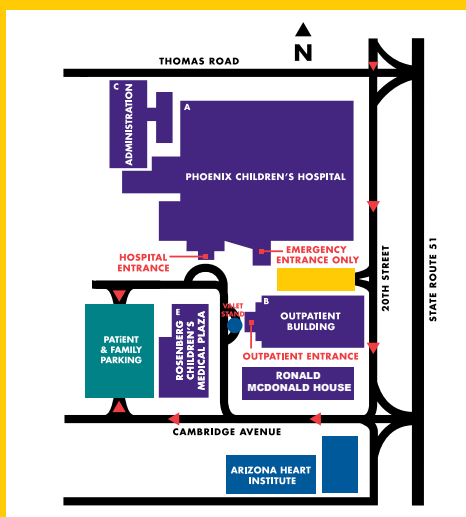
CROHN'S WON'T STOP TAYLER

The expertise and care Tayler received at Phoenix Children's helped her feel better, learn to manage her Crohn's, and get back to playing soccer. With her Crohn's under control, she won the PCH Sports Medicine Fan Fave Comeback Student Athlete Award in April, an achievement that earned her a \$2,000 scholarship.

Tayler started her freshman year this fall at Occidental College in Los Angeles, Calif., and plays soccer at the collegiate level. She plans to continue treatment at Phoenix Children's when she is home.

“The care I've received at Phoenix Children's keeps me as healthy as possible,” Renshaw said. “It helps me deal with Crohn's so I can continue to be focused on my studies and continue to play soccer.”

One Call Physician Assistance Line (602) 546-DOCS (3627)



PHOENIX CHILDREN'S HOSPITAL

1919 East Thomas Road
Phoenix, AZ 85016-7710
(602) 546-1000
www.phoenixchildrens.com

Entrance: Turn South on 20th Street. Go to Cambridge.
Turn right to Parking Entrance.

Parking: There is no charge for visitor parking. Free Valet service for patients and families is available in front of the Outpatient (B) Building. Families and visitors may park in the existing garage on the east side of level two or anywhere on levels three through five.

There is no entrance to the Hospital off Thomas Road.



PHOENIX CHILDREN'S SPECIALTY CARE CENTERS

Phoenix Children's Julie and Tim Louis NICU

1111 East McDowell Road
Phoenix, AZ 85006
Phone: (602) 546-4900 Fax: (602) 546-4910

Phoenix Children's Specialty Care - Scottsdale

10210 North 92nd Street, Suite 101
Scottsdale, AZ 85258
Phone: (480) 314-1144 Fax: (480) 314-9752

Phoenix Children's Specialty and Urgent Care - Northwest Valley Center

20325 North 51st Avenue, Suite 116
Phoenix, AZ 85308
Phone: (623) 972-KIDS (5437) Fax: (623) 492-9421

Phoenix Children's Specialty and Urgent Care - East Valley Center

5131 East Southern Avenue
Mesa, AZ 85206
Phone: (480) 833-KIDS (5437) Fax: (480) 833-9349

Phoenix Children's Center for Pediatric Orthopaedic Surgery

1641 East Osborn Road, Suite 6
Phoenix, AZ 85016
Phone: (602) 241-0276 Fax: (602) 241-0292