Liver Transplant Fellows

Two transplant fellows join our program, which is approved by the Texas Medical Board and the American Society of Transplant Surgeons, this summer. Over the next two years our faculty will provide them with extensive hands-on experience in all aspects of the management of end-stage liver disease (ESLD) surgical patients.

JACFRANZ GUITEAU, MD

Dr. Jacfranz Guiteau earned his BA in psychology with a minor in mathematics in May, 2002 from Georgetown University. He then went on to attend medical school at Emory University School of Medicine where he was designated a Dean’s Scholar. Originally considering a career in infectious diseases, he found his calling in his very first clinical rotation when he was assigned to the gastrointestinal surgical oncology service at Emory University Hospital. There he developed a strong interest in surgery and, more specifically, the surgical management of both benign and malignant hepatobiliary pathology. Pursuing that interest, Dr. Guiteau sought opportunities to enhance his experience including case reports and presentations at national meetings in hepatobiliary related topics. He graduated from medical school in May, 2006 and entered his general surgery residency here at Baylor College of Medicine where he is currently completing his last year of residency training. During his time at BCM, he spent two years in the lab under his mentors, Dr. John Goss and Dr. Christine O’Mahony. Their research focused on liver transplant outcomes as well as basic science research involving carcinogenesis in hepatocellular carcinoma. Along with Dr. Ronald Cotton, he helped develop a comprehensive liver tissue repository in collaboration with the BCM Human Genome Sequencing Center. Dr. Guiteau is joining the Division of Abdominal Transplantation as a transplant fellow in July, 2013.

RONALD COTTON, MD

A native Houstonian, Dr. Ronald Cotton graduated valedictorian from the Michael E. DeBakey High School for Health Professions in 1998. Upon graduation, he entered the Houston Premedical Academy, an 8-year BS/MD program housed at the University of Houston and Baylor College of Medicine. Ronald completed a bachelor’s of science in biology summa cum laude in 2002 and medical doctorate in 2006. After finishing medical school, he entered his general surgery residency at BCM. During his residency, Dr. Cotton completed a two-year research fellowship at the BCM Liver, Kidney and Pancreas Center and the BCM Human Genome Sequencing Center. There, his research interest centered on developing a high-quality tissue repository, and using these samples to detect genomic differences between Hepatitis B-, Hepatitis C-, and non-viral associated hepatocellular carcinoma. His research

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Ross W. Shepherd, MD, FRACP, FRCP

Dr. Shepherd, Professor of Pediatrics in BCM’s Department of Pediatrics, Section of Pediatric Gastroenterology, Hepatology and Nutrition joined Texas Children’s Liver Center as Medical Director July 1, 2012. He is Professor Emeritus of Pediatrics at Washington University School of Medicine and St. Louis Children’s Hospital, where he was formerly Medical Director of Pediatric Hepatology and Liver Transplantation, and Professor Emeritus at the University of Queensland Medical School, where he was Director of Gastroenterology, Hepatology and Nutrition at the Royal Children’s Hospital in Brisbane, Australia.

Dr. Shepherd has garnered a national and international reputation as a leader in pediatric gastroenterology, hepatology and nutrition, with particular focus on pediatric liver transplantation. His clinical and academic interests have focused on pediatric liver diseases and transplantation, and nutritional disorders in children where his experience spans more than 25 years. He was a member of the pioneering team that performed the world’s first successful living donor liver transplant from a mother to her child in 1989, which paved the way for development of segmental liver transplants for small children. He has contributed chapters to several major texts on pediatric liver disease and liver surgery, co-authored over 150 original research papers and has given over 200 invited lectures. He has been active in the Studies in Pediatric Liver Transplantation (SPLIT) group, and has served on the pediatric subcommittee of the United Network of Organ Sharing, and on the editorial board of Pediatric Transplantation. Major goals of Dr. Shepherd’s research is to improve outcomes of infants with Biliary Atresia (a major indication for liver transplantation in children), and outcomes from pediatric liver transplantation.

Dr. Shepherd joins the TCH Liver Center at a time which marks the expansion of its clinical service, which is now the largest pediatric liver transplant program in the United States, and arguably the world having performed more than 39 transplants in 2012, with 20 children on the waiting list. The clinical outcomes of the TCH liver transplant program exceeds national standards for patient and graft survival according to the Scientific Registry of Transplant Recipients, even with increasing volumes of patients and transplants. The survival rate is statistically significantly higher than expected. The multidisciplinary team which provides these services has comprehensive experience for all indications for liver transplantation in children, including biliary atresia, liver tumors, metabolic diseases, and acute liver failure. An important aspect of care particularly with respect to the use of segmental adult donor livers involves close cooperation between the BCM Liver, Kidney and Pancreas Center with highly trained and experienced physicians and state-of-the-art technology. A recent focus of our program is a seamless approach to early diagnosis of disease, and medical and surgical management of patients listed for transplantation for biliary atresia.

TCH Liver Center

This past year, Texas Children’s Hospital performed more pediatric liver transplants than any other liver transplant center in the country.

Fellows continued from page 1

has resulted in numerous peer-reviewed publication as well as local, national and international presentations. Dr. Cotton has received numerous clinical accolades during his residency, including being named a 2012 Raleigh Ross Scholar by the Texas Surgical Society. He will complete his residency in June 2013. In addition to his professional obligations, Dr. Cotton maintains a wide variety of community and charitable involvements. He is married to Dr. Amber Callis, fellow Michael E. DeBakey High School for Health Professions alumni and practicing pediatric dentist in Sugarland. In their spare time, they enjoy travel, exercise, music, food, and wine.
Annual Report

BCM Liver Transplant and Hepatobiliary Activity 2012

This past year we have increased our transplant volume, while maintaining higher than expected outcomes. We continue to deliver results at or above national averages according to the Scientific Registry of Transplant Recipients (SRTR). For 2012, Texas Children’s Transplant Services retained a 100% 1-year survival rate for both grafts and patients (under age 18), while attaining the distinction of being the largest program for children in the country.

*Based on hepatology patient visits by BCM faculty.*

Outcomes: Patient and Graft Survival

St. Luke’s Episcopal Hospital

1 month and 1 year SRTR survival data based on transplants performed 01/01/2009-06/30/2011; 3-year survival data based on transplants performed 07/01/2006-12/31/2008.

Renal Transplant Activity 2012

Christine O’Mahony, MD, was named Director of the Section of Renal Transplant Surgery at BCM under the direction of Abdominal Transplant chief John Goss, MD in 2012. Dr. O’Mahony’s dual responsibilities within the Department and at our affiliate hospitals will enable her to maximize her efforts to further growth and development of the Renal Transplant Program at Baylor College of Medicine.

Dr. O’Mahony is an Assistant Professor of Surgery at BCM and Surgical Director of Kidney Transplantation at Texas Children’s Hospital. She joined the Department in 2004 after completing her fellowship at NYU Medical Center/SUNY Downstate New York and surgery residency at UT-San Antonio. Since that time, she has contributed significantly to the program and has earned the broad respect of her colleagues and collaborators.

Her appointment comes at a pivotal moment in our history as we are poised to begin a kidney transplant program at the Michael E. DeBakey VA Medical Center, which she will direct as well.

BCM Transplant Volume


<table>
<thead>
<tr>
<th>Hospital/Medical Center</th>
<th>Liver Transplants</th>
<th>Renal Transplants</th>
</tr>
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<tbody>
<tr>
<td>St. Luke’s Episcopal Hospital</td>
<td>57</td>
<td>91</td>
</tr>
<tr>
<td>Texas Children’s Hospital</td>
<td>39</td>
<td>23</td>
</tr>
<tr>
<td>Michael E. DeBakey VA Medical Center</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>105</strong></td>
<td><strong>114</strong></td>
</tr>
</tbody>
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*CAD = Cadaveric donor, LRD = Living related donor.*
Outcomes: Patient and Graft Survival

St. Luke’s Episcopal Hospital

Pancreas Transplant Activity 2012

St. Luke’s Episcopal Hospital Transplant Volume
July 1, 2012 - Dec. 31, 2012

SPK  7
PAK  1
SPULK  1
SPLK  1
Total Transplants  10

1 month and 1 year SRTR survival data based on transplants performed 01/01/2009-06/30/2011; 3-year survival data based on transplants performed 07/01/2006-12/31/2008.

Houston VA Expands Surgery Services with New Kidney Transplant Center

HOUSTON – Last week, the Michael E. DeBakey VA Medical Center (MEDVAMC) received final approval from the Department of Veterans Affairs to establish a Kidney Transplant Center. There are currently only four centers within VA that perform kidney transplantation for Veterans (Iowa, Tennessee, Pennsylvania, and Oregon).

“Currently, we are training and hiring staff, analyzing patient data for transplant suitability, and putting medical processes in place. We believe we will perform our first kidney transplant in 12 to 18 months,” said Samir S. Awad, MD, MEDVAMC Operative Care Line executive, who is listed as one of the best doctors in the nation in the field of critical care medicine. “Once our program matures, we estimate our Kidney Transplant Center will perform 40 to 60 transplants a year, limited only by the availability of organs.”

With the prevalence of chronic kidney disease among Veterans, an increasing number are being referred to the existing VA kidney transplant centers. There are an estimated 8,000 Veterans with chronic kidney disease within 400 miles of Houston; 75 Veterans are currently on waiting lists at local community hospitals. In addition to southeast Texas, the MEDVAMC’s new Kidney Transplant Center will serve Veterans throughout the southeastern United States.

Kidney transplant candidates must undergo detailed physical, laboratory and psychological evaluations to ensure proper selection and therapy. Tests are done to confirm the diagnosis, and to assess the candidate’s ability to tolerate surgery.

“A couple of the key reasons the Michael E. DeBakey VA Medical Center was selected to become a Kidney Transplant Center are our outstanding surgery program, our talented, top-notch staff, and our successful Liver Transplant Program,” said Adam C. Walmus, MHA, MA, FACHE, MEDVAMC director.

Managed by the surgical director of the MEDVAMC Liver Transplant Program, John A. Goss, MD, FACS, the goal of the new Kidney Transplant Center is to provide the same high level of care to the Veteran population. Goss has performed many surgical “firsts” in Houston,
including the first split liver adult and pediatric transplants, the first adult living donor liver transplant, the first dual organ lung-liver transplant, and the first dual organ heart-liver transplant. He is also a professor of Surgery at Baylor College of Medicine, chief of the Division of Abdominal Transplantation at Baylor College of Medicine, and the program director of the liver transplant programs at St. Luke’s Episcopal Hospital, The Methodist Hospital, and Texas Children’s Hospital.

The MEDVAMC launched its Liver Transplant Program in 2007; 44 successful transplantations have been performed to date without complications. Many patients with liver disease also develop renal failure as their disease progresses. Having the ability to perform kidney transplantation eliminates the need to refer Veterans facing this added complication to another medical facility; thus, improving overall quality of care.

The VA National Transplant Program started providing solid organ transplants to Veterans in 1961. Thomas E. Starzl, M.D. performed VA’s first kidney transplant at the VA medical center in Denver. Since then, the VA National Transplant Program has expanded services to provide Veterans with heart transplant services in 1980, bone marrow in 1982, liver in 1989, and lung in 1991. Most transplants are performed in specific VA medical centers across the country. VA also utilizes several VA sharing agreements with University affiliates and local emergency contracts for critical heart and liver cases.

Survival Rates Exceed National Averages for Houston VA Liver Transplant Program

HOUSTON (Jan. 10, 2013) – The survival rates for patients receiving liver transplants at the Michael E. DeBakey VA Medical Center (MEDVAMC) exceed national averages at statistically significant levels according to the Scientific Registry of Transplant Recipients.

“The Michael E. DeBakey VA Medical Center’s program for the treatment of liver disease is among the most advanced in the country,” said Samir S. Awad, MD, Operative Care Line executive and an associate professor in the Michael E. DeBakey Department of Surgery at Baylor College of Medicine. “Given that we provide excellent care for Veterans with end-stage liver disease preoperatively and postoperatively, the ability to meet their transplantation surgical needs is a tremendous advantage.”

According to the Scientific Registry of Transplant Recipients, the MEDVAMC Liver Transplant Program’s one-year patient survival rate is 97.06 percent, compared to an expected survival rate of 90.30 percent and the national hospital average of 89.53 percent. The program’s three-year patient survival rate is 83.33 percent, compared to an expected survival rate of 73.93 percent and the national hospital average of 79.85 percent. The expected survival rate reflects the health condition of the program’s transplant patients.

Besides being the busiest surgery program in the Department of Veterans Affairs, MEDVAMC is well-known for tackling the most complex surgical cases, with patients usually older and in poorer health than other hospitals. Featuring advanced robotic surgery technology, the hospital’s surgery department was the first VA to use a computerized, operating room real-time location system to improve the effectiveness and efficiency of day-of-surgery operations by directly coordinating and supporting surgeons, anesthesiologists, nurses, patients, family members, and related support personnel and activities.

“We see these patients first, and they are sicker than you can imagine,” said Blase A. Carabello, MD, Medical Care Line executive and the Moncrief Professor of Medicine and vice chairman in the Department of Medicine at Baylor College of Medicine. “Our extraordinary team of doctors, nurses, and support personnel truly give these patients a second chance at life.”

The MEDVAMC transplant team, led by Liver Transplant Surgical Director John A. Goss, MD and

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Honors and Awards

**JACQUELINE A. LAPPIN, MD**, was selected to serve on Aetna’s Abdominal Solid Organ Transplant Physician Advisory Committee, Nov. 2012.

Dr. Lappin was also listed in *Texas Monthly* as a 2012 Texas Super Doctor in the Transplant Surgery category.

**JOHN A. GOSS, MD**, was listed in *Texas Monthly* as a 2012 Texas Super Doctor in the Transplant Surgery category. Dr. Goss was also listed in America’s Top Doctors 2012 - *Castle Connolly Medical Ltd.*, and Top Doctor 2012, *US News & World Report*.

**RISE STRIBLING, MD**, was voted by her Peers, “The Top 300 Physicians in Houston” in Hepatology by her peers, *Health & Fitness Sports Magazine’s Doctors’ Choice*, Fall 2012.

**PRASUN JALAL, MD**


**CHARLES GIA PHAN, MD**

“HBV - Treatment and Clinical Trials,” 3rd Annual AASLD Highlights Conference, Texas Gulf Coast Gastroenterological Society, Houston, TX, December 1, 2012.

**GAGAN SOOD, MD**


**NORMAN SUSSMAN, MD**


**JOHN M. VIERLING, MD**


**CHRISTINE A. O’MAHONY, MD**

“Pediatric Kidney Transplantation,” Michael E. DeBakey Department of Surgery Grand Rounds, Baylor College of Medicine, Houston, TX, December 19, 2012.

Meetings and Presentations

**JOHN A. GOSS, MD**


**F. BLAINE HOLLINGER, MD**

“Anti-Viral Therapy for Chronic Hepatitis B: Sustained Viral Suppression & Disease Improvement,” Hepatology/Liver Transplantation Conference, Baylor College of Medicine, Houston, TX, November 19, 2012.

“HBV - Epidemiology and Prevention,” 3rd Annual AASLD Highlights Conference, Texas Gulf Coast Gastroenterological Society, Houston, TX, December 1, 2012.


**KHOZEMA HUSSAIN, MD**

Publications


Abstracts


Continued on page 8


**VA Liver Transplant Program**

Transplant Hepatologist Khozema Hussain, MD, includes a full range of patient care and support personnel, and all are committed to achieving better-than-expected survival rates, according to Adam C. Walmus, MHA, MA, FACHE, Medical Center Director.

“Our outstanding surgery program, our talented, top-notch staff, and our successful Liver Transplant Program were three of the reasons the DeBakey VA was recently approved by the Department of Veterans Affairs to establish a Kidney Transplant Center,” said J. Kalavar, MD, Medical Center Chief of Staff. “We constantly strive to provide Veterans the best health care anywhere.”

The MEDVAMC Liver Transplant Program began in 2007 and performed its 50th procedure on November 19, 2012. Transplants are the most advanced treatment for patients with severe, end-stage disease with no other effective, available medical or surgical treatments, according to clinicians.

Liver transplant candidates must undergo detailed physical, laboratory, and psychological evaluations to ensure proper selection and therapy. Tests are done to confirm the diagnosis of end-stage liver disease, to rule out other potential treatments, and to assess the candidate’s ability to tolerate surgery.

*Courtesy Bobbi Gruner, Michael E. DeBakey VA Medical Center*
Donate Life Texas

DONATE LIFE TEXAS, a nonprofit corporation, has been created with the support of the state’s three organ procurement organizations (OPOs). Donate Life Texas is now responsible for managing the state’s organ, tissue, and eye donor registry—the Glenda Dawson Donate Life - Texas Registry—in an effort to increase the number of Texans who commit to donation. State Representative Glenda Dawson, a kidney transplant recipient herself, led the effort to create the registry before her passing in 2006. Individuals who wish to be an organ/tissue donor no longer need to fill out a donor card or have a sticker affixed to their license; they can simply register online at www.donatelifetexas.org.