Head and Neck Cancer (HNC) has seen recent advances in the understanding of the disease on a biological and genetic level. Translating this into meaningful patient benefit will require integrated teams of clinicians and scientists committed to working together to bridge the gap between scientific insights and unmet clinical needs. The Department of Otolaryngology – Head and Neck Surgery has spearheaded the development of a world-class Head and Neck Cancer Program at BCM by focusing on three critical areas: strategic recruitment, translational research, and care of head and neck cancer patients.

**STRATEGIC RECRUITMENT.**

We have been extremely fortunate to attract a number of talented faculty to support critical program areas. **Andrew T. Huang, MD**, recently recruited from the Medical University of South Carolina, brings expertise in microvascular reconstruction (“free flaps”) and ablative and minimally-invasive surgery. **Mitchell J. Frederick, PhD**, an expert in cancer genomics, was recruited from MD Anderson Cancer Center to develop a program in molecular biology and genomics of head and neck cancer. **Vlad C. Sandulache, MD, PhD**, who recently completed a Head and Neck Surgical Oncology fellowship at MD Anderson Cancer Center, has established a laboratory focused on cancer metabolism, and will spearhead the development of minimally-invasive/robot-assisted surgery for the Head and Neck Cancer Program at BCM. **Hoda J. Badr, PhD**, with a primary appointment in the Department of Medicine, Section of Health Services and a secondary appointment in Otolaryngology is an expert on patient outcomes and psychosocial aspects of head and neck and other cancers. Finally, **Yohannes T. Ghebre, PhD, FAHA**, based in the Department of Radiation Oncology.

Greetings.

As fall foliage gives way to bare trees and Houston Holiday décor is replaced with Super Bowl LI accoutrements, we hope the start of 2018 finds you in good health and in hopeful spirits. One of our favorite fall activities is participation at the annual American Academy Otolaryngology-Head & Neck Surgery meeting. We were well represented this year by faculty and residents at the San Diego event. We are especially proud to announce that Dr. Daniel C. Chelius, Jr (BCM Class 2005/Resident Class 2010) was elected Chair Elect for the Young Physicians Section of AAO-HNS. Danny joined the faculty in July 2015 and has become a great asset to the pediatric and head and neck sections of the practice. Locally, he...
HEAD AND NECK SURGERY AT THE MICHAEL E. DEBAKEY VA CENTER

VLAD C. SANDULACHE, MD, PHD
Assistant Professor
Department of Otolaryngology
Head and Neck Surgery

The Michael E. DeBakey VA Medical Center serves one of the largest veteran populations in the country. Under the leadership of Robert B. Parke, MD, the Otolaryngology Head and Neck service line is the busiest practice in the entire VA system with over 5000 unique patient encounters per year and 300 operative cases annually. The MEDVAMC supports one of the most robust head and neck cancer multidisciplinary tumor boards in the Texas Medical Center. Our team includes surgical, radiation and medical oncologists dedicated to delivering state of the art care to head and neck cancer patients. Other team members include practitioners from pathology, neuroradiology, prosthodontics and speech pathology.

Caring for veterans with head and neck cancer requires not only excellent oncologic outcomes, but also restoration of function and quality of life. MEDVAMC speech pathologists provide a wide range of inpatient and outpatient specialty services, including evaluation and management of complex swallowing and communication disorders associated with head and neck cancer and its treatment. Intensive swallowing rehabilitation is often initiated prior to treatment for patients with advanced disease. Preventative interventions for managing dysphagia are implemented when indicated. Clinical swallowing evaluations and videofluoroscopic evaluations of swallowing are performed on a daily basis by the group and fiberoptic endoscopic swallowing evaluations are performed in collaboration with ENT. Speech pathology practice at the MEDVAMC embraces an interdisciplinary approach and patients and family members are considered integral members of the team.

Management of patients after laryngectomy and tracheoesophageal puncture comprises a large portion of the MEDVAMC speech pathology caseload. A recent local initiative has brought together the MEDVAMC SLP group with speech pathology colleagues in the Texas Medical Center to help create a new support group for individuals who have undergone total laryngectomy. The Texas Medical Center Laryngectomee Support Group met for the first time in mid-September, 2016.

MESSAGE FROM CHAIR
CONTD FROM PAGE 2

serves as President of the Houston Otolaryngology Society. Dr. Chelius is only one of many of our alumni actively involved at the national level.

Adding to the regular commitments of faculty, residents and staff this time of year are the residency recruitment efforts. We have received over 300 applications for our five first-year residency positions. Under the direction of Dr. Krista Olson, Associate Program Director (BCM Class 1997/Resident Class 2003) and Dr. K. Kelly Gallagher (BCM Class 2007) we look forward to matching the best possible candidates to our historic program.

Here at home our faculty, residents and staff continue their dedication on a daily basis to offer outstanding patient care, educate our learners and unravel the mysteries of biology that will improve healthcare. This issue presents our substantial commitment to the head and neck cancer program spearheaded by Vice Chair for Research, Dr. Andrew Sikora. Dr. Sikora and I are serving as co-directors and leading the expansion of the head and neck cancer program at Baylor College of Medicine. We are working in close collaboration with the Dan Duncan Cancer Center here at Baylor College of Medicine and the Cancer Center of Houston Methodist Hospital. We are fortunate to have recruited a talented group of clinicians and researchers situated across our affiliated hospital system to help move our program forward. We are excited to share the work of these individuals in this newsletter.

All of us in the Bobby R. Alford Department of Otolaryngology-Head and Neck Surgery would like to wish everyone a happy and healthy holiday season.

DONOVAN T. DONOVAN, M.D. FACS

L to R: Madeline Vernese, MS
Carol Stach, MA, BCS-S
Allison Starr, MS

Robert B. Parke, MD, FACS, MBA
Ben Taub Hospital – Harris Health System is the flagship of the Harris Health System and provides services to patients throughout Harris County irrespective of their insurance status. The Otolaryngology – Head and Neck Surgery services provides care for Harris County residents with head and neck cancer, including thyroid, skin, salivary gland, upper aerodigestive tract carcinomas, and sarcomas. Our patient population varies greatly with respect to socioeconomic status, educational background, racial and ethnic background which can generate unique attitudes toward cancer development and cancer care. Over the years, our multidisciplinary team has been able to generate treatment plans which are not only compliant with national and international guidelines, but can also take into account the unique patient population we serve.

The BTGH head and neck tumor board meets twice monthly to formulate an individualized treatment plan for each patient and is attended by the otolaryngology, radiation oncology, medical oncology, oral surgery, pathology, and radiology services. Recently, the BTGH tumor board was merged with the Baylor St. Luke’s Medical Center tumor board. The newly combined tumor board operates under the auspices of the Dan L. Duncan Cancer Center and allows physicians to standardize treatment among BCM institutions and maximize the range of clinical trials offered to patients at both institutions.

OMICS: A WINDOW INTO HEAD AND NECK CANCER BIOLOGY

MITCHELL J. FREDERICK, PHD
Associate Professor
Department of Otolaryngology
Head and Neck Surgery

Recent advances in sequencing technology have made it possible to identify all the genomic alterations present in any patient’s cancer, including somatic mutations, gene copy number changes, chromosomal rearrangements, epigenetic modifications, and abnormal RNA expression patterns. As a result, the genomic landscape for many cancers, including head and neck squamous cell carcinoma (HNSCC), has now been comprehensively profiled through large scale efforts of consortia like The Cancer Genome Atlas (TCGA) and by individual laboratories around the world. While a faculty member at MD Anderson was one of the first to comprehensively characterize the genomic alterations in HNSCC, and subsequent work by the HNSCC TCGA has validated many of our initial findings and identified additional cancer drivers based upon analysis of more than 500 tumor specimens. Currently, there is intense clinical interest in leveraging this new genomic data to identify novel cancer targets and to individually match drugs to the particular alterations found within a patient’s tumor, in a precision medicine approach. This has not yet happened for HNSCC due to several challenges. First, the vast majority of mutated driver genes

CONTINUED ON PAGE 5
NEW FACULTY

Hoda J. Badr, PhD

Dr. Badr joined BCM faculty in July 2016 from Icahn School of Medicine at Mount Sinai. She is a behavioral scientist whose research focuses on family adjustment during the protracted course of cancer treatment, as well as interpersonal relationship factors that influence patient and caregiver quality of life. Dr. Badr will have a primary appointment in the Department of Medicine, Section of Health Services, and a secondary appointment in Otolaryngology – Head and Neck Surgery.

Andrew T. Huang, MD

Dr. Huang joined the BCM faculty as an Assistant Professor in September 2016 and is clinically active at all BCM affiliates. Dr. Huang is a board certified otolaryngologist and head and neck oncologic surgeon specializing in microvascular free tissue transfer reconstruction and microsurgery. After graduating from the Honors Program in Medicine at the University of Miami, Florida, he completed Otolaryngology – Head and Neck Surgery residency training at Virginia Commonwealth University before participating in a three-year head and neck surgical oncology and reconstruction fellowship at the University of Texas MD Anderson Cancer Center.

Vlad C. Sandulache, MD, PhD

Dr. Sandulache joined the BCM faculty as an Assistant Professor in July 2016 after completing a fellowship in Head and Neck Surgical Oncology at the University of Texas MD Anderson Cancer Center. Dr. Sandulache is a clinician-scientist, whose primary clinical appointment is at the Michael E. DeBakey VA Medical Center. His primary clinical focus is the treatment of advanced head and neck and thyroid cancer. Dr. Sandulache’s laboratory is engaged in basic and translational research focused on developing predictive biomarkers of cancer treatment response.

CONTINUED ON PAGE 5
in HNSCC are tumor suppressors, which are inherently difficult to target. Second, the precise identity of many oncogenic drivers remains elusive because they remain hidden among hundreds of passenger genes co-amplified together in large chromosomal regions. Third, some of the oncogenic drivers identified thus far are also difficult to directly drug, or clinically targeting them has had limited success. In our Head and Neck Cancer research program, we are incorporating a number of research strategies to overcome these challenges. Through externally funded research projects we are mapping cancer driver pathways, including tumor suppressors, to find targetable co-dependencies; we are employing innovative high throughput functional shRNA screens to identify novel oncogenic targets among large regions of chromosomal copy gains; we are collaborating with computational biologists also at Baylor who employ network analysis to find drugs that will target seemingly “undruggable” genomic alterations in HNSCC. Lastly, we are creating a HNSCC Immunogenomics program that will fuse knowledge from cancer genomics with exciting advances in the field of cancer immunology, with the goal of developing broader and more effective cancer immunotherapies.

Mitchell J. Frederick, PhD

Dr. Frederick, joined BCM faculty in August 2016 from The University of Texas MD Anderson Cancer Center. While at MD Anderson, Dr. Frederick established a research focus in the field of Head and Neck Cancer Genomics. He has joined the Department of Otolaryngology as an Associate Professor, where his work will focus on understanding NOTCH1 mutations in Head and Neck Cancer, targeting other genomic drivers through functional genomics and systems biology approaches, and linking cancer immunology to cancer genomics.

Photomicrograph: Head and Neck cancer cells induced to express NOTCH1 protein tagged with a red fluorescence marker.
COMPUTER-AIDED DESIGN AND MANUFACTURING IN RECONSTRUCTION OF THE HEAD AND NECK: FROM VIRTUAL REALITY TO REALITY

ANDREW T. HUANG, MD
Assistant Professor
Department of Otolaryngology
Head and Neck Surgery

Reconstruction of segmental bony defects of the maxilla and mandible following oncologic resection has been revolutionized by the introduction of microvascular free tissue transfer. Specifically, since its first description by Hidalgo et al.\(^1\), the osteocutaneous fibula free flap (OFFF) in reconstruction of maxillary and mandibular deficits has been demonstrated to result in superior functional and aesthetic outcomes compared to pedicled flap and prosthetic reconstructions.\(^2,3\) The OFFF is ideal as a donor site for these reconstructions due to its provision of an ample length of bicortical bone, in addition to well-vascularized fasciocutaneous tissue for intraoral resurfacing.

As OFFF reconstruction of complex defects of the maxilla and mandible becomes standard practice, limitations and pitfalls in its use have been encountered. Standard OFFF procedures involve intraoperative freehand conformation of titanium reconstruction plates to the native mandible or maxilla as well as freehand tailoring of the fibula to the patient-specific defect. No matter the skill of the surgeon, this intraoperative freehand technique can result in shaping inaccuracies that not only translate to increased operative time needed for correction of these errors, but can also ultimately lead to poor bony apposition, mal-union, fracture, and negative cosmetic appearance. In addition, in cases of large tumors or trauma that distort or destroy a patient’s normal bony anatomy, the ability to construct accurate intraoperative templates can be difficult to impossible.

To remedy these issues, computer-aided design and computer-aided manufacturing (CAD/CAM) surgical protocols for OFFF reconstruction have been devised. This technique utilizes high-resolution computed tomography (CT) scan imaging of both the surgical resection site and fibula donor site to pre-operatively template and develop patient-specific models, cutting guides, and reconstruction plates during sessions termed Virtual Surgical Planning (VSP). VSP requires the cooperation of the ablative surgeon, reconstructive microsurgeon, and a biomedical engineer to precisely detail the extent of surgical resection based on CT imaging which, in turn, allows the development of specific fibular cutting guides and reconstruction plates used to exactly contour a straight fibula bone into a 3-D neomandible or neomaxilla. In cases where there is loss of native bony anatomical references needed for planning a reconstruction, a major benefit of VSP is the ability to develop fibular constructs that mirror contralateral bony landmarks, or, when all reference points are absent, develop constructs that adhere to ideal facial measurements and geometry.

Indications for CAD/CAM use are not universal yet, but at our institution it is reserved for complex bony reconstructions of the head and neck where normal anatomic landmarks are abnormal or absent, and in cases where extended length of fibula bone is required, necessitating minimization of error and discarded bone during shaping. Pre-operatively planning complex surgical defects of the maxilla and mandible allows the surgeon to develop patient-specific reconstructive plans, maximizing both functional and aesthetic outcomes while minimizing operative time and patient morbidity.

REFERENCES:
NASA, BAYLOR TEAM UP TO DISCOVER NEW WAYS TO PROTECT ASTRONAUTS

By Jeannette Jimenez posted on Baylor College of Medicine News

Baylor College of Medicine and NASA are on a mission to discover new ways to make long-duration space flight safer for astronauts through the Transitional Research Institute. The Center for Space Medicine at Baylor was awarded grant for as much as $246 million for a minimum of six years, with the potential to expand to 12 years, to develop the institute focused on finding new ideas and treatments that can benefit long-duration space flight missions, including NASA’s journey to Mars.

“This ensures Baylor’s continued leadership in space and biomedical research for the next 12 years,” said Dr. Jeffrey Sutton, director of the Center for Space Medicine. “We are honored to have the opportunity to continue our productive and strong collaboration with NASA. We view this as a privilege and understand that it is very important to our nation,” he said.

The new Translational Research Institute will establish a model that allows astronauts to take what they have learned in research laboratories and clinical trials and apply their findings to better understand the health of astronauts.

“The mission of the institute is to lead a national effort in translating cutting-edge emerging terrestrial research into applied space flight human risk mitigation strategies for exploration missions,” Sutton said.

The award will enable the Center for Space Medicine to expand its efforts and to enhance collaborations with other departments and centers across the College and with other institutions in the Texas Medical Center and beyond, Sutton said.

“We at Baylor have always been interested and productive in taking the advances of research on space and applying it to health on Earth,” said Sutton.

Klotman said, “Baylor has long been a leader in translational medicine and the ‘bench to spaceflight’ approach is a natural progression of the research we have been working on for years.”

Other partners in the new institute include MIT and California Institute of Technology.
What do you do for the Head and Neck Cancer Program?

In the Head and Neck Cancer Program, I am actively involved in regulatory and administrative aspects of clinical research. Primarily, I am involved in various ongoing clinical trials and the establishment of the Head and Neck Cancer Bio-bank (HNCBiobank) at BCM. In the HNCBiobank, my role is to facilitate the collection and to process human tissue and blood. I work on protocols and guidelines that are recommended by the regulatory authorities such as IRB and FDA.

What is your education/work background?

I graduated with a Bachelors of Pharmacy from India and a Master of Science in Medical Biology from Long Island University, New York. After graduation, I started working in Mount Sinai School of Medicine as a Basic Science Researcher and joined Baylor College of Medicine in 2014 as a Senior Clinical Research Coordinator.

Tell us about what you are currently bio banking?

In Head and Neck Cancer Bio-banking, we bank serum, buffy coat, cryopreserved lymphocyte, formalin-fixed, paraffin-embedded (FFPE) tissue, fresh and frozen tissue from all squamous cell carcinomas of head and neck, thyroid cancers, and salivary cancers.

What do you like most about working at Baylor College of Medicine?

I feel respected and motivated by my work at Baylor College of Medicine. It gives me an opportunity to work with people across the college and learn how you can work as team to cure and treat the disease.
A PHASE I/II STUDY OF METFORMIN IN COMBINATION WITH CISPLATIN AND RADIATION IN HEAD AND NECK SQUAMOUS CELL CARCINOMA

Principal Investigator:
VLAD C. SANDULACHE, MD, PHD
Department of Otolaryngology-Head and Neck Surgery

The Dan L Duncan Comprehensive Cancer Center (DLDCCC) has recently funded a phase I/II study in patients with stage III-IV squamous cell carcinoma of the pharynx and larynx treated with chemotherapy and radiation, which is expected to begin enrollment this year. First discovered in the 1920s, metformin is currently the most commonly used oral anti-diabetic medication in the world.

Over the last decade, pre-clinical studies in cancer cell lines and animal models have suggested that metformin may in fact possess anti-cancer properties when used alone or in combination with conventional chemotherapy and radiation. Retrospective studies have shown that cancer patients taking metformin during treatment exhibit improved disease response and better survival; these results were noted across various tumor types including breast, lung, colorectal and esophageal cancers. Some of the strongest evidence of anti-cancer efficacy was observed in lung cancer and head and neck cancer. This prompted NRG Oncology to initiate (2015) a randomized, multi-institutional phase II clinical trial in lung cancer patients led by investigators from the University of Texas MD Anderson Cancer Center and the Juravinski Cancer Center (Ontario, Canada). Funding from cooperative groups such as the NRG and institutions such as the DLDCCC is essential to continued progress, since repurposed-drug studies are rarely supported by the pharmaceutical industry. Successful completion of these studies has the potential to add a new weapon in the fight against cancer, one that, in contrast to most other cancer drugs, costs pennies per pill.


HEAD AND NECK CANCER CONTINUED FROM PAGE 8

CARE OF HEAD AND NECK CANCER PATIENTS.
Baylor has made a substantial commitment to expansion of the faculty practice head and neck cancer program, with plans to ultimately move head and neck surgery and medical and radiation oncology into co-localized clinical space as the Dan L Duncan Comprehensive Cancer Center expands into BCM’s new McNair Campus. Meanwhile, a new program-wide multidisciplinary tumor board active since November 2016 integrates head and neck cancer care across different BCM locations and specialties; and enhanced web presence and provider outreach will help spread the word that Baylor Head and Neck is ready to provide outstanding clinical care to Houston and beyond. As the faculty practice expands and grows, our existing multidisciplinary head and neck cancer programs at the Michael E. DeBakey Veteran’s Affairs Medical Center and Ben Taub Hospital – Harris Health System remain strong, and will benefit significantly from faculty recruitment and expansion of clinical trials.
RESIDENTS CLASS OF 2021

TOKUNBO I. AYENI, II
UC-San Francisco School of Medicine, MD
University of California – Riverside, BS Biology

SEUNGBEOM “JONATHAN” CHOI
UT Southwestern, MD
UT Austin, BS Biomedical Engineering

SAGAR G. KANSARA
UT-Medical School Houston, MD
UT-Austin, BS Biology

NATHAN R. LINDQUIST
Saint Louis – School of Medicine, MD
University of Oregon, BS Chemistry

DANIEL B. VINH
Baylor College of Medicine, MD
Stanford University, BS Chemistry

PEDIATRIC OTOLARYNGOLOGY FELLOWS

ETHAN BASSETT, MD
Thomas Jefferson University Hospital, Residency
University of Maryland, School of Medicine, MD
American University, Undergraduate

SCOTT BURGE, MD
Oklahoma University – College of Medicine, Residency
University of Texas Health Science Center-San Antonio, MD
Texas A&M University and Abilene Christian University, Undergraduate

SOK YAN TAY, MD
National University Health System, Singapore, Residency
National University of Singapore, MD
National University Singapore, Undergraduate
<table>
<thead>
<tr>
<th>STUDY TITLE</th>
<th>ELIGIBLE POPULATION</th>
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<tr>
<td><strong>THERAPEUTIC</strong></td>
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<tr>
<td>RTOG-0920 A Phase III Study of Post-Operative Radiation Therapy (IMRT) +/- Cetuximab for Locally Advanced Resected</td>
<td>Oral cavity, Oropharynx, Larynx</td>
<td>Cooperative group</td>
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<td>AMC-087: Phase I Trial of Cabozantinib (XL184) for Advanced Solid Tumors in Persons with HIV Infection</td>
<td>HIV+ patients with advanced cancer (includes HNC)</td>
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<td>HESTIA: HPV-16/18 e6/e7-specific T lymphocytes in patients with relapsed HPV-associated cancers</td>
<td>Any recurrent or refractory HPV-associated cancer</td>
<td>Investigator-initiated, adoptive cell therapy</td>
<td>Active</td>
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<td>TGF-beta Resistant Cytotoxic T-lymphocytes in Treatment of EBV-positive Nasopharyngeal Carcinoma/ RESIST-NPC</td>
<td>Relapsed/recurrent/refractory nasopharyngeal carcinoma</td>
<td>Investigator-initiated, adoptive cell therapy</td>
<td>Active</td>
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<td>A first-in-human study of repeat dosing with REGN2810, a monoclonal, fully human antibody to PD-1, as single therapy and in combination with other anti-cancer therapies, in patients with advanced malignancies</td>
<td>Advanced head and neck cancer</td>
<td>Industry-sponsored, immunotherapy</td>
<td>Active</td>
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<td>Window of opportunity trial of neoadjuvant ADXS11-001 vaccination prior to transoral resection of HPV+ oropharyngeal squamous cell carcinoma</td>
<td>HPV-related oropharynx cancer</td>
<td>FDA-sponsored, investigator-initiated, immunotherapy</td>
<td>Approved, open IRB submission pending</td>
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<td>Radiosensitizing effects of metformin combined with standard-of-care chemoradiation for head and neck squamous cell carcinoma; a prospective phase I &amp; II trial</td>
<td>Stage III-IV larynx and pharynx squamous cell carcinoma treated definitively with cisplatin and radiation</td>
<td>Investigator-initiated, drug repurposing</td>
<td>Approved, IRB submission pending</td>
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<td>A Phase 2 Randomized, Double-Blind, Placebo-Controlled Clinical Trial to Determine the Safety and Efficacy of GL-0817 for the Prevention of Recurrence in HLA-A2+ Patients with High-Risk Squamous Cell Carcinoma of the Oral Cavity</td>
<td>Locoregionally advanced oral cavity</td>
<td>Industry-sponsored, immunotherapy</td>
<td>IRB submission pending</td>
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<td>A Prospective Phase II Trial of Stereotactic Body Radiation Therapy Plus Cetuximab for Locally Recurrent, Previously</td>
<td>All head and neck sites - local recurrence of cancer previously treated with XRT</td>
<td>Investigator-initiated</td>
<td>In development</td>
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<td><strong>TISSUE BANKING / OBSERVATIONAL</strong></td>
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<td>SUPREME-HN: A Retrospective Cohort Study of PD-L1 in Recurrent and Metastatic Squamous Cell Carcinoma of Head and Neck (SCCHN)</td>
<td>Oral cavity, orpharynx, hypopharynx, larynx</td>
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<td>Neuropathic Pain in Head and Neck Cancer</td>
<td>Oral Cavity, Oropharynx, Larynx</td>
<td>NIH-sponsored</td>
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<td>NSABP-RTOG-GOG (NRG) Head and Neck Cancer Biospecimen Collection Pilot Project (HNC-BCP)</td>
<td>Advanced squamous cell carcinoma amenable to serial biopsy</td>
<td>NIH-sponsored / cooperative group</td>
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# RESEARCH

## RECENTLY AWARDED RESEARCH FUNDING

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<tr>
<th>PI</th>
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<tr>
<td>Mitchell J. Frederick, PhD</td>
<td>Translating genomic alternations into novel therapeutic targets in head and neck cancer through computational and functional approaches (U01 DE025181-01)</td>
<td>National Institutes of Health</td>
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<tr>
<td>Mitchell J. Frederick, PhD</td>
<td>Mechanisms and Consequences of NOTCH Dysfunction in Head and Neck Cancer (R01 DEA024179-01A1)</td>
<td>National Institutes of Health Research Project Grant Program</td>
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<td>Julina Ongkasuwan, MD, FAAP, FACS</td>
<td>Long term follow-up vocal fold paralysis after congenital heart surgery</td>
<td>Texas Children's Hospital Department of Surgery</td>
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<tr>
<td>Vlad C. Sandulache, MD, PhD</td>
<td>Radiosensitizing effects of metformin combined with standard-of-care chemoradiation for head and neck squamous cell carcinoma</td>
<td>Dan L. Duncan Comprehensive Cancer Center, Baylor College of Medicine</td>
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**PI: C. Kent Osborne, MD**

**Project Leader: Michael Lewis, PhD**

**Project Co-Leader: Andrew G. Sikora, MD, PhD**

**Project Co-Leader: Andrew G. Sikora, MD, PhD**

**Translational Research in Breast Cancer (SPORE) – Administrative Supplement P60CA186784**

<table>
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<th>PI: Jun Zhang, MD</th>
<th>SUPREME-HN: A Retrospective cohort study of PD-L1 in Recurrent and Metastatic squamous cell carcinoma of the head and neck.</th>
<th>AstraZeneca</th>
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<tr>
<td>Co-PI: Andrew G. Sikora, MD, PhD</td>
<td>Study of the natural biome of the sinus</td>
<td>Mayer Venture Funds</td>
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## PUBLICATIONS


CONTINUED ON PAGE 13


SELECTED ABSTRACTS


BOOK CHAPTER


AWARDS AND HONORS

1. Kenneth W. Altman, MD, PhD, FACS, Presidential Citation, American Laryngology Association 137th Annual Meeting, May 18, 2016.

2. Kenneth W. Altman, MD, PhD, FACS, President, American Laryngological Association, May 19, 2016.


6. Ellen M. Friedman MD, FACS, FAAP, Distinguished Surgeon Award, given by Texas Children’s Hospital, Department of Surgery, May 2016


PRESENTATIONS


5. Choi J, Dunskey K, Vece TJ, Chiou EH, Ongkasuwan, J, Diagnostic Flexible vs Rigid Bronchoscopy for the Assessment of Tracheomalacia. Poster Presentation at Society for Ear, Nose and Throat Advances in Children; December 2016; Orlando,
Florida.


10. **Friedman EM**, Development at the BCM of the Center for “Professionalism”. Invited Speaker, Dean’s Meeting at Boston University School of Medicine; April 12, 2016; Boston, Massachusetts.

11. **Friedman EM**, Location, Location, Location…It Matters for Foreign Bodies Too! Presented at Boston University School of Medicine; April 13, 2016; Boston, Massachusetts.

12. **Friedman EM**, Innovations in Pediatric Otolaryngology. Featured Speaker, Otolaryngology Grand Rounds at Boston University School of Medicine; April 13, 2016; Boston, Massachusetts.


17. McCabe DJ, Goldberg LS, **Altman KW**, A comparison of VH1-10 scores and Voice Grade across different levels of voice users. Presentation at The Voice Foundation 45th Annual Symposium: Care of the Professional Voice; June 1-5, 2016; Philadelphia, Pennsylvania.


PRESENTATIONS CONTINUED FROM PAGE 15


30. Yeh CY, Kourosh A, Bashir D, Ongkasuwan J, Ramirez A, Hanson I, When Post-Operative Orofacial Angiodema is not IgE or Complement-Mediated? Poster Presentation at American College of Allergy, Asthma, and Immunology Annual Scientific Meeting; November 2016; San Francisco, California.