### The CommENTator Otolaryngology - Head and Neck Surgery



# In My Corner

## Welcome to this edition of *The CommENTator.*

As we emerge from the ravages of the Covid pandemic we are looking forward to, once again, providing unfettered medical care to our patient population while continuing to educate our students and residents. These past two years have taught us that, in spite of thoughts to the contrary, we exert limited control over events that help shape our lives.

Transitions will always remain a part of the natural order. Retirements. resignations, recruitment, and retention continue to be the core of the "change process." Dr. Jeffrey Yu, one of our neurotologists, elected to continue his practice in the Pacific Northwest joining Kaiser in the Seattle area. After taking a short sabbatical from the department, Dr. Miriam Redleaf has rejoined us "in full force" bringing her impressive clinical and educational skills. Dr. Chen Lin from Ohio State and Vanderbilt joined us in September, 2022 as a Head and Neck and Reconstructive surgeon, and he has hit the ground running bringing extraordinary surgical and educational skills with him. Several

months ago, Dr. Dara Adams joined our department following completion of residency at the University of Chicago and Fellowship in Rhinology and Skull Base Surgery at Mass Eye and Ear. Dara will also be serving as the Associate Residency Program Director assisting Dr. Tatiana Dixon our talented and committed Program Director.

Our research commitment, initially overseen by Dr. Heather Weinreich, has blossomed into a highly active and integral part of our departmental activities. Research efforts have been organized on three levels to include medical students, residents, and faculty. Multiple grants applications have been submitted and significant funding has been awarded to both faculty and residents.

Dr. Redleaf is spearheading our global health initiative by establishing a fellowship training program for practicing otolaryngologists in Ethiopia while setting up a rotation for our residents to help supervise this training. She recently initiated a mobile otology clinic for the state of New Mexico and will be providing

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### In My Corner (continued)

care, together with a resident, for individuals throughout the state.

In addition, I continue to bring residents to Kenya where they get "hands on" experience taking care of local Kenyans who have minimal access to medical care. We have been supported by several of our alums, such as Dr. Lisa Brown and Dr. Nikhil Bhatt, who have generously given both of their time and financial support to make this happen.

We persist in our goals of improvement and expansion. Our new clinical home, the Specialty Care Building (SCB), was completed ahead of schedule with the first patients seen at the beginning of October 2022 with care being offered in spacious exam rooms with new and advanced equipment. The facility is "state of the art" with ambulatory OR suites, endoscopy suites, and laser and robotic capabilities. With this move, we have comfortably settled in to the EPIC EMR transition.

Furthermore, we have completed a contractual relationship to provide Otolaryngology care for several Chicagoland based hospitals currently lacking the ability to provide services. These efforts will afford us the opportunity of expanding our faculty and provide more surgical cases for our residents. Our Match was highly successful while all three of our most recent graduating residents are currently part of first-rate sub-specialty fellowships including facial plastics, rhinology, and head and neck medicine with our upcoming graduating residents having been accepted into head and neck and facial plastic fellowships.

We remain committed to diversity, equity, and inclusion with recent additions of underrepresented minorities in our residency program and a faculty ratio of women to men that is the highest in the nation. In keeping with this philosophy, Dr. Rakhi Thambi has assumed the role of Departmental Vice Chair, a position that never previously existed in the long and storied history of our department. Finally, faculty and resident wellness continue to be among our foremost priorities.

It is our hope that within the upcoming year, despite known and unknown challenges and obstacles that may us, we will be successful in improving our department and in providing health care delivery to those who we serve.

Enjoy the issue.

#### **BARRY WENIG**

MD, MPH, MBA, FACS Mario D. Mansueto, Professor & Chair

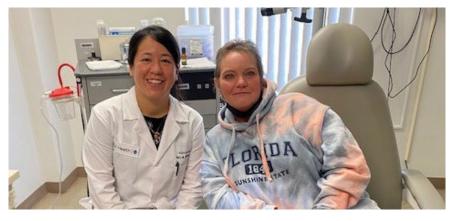


Global outreach resumed with patient care in Kenya and Ethiopia.

### Saving a Life: Fighting Invasive Fungal Sinusitis

Renea Catalano did not think much of it at first, she was feeling more tired and noticed she was bruising easily. After a few months, she noticed bruising all over her body and had some bloodwork drawn. Her results came back way out of range and was told she may have cancer. Before she is even able to see the oncologist, he calls her and refers her to UI Health and advises her to go as soon as possible. She was diagnosed with a type of blood cancer known as acute myeloid leukemia and soon began chemotherapy to treat the cancer, which also had the effect of severely suppressing her immune system, making her vulnerable to opportunistic infections that she would otherwise not be susceptible to.

Renea recalls, "About a month into chemotherapy, I started to have headaches and a lot of cheek and jaw pain." Further workup revealed she had invasive fungal sinusitis, a life-threatening infection caused by certain types of fungus that are inhaled. It begins in the nose and sinuses (the air-filled spaces around the nose) and invades and kills the body's tissue. The diagnosis is made by biopsy of the affected tissue. Left unchecked, it can spread to the eves, blood vessels, and brain and central nervous system, as quickly as a matter of days. Mortality rates are greater than 50%.



Treatment is multifaceted. Ideally, there is reversal of the patient's immunocompromised state. In Renea's case, the oncology team suspended her chemotherapy, but this reversal would take time. They also initiated systemic antifungal therapy. Complementing these medical interventions, surgical debridement of all the affected tissue is indicated. Extirpation of the fungus gives the immune system a much needed helping hand and can be curative, as long as the immune system recovers sufficiently. Dr. Lee noted, "I've seen a number of these cases, and the challenges in surgical decision-making occur when the involved tissue includes areas critical to quality-of-life like the eye and brain, where complete surgical debridement would incur at the very least significant morbidity. Fortunately, in Renea's case, we caught the infection early enough before it reached those areas, and complete surgical debridement was possible while preserving quality-of-life."

The UI Health team acted quickly to stop Renea Catalano's lifethreatening fungal infection.

Above: Dr. Lee and Renea Catalano

#### The CommENTator UI Health Otolaryngolgy (Ear, Nose, & Throat)



### Saving a Life (continued)

Renea was hospitalized for 62 days and was barely able to move during that time, didn't eat much. She's gotten a few teeth pulled out due to the fungal disease and has a hole in the roof of her mouth and is currently in the process of getting a prosthetic. She is now over half a year out from her debridement and remains free

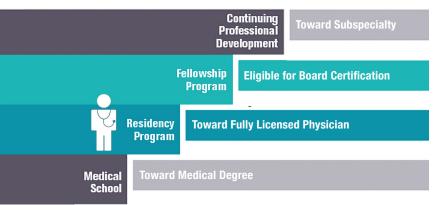
of fungal disease. She is continuing treatment for her cancer and remains under close surveillance by Dr. Lee.

"Success stories like Renea's are extremely rewarding because the mortality rates for this type of infection are so high. It is a situation in which we can sometimes really make a difference as surgeons" — Dr. Lee.

### **Q&A with the Chief Residents**

# **Q:** What does a typical day look like for you, and what are you currently working on?

A: A typical day involves 30 minutes or so of convincing myself to get up and out of bed or keep snoozing for an extra 5 minutes. I get ready and make it to the hospital in record time. The team then gets together, and we discuss the day's tasks and rounds on patients. This is followed by operating or clinic with consults sprinkled in throughout the day. Hopefully, the classic 4:45 PM consult isn't too time-consuming because if not, I am going to get a workout in; however, I am being a bit too optimistic. I typically get home with enough time to spend time with my wife, cook, listen to some music, and get ready for the next day. I am currently working on being more present for family and friends and working on having everything prepared for a smooth transition into fellowship. – Dr. Mularczyk



The day starts with rounding on our inpatient service. The days can change between operating or clinic days, but while seeing consults throughout the day. For most of my time now as chief of the service, clinical decision-making is a large part of our role as we transition to a fellow/attending, but also a large part is teaching the other residents clinical and surgical skills. — **Dr. Koo** 

Typically I show up in the morning to round on my inpatients prior to the operating room start time. I then operate throughout the day and see Residents gain additional knowledge and experience on their journey to becoming board-certified physicians.

### **Q&A** (continued)

consultations between or after cases. Some days I go to the clinic to see consultations and postoperative patients. Currently, I am working on logistically planning my move to Indianapolis for fellowship at the end of June. — **Dr. Caniglia** 

## **Q:** What are your biggest professional challenges?

A: Appropriate work-life balance has been a tough professional challenge. Sometimes I focus too much on work, and other times on my personal life. I am still figuring out how to have a consistent and healthy balance of the two with minimal impact on the other. — Dr. Mularczyk

My biggest challenges have been taking care of tough patient cases and clinical situations while also navigating difficult socioeconomic and system issues. — **Dr. Koo** 

Completing my fellowship this upcoming year and then starting a facial plastic surgery practice is my biggest upcoming challenge, but I am excited about the opportunity! – Dr. Caniglia

# **Q:** What has been your biggest achievement to date during your time at UIC/UI Health?

A: Getting married has been my biggest personal achievement. And obtaining a fellowship position in Rhinology/Skullbase Surgery has been my biggest professional achievement. — Dr. Mularczyk



Completing residency and making close friendships along the way. **– Dr. Koo** 

Marriage and completing my ENT residency will be my biggest accomplishments. — Dr. Caniglia

## **Q:** What advice would you give the new residents?

A: Everyone gets through residency. It may seem daunting, but as long as you are willing to learn and open to suggestions/advice, you will be fine. — Dr. Mularczyk

Continue to work hard, stay-open minded, and take in what you can from each rotation. But take personal time to relax, explore and take advantage of your time away from work. — **Dr. Koo** 

Work hard, keep your head down; you'll get through it! — Dr. Caniglia

Practitioners check their communications and schedules at the beginning of the day.





# Alumni Spotlight

#### **Dr. Elise Lippmann**

Residency 2014-2019

• Current role and place of employment:

In the recent past, I was clinical instructor, Division Chief of Comprehensive Otolaryngology, and Otolaryngology Director of the Mass Eye and Ear Emergency Department at Mass Eye and Ear.

I just started a new job on August 1 as an Assistant Professor at Vanderbilt University Medical Center.

 What do you get out of your residency/fellowship at UIC?

My residency at UIC prepared me to be a well-rounded clinician and surgeon. I felt very prepared to step into my role as a general otolaryngologist.

• Share a memory or story from your time as a resident:

My favorite memories are spending time with my co-residents. I was lucky to work with an amazing group of people all five years.

#### Is there a professor, faculty member, or chief resident that you felt had an impact on you?

I learned so much from all of the faculty, but Dr. Redleaf was always generous with her teaching and time.  What are your career goals? Is there an area of research or practice that you are focused on?

I want to continue to be a wellrounded clinician and help with resident education.

• Share something about your personal life:

My husband and I have a 15-monthold son, Aaron. While I love my job, seeing my family is definitely the best part of my day.



### Alumni Spotlight (continued)

#### **Dr. Matthew Mingrone**

Residency 1995-1999; Administrative Chief Resident 1998-1999

• Current role and place of employment:

Recently transitioned from/to private practice groups — San Francisco Otolaryngology Group to Sierra Nevada Ear, Nose, and Throat Group in Carson City, Nevada.

 What do you get out of your residency/fellowship at UIC?

It is my strong belief that the UIC Otolaryngology residency was based on superior training and experience. The faculty and staff during my time at the Eye and Ear Infirmary were world-class. The breadth of expertise of the faculty, combined with the clinical exposure at each of our locations, provided an educational experience that was incredibly valuable for my development as a physician and surgeon.

# • Share a memory or story from your time as a resident:

The memories of my time as a resident are incredible. Sharing the experience and training with peers above and below my year led to many times with laughter in addition to intensive work. Building the bonds of trust within these experiences are memories I will never forget. • Is there a professor, faculty member, or chief resident that you felt had an impact on you?

Richard Buckingham MD.

Dr. Buckingham's endless slides of tympanic membrane pathology made a tremendous impression on me. Before the "digital age," I remembered seeing his storage room with floor-to-ceiling Kodachrome slide boxes and realized the amount of passion and dedication that he personally put forth to create an incredible learning tool for all of us to master and feel comfortable looking at about just any tympanic membrane condition. Occasionally he would throw in a perfectly normal anatomic slide where we would mistakenly diagnose a rare condition, only to be reminded to always start with what is known before jumping to conclusions.

#### • What are your career goals? Is there an area of research or practice that you are focused on?

Over the last few years, my practice has developed a niche working with our dental colleagues who are passionate and focused on the impacts of functional nasal

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#### Alumni Spotlight (continued)

#### Dr. Matthew Mingrone (continued)

breathing and how it relates to midfacial development, sleep disorders, and orofacial pain/ temporal mandibular joint dysfunction. I have learned a great deal from my colleagues and believe that dentists have become the primary caregivers of the upper airway. They have the ability to screen and identify many patients who can benefit from a partnership with an otolaryngologist.

## • Share something about your personal life:

At this stage in my professional and personal life, my wife and I have decided to continue our journey together and have exited the Bay Area and moved to the mountains. I have joined a practice in Carson City, Nevada, and we had a house built in the mountains surrounding Lake Tahoe. We are excited about all of the possibilities a new environment and community will present to us.

#### **Department News**

#### Graduation

Congrats to our recent graduating residents!



Alex Caniglia



Elliot Koo



**Chris Mularczyk** 

#### Retirement

Kevin O'Grady retired after 30 years of service with the Department.

#### Department Recognizes Employee Service & Longtime Retiring Employees

Tatiana K. Dixon, MD Congrats on 10 years!
Camacho Ignacio Congrats on 5 years!
Ari B. Rubenfeld, MD Congrats on 15 years!
H. Steven Sims, MD Congrats on 20 years!

#### **New Location – New Facilities**

We're excited to announce that we moved just one block east to a new location in October 2022! Our new building has six floors of patient care space providing a new home for our Ear, Nose and Throat Clinic in addition to other outpatient services including an on-site pharmacy. We are thrilled to be providing care in our new state-of-the-art facility!









