New Advanced Heart Failure Center Opens

This month, after more than five years of planning, the Washington University Heart Failure Center opens at Missouri Baptist Medical Center in west St. Louis County. The center is a collaborative effort between heart failure specialists in the Cardiovascular Division and cardiologists in the BJC Medical Group, private cardiologists and cardiothoracic surgeons at Missouri Baptist.

“There was a mutual desire in the BJC HealthCare system to expand access to our board-certified heart failure specialists,” says Greg Ewald, MD, director of advanced heart failure and cardiac transplantation and clinical chief of cardiology at Washington University. “As a result, we will offer both inpatient and outpatient services at Missouri Baptist, along with access to some of the latest clinical trials for advanced heart failure patients.”

Ewald, and heart failure specialists Shane LaRue, MD, and Justin Vader, MD, will alternate inpatient responsibilities and work with nurse practitioner Valerie Emery, ANP, and Linda Wisneski, RN, to provide care in outpatient clinics. The team will work closely with interventional cardiologist David Sewall, MD, medical director of heart failure services at Missouri Baptist and a former WU cardiovascular fellow (’94) as well as the rest of the cardiologists and cardiothoracic surgeons at the hospital.

“We are particularly excited about offering more complex treatment options at our new center, such as access and follow-up care for heart transplants and LVADs,” says Sewall.

Washington University heart failure specialists currently see more than 1,200 new patients annually and implant an average of 80 LVADs, making it one of the largest volume programs in the Midwest. Last year, the team also performed 35 heart transplants. In addition to Missouri Baptist, outpatient services have been offered for the past several years in a satellite heart failure clinic in Joplin, MO.

Jana Vogler, RN, BSN, director of cardiovascular services at Missouri Baptist, says the new center is located within the Heart Center at MBMC, adjacent to the cath lab and cardiac testing suite. The heart failure center is also down the hall from the cardiology and cardiothoracic surgeon’s office, keeping all patient cardiology services in one central location. Outpatient heart failure care will be offered at two weekly clinics in the center with opportunities to expand. Says Ewald, “Their cardiologists and surgeons already are skilled at offering a wide range of heart care services, including temporary mechanical support (ECMO, Impella, among others). Our goal is to evaluate the very sick individuals on temporary

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Heart & Vascular Center

The mission of the Washington University and Barnes-Jewish Heart & Vascular Center is to achieve excellence in patient care, research and education through seamless integration of heart and vascular care. The Heart and Vascular Center is committed to promoting heart and vascular health through education, prevention and treatment of heart and vascular disease.
MESSAGE FROM THE CHIEF

As we head into the New Year, we are about to open applications for our new advanced fellowship in adult congenital heart disease. The new pathway adds to the already wide range of specialty tracks we offer — two investigator pathways for those interested in research, eight clinical pathways and six advanced fellowships. We have more in the pipeline under development as we continuously evolve and enhance our training program.

As you can see from reading our lead story, we have expanded our clinical outreach for advanced heart failure services. We are delighted to collaborate with Missouri Baptist Medical Center and the BJC Medical Group to offer inpatient and outpatient care for these complex patients and to help establish the new Washington University Heart Failure Center at Missouri Baptist. At a time when everyone is looking at ways to enhance care, avoid duplication of services and save costs, collaborations like these make sense. We are especially pleased to join with the director of heart failure services at Missouri Baptist, as he is a former fellow. David Sewall, MD, completed his internal medicine residency and his cardiovascular fellowship (1991-1994) at Washington University School of Medicine. He holds a master’s degree in business administration from Washington University and served as a Captain in the Medical Corps of the U.S. Army Reserves during fellowship training.

Thanks to all who attended the timely discussion of cardio-oncology topics at our satellite symposium held during the AHA Scientific Sessions in Chicago. Dan Lenihan, MD, our own director of cardio-oncology, can attest to the growing demand for this subspecialty that, for us, is resulting in expanded clinics throughout the region.

Finally, I hope you note our efforts to establish the Joseph Billadello, MD, Memorial Lectureship. He was instrumental in our efforts to obtain accreditation for our Adult Congenital Heart Disease Comprehensive Care Center and he died too young at the age of 65. Please consider helping us endow that lectureship and honor his memory.

We always are interested in how the fellowship program here provided the strong foundation for you to pursue interesting career paths. We hope you regularly take the time to drop us a note and let us know what you’ve been up to since leaving our program.

Douglas L. Mann, MD
Lewin Professor and Chief, Cardiovascular Division

New Heart Failure Center
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support there to determine if they need a higher level of care and to provide that. We also have the opportunity to extend a successful clinical research program and share best practices for heart failure ICU care.”

He adds, “By no longer having to transfer patients from one hospital to another to receive advanced care, we can improve patient satisfaction and eliminate duplication of costly services. This center has been in the works for a long time, but everyone involved sees the short- and long-term benefits that can be achieved when we work together to provide the best care to our patients.”

THANK YOU to Our 2018 Donors

The following physicians have made donations in the past year to the Cardiovascular Division. Your support helps us to advance the field of cardiology by enhancing our fellowship training programs and supporting distinguished lectureships and other activities. Thank you for your support!

| Dr. Philip Barger | Dr. Edward Geltman | Dr. Gregory Lanza |
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If you are interested in making a donation to the Cardiovascular Division, please contact Rachel A. Hartmann in the Washington University Medical Alumni and Development office at: 314-935-9715 or rachel_hartmann@wustl.edu

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As we welcome our newest fellows, I note that the number of applications we receive has been growing steadily—this year, more than 530. For many, the appeal of our program is its rigor and flexibility, which enables trainees to complete core clinical requirements during the first two years and, for many, pursue any number of clinical pathways during their third year. Others devote two or more years to mentored research with the goal of becoming an independent investigator. Each of our pathways provides fellows with protected research time when they can tackle a variety of interesting clinical, translational or basic science investigations. This year, for example, Katie Zhang is seeking ways to improve early diagnosis of cardiac amyloidosis. She couples that with a subspecialty clinical track in cardio-oncology and concurrent coursework in WU’s Master of Science in Clinical Epidemiology program. Dominique Williams, as part of the Women and Heart Disease pathway, is pursuing research related to pre-eclampsia and heart failure admissions. Curtis Steyers, who started electrophysiology research in his third year, now is continuing those studies as an advanced electrophysiology fellow in our program.

By taking advantage of these meaningful research opportunities during training, our fellows not only enhance their career paths, they contribute to our overall understanding and treatment of cardiovascular diseases. What’s exciting, too, is that several fellows have joined our faculty. They are role models for new fellows, embodying the spirit of excellence in cardiology research and clinical care in our Division.

**Welcome New Fellows**

Welcome to the new fellows who will join our Cardiovascular Fellowship Program in July 2019:

- Zainab Mahmoud, MD
  University of Pennsylvania

- Arick Park, MD
  Barnes-Jewish Hospital

- Manuel Rivera Maza, MD
  University of Miami

- Mario Rodriguez, MD
  Icahn School of Medicine

- Robert Sullivan, MD
  Duke University

**Alumni Update**

Jane Chen, MD
Cardiovascular faculty, 2000-2014

Peter Crawford, MD, PhD
Cardiology Fellow (PSTP program), 2001-05
Cardiovascular Faculty, 2006-14

Currently: Peter and Jane met while the two were in medical school at Washington University School of Medicine. They were friends for eight years before dating and got married in 2001 just before Peter entered the Physician-Scientist Training Program and started his WU cardiology fellowship. He was on the faculty of the division from 2006 to 2014. Jane, who left St. Louis after her internal medicine residency and went to Beth Israel Hospital in Boston for her cardiology and electrophysiology fellowships, returned and joined the WU faculty in 2000. She also served as the Division’s electrophysiology fellowship program director from 2007 to 2014. The two currently reside in Minnesota, where Peter is the vice chair for research and the founding director of the Division of Molecular Medicine and Jane is the director of the cardiovascular fellowship program at the University of Minnesota.

Favorite Leisure Activities: With two children, ages 14 and 16, we love to travel and explore new places. Some recent adventures include hiking in Kauai, white water rafting in Montana and traveling to London and Sweden (where there is endless summer daylight and endless winter darkness!)

Favorite Fellowship Memories: We both enjoyed our friends and colleagues on the faculty while we were there. Peter, however, has fond memories while a fellow and remembers many observations and one-liners from those who instilled respect, fear and a little humor: Javindar Singh: “I am the King of the Renal Artery;” Julio Perez; “No Peter. That segment is akinetic, not hyperkinetic;” Phil Ludbrook: the most patient man ever; Scott Nordlicht: first person who showed me how to actually see neck veins; Morton Rinder: While injecting bubble contrast into the pericardial space, he said, “Cool, bubbles are in the RV;” Alan Tiefenbrun, who said dryly, “Yes, Peter, I tested the Swan balloon; you’ve got the A team here;” and Ben Barzilai: the eternal “dad” of the fellows and who told me, “I think you’re going to like being on call as a first-year fellow.”
ACHD Fellowship Established

On the heels of being one of the first accredited adult congenital heart disease (ACHD) Comprehensive Care Centers in the country, the Cardiovascular Division has established a newly accredited two-year ACHD fellowship. “Applications are now being accepted and we anticipate the first fellow to be on board by July 2019,” says Philip Barger, MD, MSc, ACHD fellowship director.

Plans for the fellowship have been under way since ACHD became a certified subspecialty in 2015. The Division achieved Comprehensive Care Center status in April 2017 and the program is one of the largest adult congenital heart disease centers in the country, seeing more than 1,800 patients annually. Philip Ludbrook, MD, now professor emeritus, started the ACHD program at Washington University in 1995. He collaborates with Barger and Kate Lindley, MD, to see ACHD patients. Barger credits Joseph Billadello, MD, former director of the ACHD Center, with helping to shepherd the accreditation process for the center. Billadello passed away in August 2018. Barger serves as acting director for the center in addition to his role as ACHD fellowship director.

The growth of the program is in line with the increased volume of adult ACHD patients seen. In the US, more adults over the age of 20 have congenital heart disease than children, with the population is growing at a rate of 5% annually. That translates into more than one million adult CHD patients in the country. “They are surviving because of newer surgical treatment options and better care practices for late onset complications,” explains Barger. “Our patient volume is growing because we offer a multidisciplinary approach to long-term care for these complications that includes pediatric and adult cardiologists, cardiothoracic surgeons, interventional cardiologists, imaging specialists and advanced nurse practitioners.”

As the program continues to expand, Barger anticipates recruiting additional faculty, noting, “Our goal is to be a medical destination in the Midwest for all patients with CHD to provide the full spectrum of medical, surgical, interventional and advanced heart failure therapies for this unique population of patients.”

Joseph Billadello, MD Memorial Lectureship

In memory of the former head of the Adult Congenital Heart Disease Center, the Cardiovascular Division has set up a fund to support an endowed lectureship named for Joseph Billadello, MD. Billadello died in August 2018 following a long battle with multiple myeloma. A former clinical cardiology fellow at Washington University School of Medicine, Billadello joined the faculty in 1981. He was nationally recognized for his expertise in the treatment of adults with congenital heart disease and rose to become director of the Adult Congenital Heart Disease Program.

“Dr. Billadello’s passion, energy and expertise in adult congenital heart disease were remarkable,” noted Douglas Mann, MD, the Tobias and Hortense Lewin Distinguished Professor of Cardiovascular Diseases and Director of the Cardiovascular Division. “He was the consummate physician and teacher.”

If you would like to help establish this memorial lectureship, send your gift to: Rachel Hartmann, Office of Medical Alumni and Development, Campus Box 1247, 7425 Forsyth Blvd., Suite 2100, St. Louis, MO 63105.

AHA Satellite Symposium: Cardio-Oncology

Better management of vascular toxicity and the latest treatments for amyloidosis were among the topics discussed at the Cardiovascular Division’s annual CME symposium held during the AHA Scientific Sessions in Chicago this past November. Daniel Lenihan, MD, director of cardio-oncology, oversaw program development. Joshua Mitchell, MD, discussed using big data and electronic health records as a way to advance the care of cardio-oncology patients. John Gorcsan, MD, director of clinical research, presented on the use of echocardiograms for global longitudinal strain rate imaging and radiologist Pamela Woodard, MD, discussed the use of comprehensive cardiac MRI. Joerg Herrmann, MD, from the Mayo Clinic, was a guest lecturer. The CME program at the AHA was offered as the division is expanding its own cardio-oncology services. Two satellite clinics opened late last year. In addition to Krone, Lenihan and Mitchell, the division has hired current fellow Katie Zhang, MD, to provide cardio-oncology services starting July 2109.
Participation in an experimental Medicare bundled payment program appears to have no significant impact on efforts by hospitals to reduce overall healthcare costs for five common medical conditions.

That conclusion comes after health policy researchers at Washington University School of Medicine, Brigham and Women’s Hospital and Harvard T.H. Chan School of Public Health in Boston examined three years of data for the five conditions for which Medicare offers most often enrolled in Medicare’s Bundled Payments for Care Improvement Initiative. These conditions — congestive heart failure, acute myocardial infarction, sepsis, pneumonia and chronic obstructive pulmonary disease — together account for more than 70 percent of Medicare costs.

“We found no significant cost savings for hospitals that signed up to participate in the bundled payment program,” says Karen Joynt Maddox, MD, MPH, a health services and health policy researcher within the Cardiovascular Division. “In addition, there were no significant differences in clinical outcomes, including length of stay, emergency department use, hospital readmissions or mortality between the intervention and control hospitals in the study.”

Bundled Payments for Care Improvement was launched by the Centers for Medicare and Medicaid Innovation (CMMI) in 2013 as a potential way to improve care and create cost efficiencies. Participating hospitals assume accountability for costs and quality for an entire care “episode” that starts with hospitalization and continues for 30, 60 or 90 days after post discharge. An earlier study showed promise for patients undergoing total joint replacement. Joynt Maddox’s study, published in the New England Journal of Medicine in July 2018, evaluated the program’s impact from 2013 to 2015 and included over 200,000 patients. Depending upon the medical condition, the number of participating hospitals evaluated ranged from 73 to 125. Just over half (55%) of patients in the study were age 80+.

Over the study period, Joynt Maddox found that average Medicare payments per episode of care decreased from $24,280 to just $23,993. “Our study suggests that moving to bundled payments for medical conditions is not associated with improvements in costs or quality, at least in the short term,” Joynt Maddox says. “It is possible that with more experience in the program, hospitals will begin to see results. However, any expectations that this payment model will be a quick fix should be tempered.”

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What’s the secret to a long and happy married life? Ask Edward Geltman, MD, and he’ll say, “It’s shared values and interests… and a good sense of humor!” The advanced heart failure specialist, a fixture in the division since he came as a postdoctoral clinical fellow in 1976, is entering his 43rd year here at the same time he’s celebrating his 50th anniversary to his wife, Nancy.

“I was a sophomore at MIT and she was a freshman at Simmons College,” he says with a twinkle in his eye. “We met at a Hillel service at MIT for Simchat Torah, which celebrates the annual reading of the five books of Moses. I later found out that she told her parents that she just met the kind of boy she wanted to marry.”

With common interests in art, music and theater, they got engaged just before Geltman went on to pursue a medical degree at New York University School of Medicine. “She had turned to me and said, ‘With you in New York and me in Boston, are we dating?’” he recalls. “My response was instantaneous. I asked her to marry me. I didn’t have a ring, but there was a bunch of flowers with a plastic ring from a Pepsi bottle, so I used that until I could get her a real ring later!”

In his fourth year of medical school, Geltman was one of many doctors who signed up for deferment into the Air Force during the Vietnam War through the Berry plan. He completed his residency in internal medicine and then transferred with the Air Force to Texas for two years. While there, he read about research being conducted by Burt Sobel, MD, former director of the Cardiovascular Division and decided to travel to St. Louis. “After talking with faculty and learning more about Dr. Sobel’s research, I was blown away,” says Geltman. “My wife looked at me after I returned home and said, ‘Oh my, we’re going to St. Louis, aren’t we?’ We had always assumed I would do my fellowship back on the east coast.”

Together, they bought a home in St. Louis and Mrs. Geltman enrolled at Washington University and earned an MSW, after which she worked as a social worker at Barnes Hospital for seven years. After the birth of their son, Josh, she worked for a medical insurance company before retiring to be a full-time mom.

To celebrate their 50th wedding anniversary, the Geltmans travelled to Hawaii, but not before having a small St. Louis reception with family and longtime friends, including Julio Perez, MD (“We shared offices for years”), Greg Ewald, MD (“We’ve worked together for more than 35 years, since Greg joined the heart failure program”) and Douglas Mann, MD (“He’s a beautiful individual and wonderful chief for our division”).

Now 72, Geltman still holds weekly clinics and rounds on the Heart Transplant Service. “There’s always something here to keep me interested and excited,” he notes. “I’m standing on the shoulders of giants here, and it’s been great fun — just like my marriage!”

Edward & Nancy Geltman in Hawaii