EMMC Heart Care Update

EMMC Heart Care now offers Transcatheter Aortic Valve Replacement (TAVR) for patients with severe aortic stenosis. TAVR is an option when standard valve replacement surgery poses a high risk. In the research trials, TAVR was shown to significantly allow patients to live longer and with better quality of life when compared to treating with medicines only.

Only hospitals with a high level of heart surgery experience are approved to perform this procedure. High risk patients may be eligible for TAVR if they are examined independently by two cardiac surgeons who deem them ineligible for open heart valve surgery.

Advanced interventional cardiologists Matthew McKay, MD, and Isidore Okere, MD, at EMMC Northeast Cardiology Associates currently perform this procedure collaboration with multidisciplinary TAVR team, which includes two cardiovascular surgeons, three interventional cardiologists, a cardiac anesthesiologist, vascular surgeon, and a nurse coordinator.

EMMC performs more than 50,000 cardiac procedures and tests each year and is pleased to add TAVR to our list of cardiac care options. If you have a patient who needs echocardiography and cardiac CT, or who might be a good candidate for TAVR, please call EMMC Northeast Cardiology Associates at 207-275-3800 for more information.

EMMC Expands Access to Urologic Care

EMMC Urologic Surgery of Maine is pleased to welcome experienced urologist Richard Caesar, MD, to its growing team of providers. Dr. Caesar, who cares for patients of all ages, has special training in pediatric urology. He fills an important need in the community, as patients and families have previously had to travel long distances to access pediatric urology services.

Dr. Caesar earned his medical degree from the University of South Florida School of Medicine. He completed his urology residency at Boston University and a fellowship in pediatric urology at the University of California San Diego. Board certified by the American Board of Urology and a Fellow of the American College of Surgeons, Dr. Caesar is a member of the American Academy of Pediatrics, Section of Urology, and the Society of Pediatric Urology. A true expert in the field, he has written many papers, and conducted several

Upcoming Events

Surgical Weight Loss Seminars
April 3 and 21, May 1
EMMC - Bangor
A free comprehensive program overview and information session. Register by calling 207-973-6383. For details, visit swl.emmc.org

SCOPE of Pain Presentation
Friday, April 10, 9 am - 12 pm
Penobscot Room, Acadia Hospital
Continuing education designed to help providers manage patients with chronic pain. Register for this event by visiting www.scopeofpain.com

Maine Nurse Practitioner Assoc.
2015 Spring Conference
April 29, 30, and May 1
Point Lookout Conference Center
Lincolnville, ME
Register for this event by calling 207-621-0313 or emailing pam@mnpa.us

Urology continued on next page
EMMC Introduces Lung Cancer Screening Program

Each year, 750 to 1,000 Mainers die from lung cancer, exceeding the number of deaths attributed to breast, colon, and prostate cancers combined. A national study has shown this number can be reduced with access to lung cancer screening programs. Eastern Maine Medical Center now offers this type of screening to patients in its region.

“The National Lung Screening Trial studied the effectiveness of an annual low dose CT scan in identifying early lung cancers in active or previous smokers,” explains John Klemperer, MD, FACS, EMMC Cardiothoracic Surgery of Maine.

Annual low dose screening CT scans were performed on 26,000 individuals who were, or had been, heavy smokers. Several early lung cancers were identified and treated. This resulted in a 20 percent reduction of lung cancer deaths in this group over the next five years.”

In response to these promising results, and the high rate of lung cancer deaths in Maine, EMMC has begun an annual low-dose CT lung cancer screening program.

To qualify for the annual screening, candidates must be between 55 and 80 years old, have the equivalent smoking history of a pack a day for 30 years, must have quit in the last 15 or fewer years, and are willing to accept treatment for lung cancer if identified. “Early detection is one of the most important aspects of fighting lung cancer, and this program could have a significant effect on the lives of many Mainers,” adds Dr. Klemperer.

For more information on the program, call EMMC Cardiothoracic Surgery of Maine at 207-973-5293.
**Free Colorectal Cancer Screening**

EMMC Clinical Research Center is teaming up with the Maine Center for Disease Control and Prevention (CDC) to provide free colorectal cancer screenings to men and women who meet the following eligibility requirements.

1) Patients between the ages of 50 and 64 years (or 75 if the person does not have Medicare Part B coverage) or 40 and 49, if considered at increased risk for colorectal cancer due to personal or family history of colorectal cancer or adenomatous polyps.

2) Patients who are low income (up to 250% of the Federal poverty level) and are uninsured or underinsured to receive screenings for colorectal cancer.

3) Over 75% of new patients screened must be at average risk for colorectal cancer.

Individuals who have MaineCare or Medicare Part B are not eligible for screening through the Maine CDC Colorectal Cancer Control Program, which is paid for through a grant from the US Centers for Disease Control and Prevention.

Patients must be scheduled by May 15, 2015. To learn more, please contact Krysta Anderson, coordinator, EMMC Clinical Research, at 207-973-4263.

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**Advances in Vascular Treatment**

A new, minimally invasive approach offered for the first time in Maine at EMMC, offers new hope for patients who may be facing a leg amputation resulting from a severe form of peripheral artery disease.

“Treating peripheral artery disease by making an incision in the thigh, moving small wires and a balloon to the site of the problem, and clearing out the blockage is common,” says Larry Flanagan, MD, a vascular and endovascular surgeon at EMMC Vascular Care of Maine. “What’s different about this new approach is that I access the artery through the ankle, which allows me to remove blockages that we couldn’t treat before. For many patients, our ability to get into the artery through the ankle is very important, as it may be the only thing we can do to prevent an amputation.”

Most patients who have the procedure can go home the same day. Patients experience minor discomfort at the site of the incision and in the arteries as the procedure is being performed. They are back on their feet quickly and can fully recover within a few days.

Risk factors for peripheral artery disease include smoking, diabetes, high blood pressure, high cholesterol, and age (over 60). Symptoms include leg pain and heaviness that becomes worse with walking and is relieved by sitting down. Early treatment options include smoking cessation, lowering blood pressure, cholesterol, and blood sugar through medication or other means, and increasing physical activity. Those with a severe form of peripheral artery disease and patients who have diabetes are at higher risk for amputation.

Thanks to this new breakthrough in treatment, some of these patients who previously would have needed to have a leg amputated will be able to keep their limbs.

“There have been so many improvements in how we can treat circulation and other related problems over the past couple of decades,” he adds. “For example, we can now repair aneurysms, which are bulging, weak segments in the artery, through a small needle incision. This has led to a shorter recovery time, lower risk of complications and infection, and less pain. The new approach we’re using to treat peripheral artery disease through the ankle is just one more advancement in a long string of them.”

For more information, call EMMC Vascular Care at 207-973-5226.