

On the Cutting Edge of Space-Age Surgery

St. Mary's surgical robot is lending a hand – actually four hands – to treat prostate, gynecology and cardiac cases.

Physicians at St. Mary's Medical Center have been counting on the da Vinci S Surgical System to help treat their patients since 2006. Speaking of counting, more than 650 robotic-assisted surgeries have been performed at St. Mary's. And that number is quickly rising as more physicians receive the specialty training and more innovative treatments are made possible.

Not meant to replace a surgeon, the da Vinci system virtually extends the surgeon's eyes and hands into the surgical field—allowing for complex dissection or reconstruction in a minimally invasive environment. This robotic technology is designed to scale, filter and seamlessly translate the surgeon's hand movements into the precise movements of the robotic arms and instruments.

"Robotic-assisted surgery has been shown to be safe and effective for a number of medical procedures including prostatectomy, hysterectomy and cardiac TMR (transmyocardial revascularization)," says Christopher E. Ramsey, M.D., a board-certified urologist. Dr. Ramsey has performed more than 250 robotic-assisted surgeries at

St. Mary's. He is ranked among the nation's top 10 surgeons in experience with robotic urology.

"Using just five to six small incisions, robotic-assisted surgery has all the benefits of minimally invasive surgery including shorter hospital stays, less blood loss, less scarring, faster recovery and a quicker return to normal activities," Dr. Ramsey says. "In prostate surgery, the greater precision through the use of the robotics helps to achieve excellent outcomes in cancer control, potency and urinary function."

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St. Mary's has been the site of several new applications for the da Vinci system. In August 2008, L. Michael Fields, M.D., a board-certified obstetrician/gynecologist, became the first surgeon in the world to perform a hysterectomy using a newly developed laser-robotic system, which replaces the traditional cutting scissors on one arm of the robot. He is ranked among the nation's top five surgeons in experience with robotic gynecology. "While lasers have been used in a number of gynecology procedures for several years, the combination of the robotic system and laser equipment is a tremendous benefit for our patients," Dr. Fields says.



In November 2008, the region's first robotic TMR procedure was performed by Thomas R. Pollard, M.D., a board-certified cardiovascular and thoracic surgeon. "TMR is a proven technique to relieve the angina resulting from heart disease," Dr. Pollard says. "Traditionally, it has been done as an open-chest surgery with a long recovery period.

Using the robotic system, the surgeon only needs to make three small incisions in the chest area, instead of the one long incision in open-chest operations."

To learn more, visit www.mercy.com. For a referral to a surgeon with expertise in robotic-assisted surgery, call Ask Mercy at 865-632-5200.

Robotic Surgery Specialists at Mercy

The following physicians are experts in robotic-assisted surgery.

CARDIOVASCULAR & THORACIC SURGERY

East Tennessee Cardiovascular Surgery Group - 865-632-5900
Thomas Pollard, M.D.

GYNECOLOGY

L. Michael Fields, M.D. - 865-546-9623

Steven Moffett, M.D. - 865-637-3521

GYNECOLOGIC ONCOLOGY

East TN Women's Gyn/Oncology - 865-673-9250
Kenneth Cofer, M.D.

David Martin, M.D. - 865-971-4992

UROLOGY

Urology Consultants of Knoxville - 865-938-5222

Katherine Cameron, M.D.
Eric Nicely, M.D.
Brian Parker, M.D.
Christopher Ramsey, M.D.

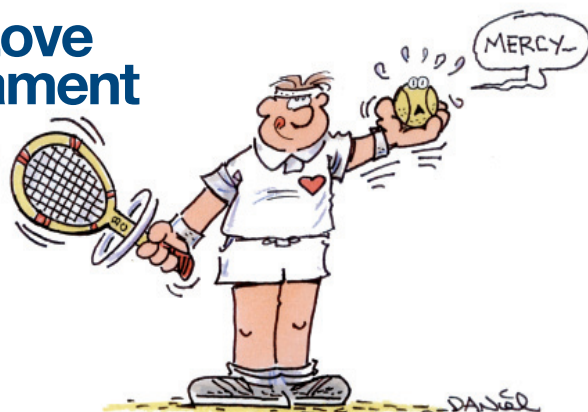
Knoxville Urology Clinic - 865-546-5590
Walter Chiles, M.D.
Christopher Harris, M.D.

Urology & Urologic Surgery - 865-305-5000
Bruce Woodworth, M.D.

15th Annual Labor of Love Mixed Doubles Tournament

**Benefiting Mercy's Cancer Program
Saturday, April 25
Cedar Bluff Racquet Club**

For registration and sponsorship information, visit www.mercy.com or call Mercy Health Partners Foundation at 865-632-5678.



St. Mary's Vascular Surgeons Investigate Breakthrough Treatment of Aneurysms

A vascular specialist at St. Mary's Medical Center was the first surgeon in the United States to enroll a Knoxville patient into a nationwide study using the Talent Abdominal Stent Graft. The device from Medtronic is designed for the endovascular repair of aortic aneurysms.

George A. Pliagas, M.D., a board-certified general and vascular surgeon with Premier Surgical Associates in Knoxville, led the team that performed the first study implant at St. Mary's on December 29 as part of the VITALITY1 clinical study.

According to Dr. Pliagas, an aortic aneurysm is a dangerous bulge or weakening in the body's main artery that can rupture with fatal consequences if left untreated. Abdominal aortic aneurysms – the most common type – are responsible for approximately 15,000 deaths in the United States annually.

The Talent Abdominal Stent Graft has been used internationally for more than 12 years, and has been implanted in more than 45,000 patients. "This study will gather clinically relevant data on the safety and efficacy of the device in the real-world U.S. patient population," Dr. Pliagas says. "Internationally, the device has an excellent track record. It is known to be accurate, durable and easy to use, and I expect that U.S. physicians will have

similar sentiments as it gains broader market acceptance."

VITALITY1 will enroll 260 patients and follow them for five years. "St. Mary's is one of only 20 initial sites across the country participating in the study," Dr. Pliagas says. "These sites were selected based on their experience in the field of aneurysm repair. We have enrolled four patients so far, and hope to enroll a maximum of 17 patients."

In addition to Dr. Pliagas, physicians with Premier Surgical Associates participating in the study are Donald L. Akers Jr., M.D.; Willard B. Campbell, M.D.; and Christopher W. Pollock, M.D.

"Participation in this study reinforces St. Mary's and Premier's aim to always stay at the forefront of medical technology," Dr. Pliagas says. "An example of this is the hybrid endovascular suite in the OR at St. Mary's, which was built specifically to accommodate abdominal and thoracic aneurysm repair as well as other vascular procedures.

"With this new technology, we are able to treat 90 percent of all aneurysms endovascularly—which means shorter hospital stays, faster recovery time, less blood loss and less pain," he adds. "High risk patients who otherwise could not tolerate the old-fashioned procedure have benefited from this new device."

Q&A

With **Cassandra F. Gibbs, M.D.**
Board-Certified Internal Medicine Physician
Internal Medicine Associates, a division of
Summit Medical Group

Q. My mom has osteoporosis and I am wondering if it runs in families. Is there anything I can do to prevent brittle bones or am I doomed to break a hip someday?

A. Osteoporosis, the thinning of bone tissue and loss of bone density over time, is the most common type of bone disease. Often, people sustain fractures before they even know they have the disease. By the time this occurs, osteoporosis is in its advanced stages.



Ten million Americans suffer from osteoporosis and another 34 million are currently at risk for developing the bone-thinning disease. Of those affected by osteoporosis, 80 percent are women.

Caucasian women, especially those with a family history of osteoporosis, are at the highest risk. Smoking, eating disorders, low body weight, calcium deficiency, heavy alcohol consumption, early menopause, and the use of certain medications can also increase your risk.

It's not too late to beat the odds: Slow bone loss by taking the recommended daily amount of calcium and vitamin D, sticking to a schedule of weight-bearing exercise, and quitting smoking.

Get a baseline bone mineral density test after age 65 and every two years thereafter. Postmenopausal women with two or more risk factors for osteoporosis should have this noninvasive screening much earlier.

Talk to your doctor about your risk factors for osteoporosis and what you can do to keep your bones strong. And be sure to schedule health screenings when they will be of the most help to you.