



American Academy of Otolaryngology — Head and Neck Surgery Foundation

2008 ANNUAL MEETING DAILY

SEPTEMBER 21-24, 2008
CHICAGO, IL

www.entnet.org/annual_meeting/index.cfm

WEDNESDAY EDITION

SCHEDULE-AT-A-GLANCE

7:30 am – 4:00 pm
Translational & Basic Research,
(Clinical Research) Posters
Hall D

8:00 am – 11:30 am
AcademyU® Learning Lab
Room S401D

8:00 am – 12:00 pm
Miniseminars, Translational Research,
Scientific Sessions
MPCC

9:30 am
Honorary Lecture
• Neel Distinguished Research Lecture,
Speakers: Professor Blake Wilson and
Richard T. Miyamoto, MD
Room E351

9:30 am – 1:00 pm
OTO EXPO
Hall D

10:30 am – 11:50 am
Core Awards Ceremony
E351

11:30 pm – 1:00 pm
Lunch with the Exhibitors
Hall D

12:00 pm – 3:30 pm
Instruction Courses
MPCC

Cultural Competency in Caring for the Surgical Patient

The competency of the entire medical community is being challenged, and otolaryngologists are no exception. But it's not competency in the operating room, in the research lab or in classroom that's being challenged. Today's physicians are being challenged to be more culturally competent by working to eliminate socioeconomic and cultural barriers to receiving quality healthcare.

A panel of otolaryngologists from across the country met Tuesday in the annual meeting miniseminar, "Cultural Competency, Health Literacy and Health Disparities." The panel, moderated by President-Elect Ron Koppersmith, MD, MBA, discussed obstacles to receiving a high level of care that many people face because of language barriers, economic inequalities, education, and many other cultural stumbling blocks.

"Isn't it good enough to be the best doctor for all patients?" asked panelist Duane Taylor, MD. Dr. Taylor, a private practitioner in a culturally diverse area in Bethesda, Maryland, suggested it was not and that doctors must "develop empathy with and reach out to their patients."



Duane Taylor, MD

Taylor chairs the new AAO-HNS Committee on Diversity.

Dr. Taylor said 43 percent of the residents in his community are considered minorities and many do not speak English as a first language. He says he speaks fluent Spanish and French in order to communicate with many of his patients.

"Being linguistically isolated prevents people from navigating the healthcare system," said Dr. Taylor.

Minority populations in the U.S. also face serious disparities in level of care, said Dr. Taylor. Research suggests minorities have worse health outcomes and typically wait longer for diagnoses, receive less aggressive treatment and are undertreated for pain.

see CULTURE, page 10



A number of attendees met with presenters following the miniseminar to continue discussions on cultural competency in the medical community.

Outcome of Children, Adolescents with Tumors Involving the Skull Base

Following research conducted at the Tel-Aviv Sourasky Medical Center in Israel, researchers led by Dan M. Fliss, MD, found that among children, skull-base tumors are rare, but when diagnosed, the removal of tumors by surgery using conventional techniques is feasible and safe among infants and children.

Dr. Fliss reported his research findings

Tuesday during the Eugene N. Myers International Lecture on Head and Neck Cancer.

Though rare in children, Dr. Fliss reported that based on a pediatric international collaborative study of incidents of skull-based tumors among children, by far the most common type, with 44 percent of studied

see FLISS, page 4

TODAY'S WINNERS

Tuesday winners of the AAO-HNS/F Booth Drawing:

Jerry Sugar, MD
Adam Pearl, MD
Jacob Cohen, MD
Victor Gentile, MD
Vincent Eusterman, MD, DDS
Neerav Goyal, MPH
Rolanda Gil Ng, MD
Gregory Esselman, MD
Amarilis Melendez-Medina, MD
Stephen Wetmore, MD

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3 Genetics of Age-Related Hearing Loss/Presbycusis

4 Election Results

5 Interdisciplinary Approach Shows Promise in Treatment

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Genetics of Age-Related Hearing Loss/Presbycusis

Data presented Tuesday indicate that common alleles of the GRM7 gene contribute to the risk of developing Age-Related Hearing Impairment (ARHI) and also suggest

there is a functional role for mGluR7 in hair and spiral ganglion cells of the ear.

According to Rick A. Friedman, MD, PhD, of the Los Angeles-based House Ear Clinic and House Ear Institute, ARHI, or presbycusis, is the most commonly diagnosed sensory deficit, affecting one in every six adults older than age 60.

Presenting his research as part of the "Otology Translational Research Mini-Program," Dr. Friedman said ARHI is a complex disease caused by an interaction between environmental and genetic factors

"While the environmental factors causing ARHI have been extensively studied, investigations into the genetic risk factors have only recently been initiated," he said. "We completed the largest pooling-based

whole genome association study to date to uncover the genetic risk factors for ARHI. We have identified an SNP residing in a novel gene for hearing that was significant in the original pooled EURO cohort and significant in the validation EURO cohort."

Dr. Friedman said that the research also uncovered two SNPs within the same gene that were significant in the Finland-based cohort.

"The biology surrounding this gene provides a supportive hypothesis for a possible role in ARHI," he said.

"Now we have a small molecule to begin animal studies."

Dr. Friedman said fine-mapping of the genetic region was completed in order to unequivocally rule-in the novel gene, but several other items need be crossed off the list to further the research, including identifying the disease causing SNP, and conducting an ongoing study in a GRM7-deficient mouse model, including a drug trial.

'While the environmental factors causing ARHI have been extensively studied, investigations into the genetic risk factors have only recently been initiated'

Rick A. Friedman, MD, PhD

Stop by the Academy Booth in Hall D

Stop by the Academy booth, MPCC, Hall D, Booth #645, each day and take part in the scheduled events to be entered in the daily drawing.



You could win an AAO-HNS/F Travel Coffee Mug featuring our new logo, and a \$10 Starbucks gift card.

Hair Cells Being Regrown, Restoring Balance Through Gene Delivery

University of Kansas researcher Hinrich Staecker, MD, PhD, said on Tuesday that the delivery of the Atoh1 gene can restore lost vestibular hair cells, thus restoring function after aminoglycoside ototoxicity.

Presenting his research as part of the "Otology Translational Research Mini-Program," Dr. Staecker talked about the spectrum of disorders including hearing loss and balance disorders that occur subsequent to a loss of sensory hair cells.

"Over the last 15 years a variety of molecular pathways that control hair cell genesis and patterning have been investigated as potential treatments for hair cell loss," he said. "Developing molecular therapeutics for the inner ear faces a variety of challenges, including correctly identifying a potential patient population, ensuring safety of the planned therapeutic and understanding potential competing therapies."

The vestibular system fulfills many of these characteristics, Dr. Staecker said.

"A loss of vestibular hair cells due to aminoglycoside ototoxicity gives us a known patient population that can be targeted," he said.

Additionally, there is currently no mature competing treatment, such as a cochlear implant, being used to treat deficits in the vestibular system, thus making the establishment of a molecular therapeutic for vestibular hair cell regeneration an attractive undertaking.

"The rationale for exploring vestibular hair cell regeneration starts with the fact that vestibular disease is so common," Dr. Staecker said. "It also offers the perfect model for translational research because there is no cochlear implant equivalent and there is a defined disease process in the human population, a group of patients out there that have balance dysfunction and

need our help. We have all of the elements needed here to target the population."

Dr. Staecker said that his team has determined the use of a tissue-specific promoter system to be the more efficient gene delivery method available.

"Further improvement in the vector design should decrease the number of particles needed to achieve a desired effect — only binding to supporting cells," he said. "Now we have to choose a few and rigorously test the outcomes. The next step is to choose a final design."

Dr. Staecker said his research team is working on determining the minimum dose and identifying supporting cell-specific peptides for retargeting.

"There is also a need to understand the degree of injury and duration of injury in these individuals," he said.



University of Kansas researcher Hinrich Staecker, MD, PhD, spoke Tuesday morning.

OTO EXPO



Attendees at the 2008 AAO-HSN/F Annual Meeting and OTO EXPO browsed the floor of the exhibit hall looking for the newest innovations.

Swallowing, Voice Problems Result in Significant Morbidity

Research conducted by Duke University Medical Center otolaryngologists Richard Turley, MD, and Seth Cohen, MD, found that many members of the elderly population likely suffer from swallowing and voice problems, which result in significant morbidity, including aspiration, malnutrition and pneumonia, and which greatly decrease the quality of life.

The researchers, who conducted a cross-sectional survey study of two independent-living retirement communities in North Carolina, found study subjects often failed to present and receive treatment for conditions.

Subjects experiencing swallowing and voice problems often suffered from social isolation, anxiety and depression, the researchers found. Dr. Turley and Dr. Cohen collected demographic information on their subjects, developed a scale of swallowing severity, and scored quality of life and depression among the subjects.

The study subjects suffering from both dysphagia and dysphonia scored highest on the Center for Epidemiology Studies Depression Scale (CES-D). Of those in the study group 55.9 percent were interested in potential treatment.

Of those subjects suffering from dysphagia, nearly 43 percent found

treatment helpful, while nearly 72 percent of those suffering from dysphonia found relief.

Of those subjects not seeking treatment the number one reason given, by 47 percent of respondents, was that they considered the condition a normal part of aging, while 44 percent said they were not aware of a treatment.

Nearly 22 percent also said they were not bothered enough to seek treatment, while 13 percent said it was too hard to travel. Nearly 9 percent said treatment was too time-consuming and 7 percent said the treatment was too expensive.

Dr. Turley and Dr. Cohen concluded that dysphonia and dysphagia are prevalent among independent living elderly, but that the problem is under-treated.

Their recommendations included:

- Developing outreach programs to improve education.
- Evaluating efficacy of such programs.
- Improving screening methods.
- Assessing barriers among primary care physicians.

The study was funded by a Patient Education Grant from TAP Pharmaceuticals and a Health Services Research Grant from the AAO-HNSF.

Researchers Mine Wealth of Information From 'Tonsil Stones'

According to researchers, tonsilloliths are not just stones, but living biofilms that can tell otolaryngologists quite a lot. If they are willing to listen, that is.

As part of Tuesday's Translational & Basic Orals Program, Yosef P. Krespi, MD, of the New York Head and Neck Institute, talked about understanding the similarities of tonsilloliths to dental biofilm and why the information could be important in a clinical setting.

"Tonsilloliths exhibit typical biofilm structure and the formation of chemical gradients through physiological activity," Dr. Krespi said.

"While complete or intracapsular tonsillectomy is an option for treating chronic cryptic infections, understanding the morphology and biofilm characteristics of tonsilloliths may stimulate scientists to use less invasive or non-surgical remedies in treating cryptic tonsillitis in the future."

As part of the study, tonsilloliths were harvested from several patients with cryptic pockets and sent to the laboratory under sterile conditions. They were then examined via

confocal microscopy to determine the presence and distribution of bacteria. Microelectrodes (dissolved oxygen, nitrous oxide, and pH) were then used to measure the rates of aerobic and anaerobic respiration, as well as acid production, which were produced when the tonsilloliths were exposed to saliva and after sucrose and fluoride were added.

Dr. Krespi said that microelectrodes showed that the microorganisms respired both oxygen and nitrate in physiological concentrations. When fluoride was added, the pH was raised a bit, suggesting that it suppressed acid fermentation in the presence of sucrose.

"Morphologically, the tonsilloliths were similar to dental-plaque biofilms, containing 'corn-cob' structures, filaments and cocci," he said. "The profiles showed aerobic respiration near the top, de-nitrification slightly lower, and acidification towards the center.

"The tonsillolith therefore had stratified layers, similar to dental (and other) biofilms. The depletion of oxygen and acid production following addition of sucrose may encourage the proliferation of anaerobic/acidophilic bacteria within the tonsil stone."

FLISS

continued from page 1

incidents, were sarcomas, followed by squamous cell carcinoma at 14.3 percent and esthesioneuroblastoma tumors at 13.1 percent.

Dr. Fliss reported in the journal *Head and Neck* in 2008 that genetic analysis of skull-based tumors greatly aided in pathologic diagnosis and determining prognosis.



Of the surgeries to remove skull-based tumors performed in the study, the most common location was in the anterior region of the skull, with removal by anterior subcranial surgery preferred.

Dr. Fliss reported that only 17 percent of procedures performed resulted in long-term complications.

Also, in what he called an important finding, he and the research team

found that there was very little negative cosmetic impact on the skull or on its development following surgery.

It was also noted in the research findings that overall quality of life for chil-

'The research found there was very little negative cosmetic impact on the skull or on its development following surgeries.'

dren undergoing surgery often declined immediately after the procedure, but quality of life returned within 12 months of surgery, Dr. Fliss said. The research found that disease-specific survival and overall survival were around 55 percent at five years of age.

TRANSLATIONAL & BASIC RESEARCH AND SCIENTIFIC POSTERS



The Translational & Basic Research and Scientific (Clinical Research) Posters are on display in Hall D from 7:30 am to 4:00 pm today.

ELECTION RESULTS

The results of Monday's vote have now been counted.

The election results for the Section for Residents and Fellows and the BOG are:

Chair: Vasu Divi, MD
Vice Chair: Jeffrey Liu, MD

Member-at-Large: Michelle Roeser, MD
Information Officer: Kenny Carter, Jr., MD
BOG Governor: Mark Brandt Lorenz, MD
BOG Public Relations Representative: Jess Dhaliwal, MD
BOG Legislative Representative: Scott Chaiet, MD

Interdisciplinary Approach Shows Promise in Treatment

Scientists on Tuesday called for an interdisciplinary approach in treating esophageal abnormalities in patients presenting to a voice subspecialty clinic.

Presenter Michael T. Falcone, MD, of Vanderbilt University Medical Center in Nashville, said that while otolaryngologists implement transnasal esophagoscopy (TNE) to assess esophageal pathology, previous studies focusing on the use of TNE to evaluate this issue have been limited in various ways.

"These are largely retrospective and deal with select patient populations," he said. "There are currently no data on the prevalence of esophageal pathology in 'all comers' to an otolaryngology voice center.

The objective of our study was to assess the prevalence of esophageal pathology in this population and determine the inter-observer variability of the findings reviewed by an otolaryngologist and a gastroenterologist."

Dr. Falcone said 50 consecutive patients with throat symptoms that presented to the voice center were selected to undergo

TNE. The findings were then videotaped and reviewed by an otolaryngologist and a gastroesophagologist, each of whom was blinded to the patients.

The results of the study showed that the percent agreement for some of the pathologic findings were interesting.

The doctors agreed on Barrett's esophagus 86 percent of the time, esophagitis 88 percent, hiatal hernia 76 percent, and esophageal stricture 96 percent. The frequency of exact agreement between raters was 54 percent, but for an abnormal study, that number rose to 80 percent. The reviewers were 7.11 times more likely to agree than disagree, Dr. Falcone said.

"Esophageal abnormalities are common

in patients presenting to a voice subspecialty clinic," he said.

"While performing TNE is relatively easy, interpretation may be challenging.

With regard to Barrett's, discrepancies between the endoscopic and histologic findings

pose a challenge, but it was reassuring that the otolaryngologist had a higher likelihood of suspecting Barrett's."

'While performing TNE is relatively easy, interpretation may be challenging'

Michael T. Falcone, MD

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*schedule subject to change. Stop by the AAO-HNSF Booth for updates.

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A		Anthony Products Inc/Gio Pelle	615	Boston Medical Products Inc	602	Doctors Company, The	644
Acclarent Inc	689	Apdyne Medical	314	BrainLAB	413	DocumENT	733
Acumed Instruments Corporation	949	Arches Natural Products Inc	934	Brazilian Association of Otorhinolaryngology	849	E	
Advanced Bionics Corporation	637	ArthroCare ENT	528			Ear Nose & Throat (ENT) Journal	1211
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AllMeds Inc	567	Banner Health	336	Coapt Systems	126	Endocraft LLC	422
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American Academy of Maxillofacial Prosthetics (AAMP)	133	BD Medical	1016	Conescan	777	ENT Resources	674
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		Blue Tree Publishing Inc	566	Difra Instrumentation	984	Fallon Clinic	1263

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see EXHIBITORS, page 10


Booth # 367



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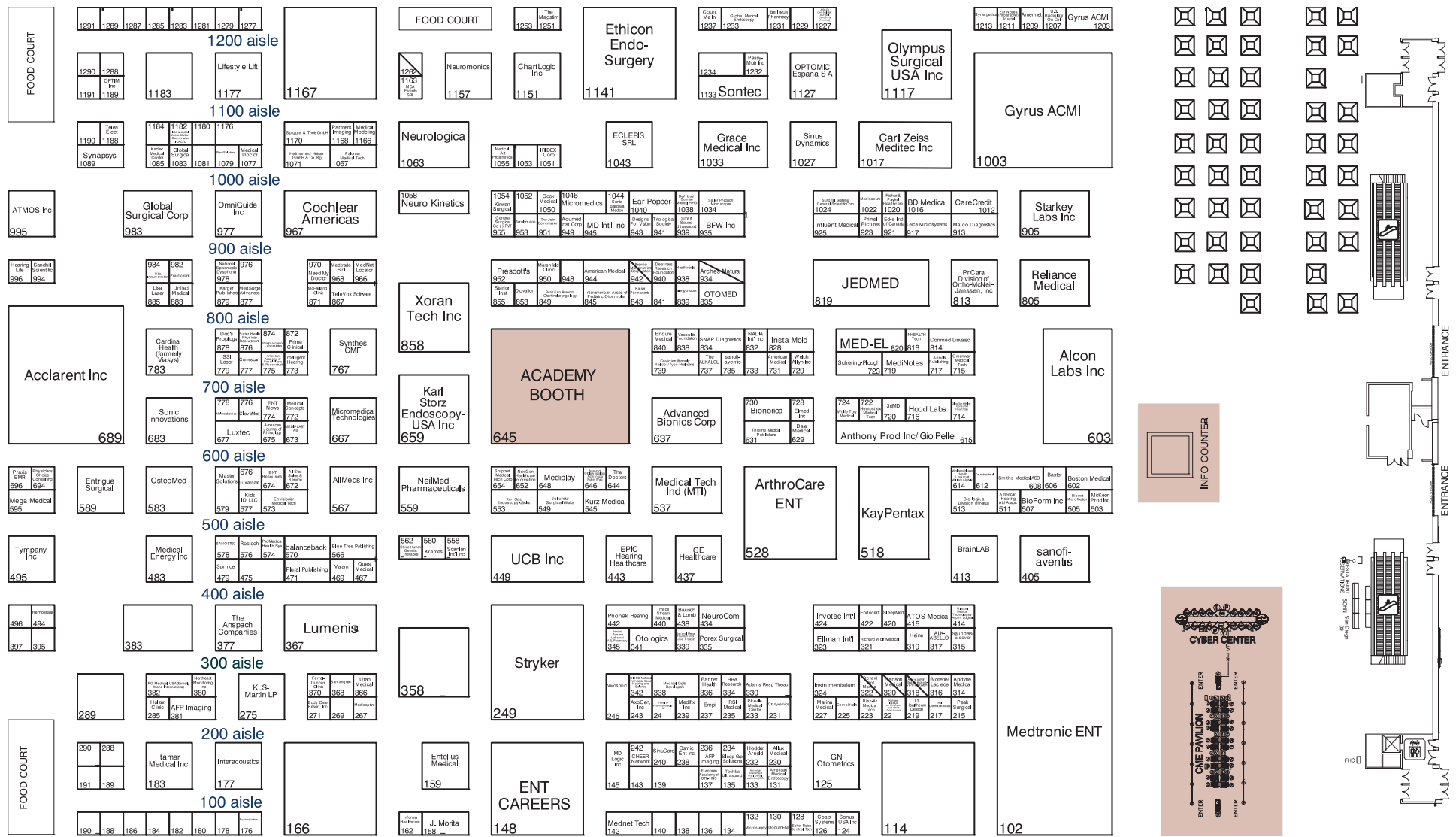
Meet the Experts: Participate in small round table discussions with leading experts. The Experts: Mark Courey, MD; Paul Castellanos, MD; Marc Remacle, MD; Andrew McWhorter, MD

Instructional Course: Laser Stapedotomy: 20 Pearls and Pitfalls. Jack M Kartush, MD; September 21st, 1:45 to 2:45 pm, Room E353C.

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TeleVox Software Inc	867	
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Wolfe Tory Medical Inc	724	
Wolters Kluwer Health- Lippincott Williams & Wilkins	614	
X		
Xoran Technologies Inc	858	

List current as of August 22, 2008

CULTURE

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Training doctors to be culturally competent can begin to reduce disparities and barriers to care, he said.

For Lisa Perry-Gilkes, MD, effective communications is essential to any relationship, "particularly the doctor/patient relationship."

"Consider malpractice suits — 75 percent of all medical malpractice lawsuits result from poor communications between doctor and patient," Dr. Perry-Gilkes said.

It's estimated that more than a third of American adults, 89 million people, lack sufficient health literacy to carry out medical treatment and preventive health care. The Institute of Medicine defines health literacy as, "The ability to obtain, process and understand basic health information and services needed to make appropriate health decisions and follows instructions for treatment," said Dr. Perry-Gilkes, who is also a member of the Committee on Diversity.

Dr. Perry-Gilkes said doctors must work harder to make sure their patients understand information they are receiving about illnesses, treatments, medications and healthcare records. Doctors should try, whenever possible, to communicate with patients in their native language through an interpreter or family member, and physicians must work to improve interpersonal communication skills.

"Of all the forms of inequality, injustice in healthcare is the most shocking and inhumane," said Martin Luther King. Amy Y. Chen, MD, MPH, quoted King and said

that health disparities in otolaryngology and all specialty surgery practices in the U.S. are widespread and growing as more and more people go without health insurance.

Dr. Chen reported that among individuals under age 65, as many as 31 percent do not have any private health insurance. "And huge disparities exist between race and income levels in rates of insurance coverage," she said.

And because of that inequality among those with and without private insurance, minorities and low-income Americans do not receive the same access to specialty surgical care, Dr. Chen said.

Recent studies have shown that minority and poor children are far less likely to receive cochlear implants than nonminority, wealthier children. Even in far more common procedures like tonsillectomies and adenoidectomies, children covered by private insurance were far more likely to receive care than children with no insurance or covered by Medicaid.

Dr. Chen said studies even suggest that children suffering from head and neck cancer were more than twice as likely to receive treatment if covered by private insurance than those without insurance or on Medicaid.

"Just because you lack insurance shouldn't mean you'll have a greater chance of dying," said Dr. Chen. "But research seems to indicate that."

In 2004 a grant from the Robert Wood Johnson Foundation funded the creation of the Health Disparities Commission, which has about 64 member organizations, from

medical and nursing associations, pharmaceutical companies and health plans, said Anita L. Jackson-Kelly, MD, MPH. Most subspecialty societies are absent from the commission.

Dr. Jackson-Kelly reported that most efforts are being made to educate and eliminate the cause of disparities, but that it would be a long and difficult journey. But increased training of physicians in cultural competency and increased accountability for physicians will begin to increase the quality of care for all Americans.

"I'm an optimist," said Dr. Jackson-Kelly. "I believe everyone should receive the same treatment no matter who they are or where they live. This is a civil rights issue."



MEETING DAILY

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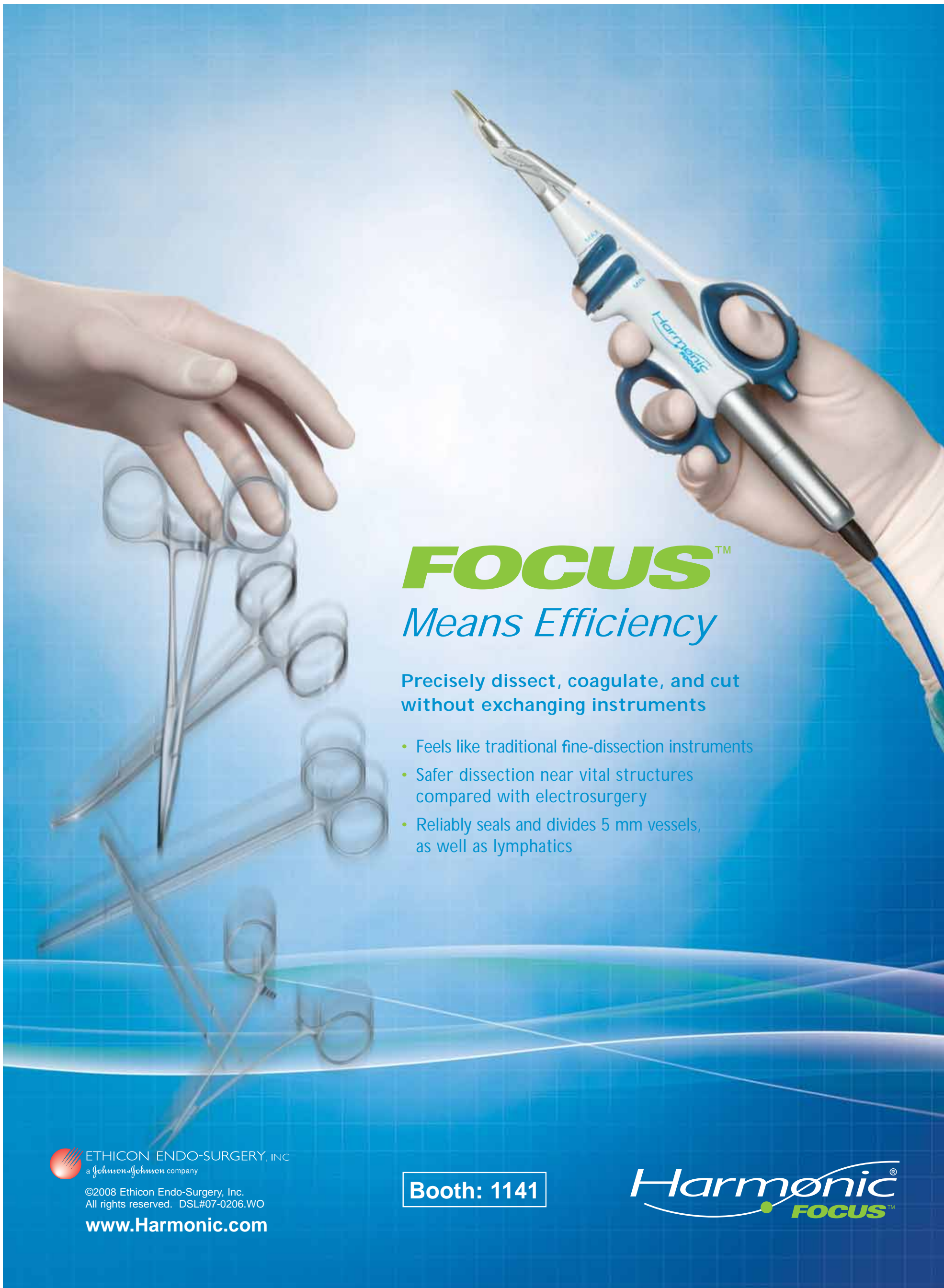


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