

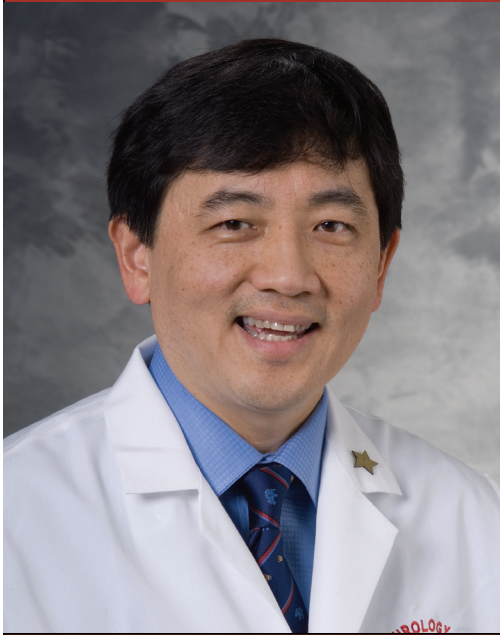
# WISCONSIN Urology

THE NEWSLETTER FOR ALUMNI AND FRIENDS OF THE UW UROLOGY PROGRAM



WINTER 2007

VOLUME 3 • ISSUE 1



## >> A MESSAGE FROM THE CHAIR

This has been an unusual winter in Wisconsin, as the temperate weather has been a disappointment to many who love the seasons, and hope to some who hate the cold. Here in Madison, the Urology Service remains quite active, and the only thing that is certain is constant change.

This past fall, Dr. Peter Carroll proved to be an outstanding Uehling lecturer, and his insights into oncology and the future of urology practice were impressive. All those in attendance enjoyed the conference immensely, despite a "rainy" Uehling golf event.

I am most proud to announce the creation of our third endowed chair in Urology, the Robert and Dolores Schnoes Chair in Urologic Research. This chair follows the Uehling Chair (Dr. Nakada) and the Livesey Chair (Dr. Jarrard) in our Division. Dr. Wade Bushman has been selected to be the first

recipient of this honor, and he is certainly a most deserving choice. I believe his research accomplishments as a practicing urologist are unparalleled in academic urology today. Dr. Bushman has also been named the Vice Chair for Research in the Department of Surgery. These honors all came in a year in which he won the annual resident teaching award. People like Dr. Bushman make my job easy.

We have completed our 100th robotic prostatectomy at UWHC, a milestone reached in less than 9 months. Dr. David Jarrard, along with Drs. Sean Hedican and Timothy Moon, have done a tremendous job with this initiative. Indeed, Dr. Jarrard performed 3 procedures in one day in December. More importantly, robotics has added a new dimension to both our residency and fellowship programs.

I am most excited by the arrival of Dr. Daniel Williams following his fellowship at the Baylor College of Medicine. Dan brings tremendous energy and insight to our program, and he is well on his way to creating a first rate infertility program at UW. He is also our first faculty member to actively practice at both UWHC and One South Park. Please read the article about Dr. Williams in this issue of Wisconsin Urology.

Bricks and mortar continue to dominate our office views these days. The American Family Children's Hospital is on schedule for completion later this year, and Drs. Kryger and Slaughenhaupt are actively preparing for this transition. In parallel, Tower 1 of the Interdisciplinary Research Complex is on schedule as well. I am simply amazed at the growth of this medical center over the past 5 years.

Academically, this will be another busy year for UW at the AUA. Aside from numerous abstracts and presentations, our faculty is well represented in the scientific program and instructional courses as always. We plan our annual alumni reception and we hope to see all of you there.

Finally, Dr. Bing Rikkers, the Chair of the Department of Surgery, announced in late November that he is stepping down. Fortunately, Bing has agreed to remain as Chair until his successor is identified. During his tenure here at UW, the Division of Urology has thrived, and his support and the autonomy he has granted me have been critical to our success. All of us in Urology wish him the very best. **WU**

STEPHEN Y. NAKADA, MD  
CHAIRMAN AND THE UEHLING  
PROFESSOR OF UROLOGY

## >> PROGRAM NEWS

### 2007-2008 RESIDENCY MATCH RESULTS

CRYSTAL DOVER, MD  
University of Virginia School  
of Medicine

ANDRE KING, MD  
George Washington University

## >> NEW INITIATIVES IN WISCONSIN

# CONCEIVING A SPECIALTY PRACTICE IN MALE INFERTILITY AT UW-MADISON

KRISTINA PENNISTON, PhD, RD  
ASSISTANT SCIENTIST

Dan Williams, MD, wants to improve the quality of reproductive care for men and couples experiencing fertility problems. Traditionally, couples have sought care for infertility from their family providers or OB-GYN specialists. "The underlying assumption traditionally has been," says Williams, "that most of the problem is the woman's." Infertility is a complex problem and is frequently multifactorial in etiology. "Only around 25% of infertile couples are referred for male factor evaluation," says Williams, "yet up to 50% of the time, there is an identifiable male component." Major causes of male infertility include varicoceles and reproductive tract obstruction, together accounting for approximately 55% of male infertility. Other contributing factors are hormonal, immunological, and spermatological in nature; but a full 22% of men have idiopathic infertility, Williams notes. Sorting through the array of test options to determine the etiology of the infertility – which could be genetic, environmental, anatomical, or any combination thereof – involves a complicated diagnostic algorithm. This growing awareness of "male factor infertility" warrants strong urologic care, and Dr. Williams wants to provide it.

Dr. Williams is creating a specialty practice in male infertility in the Madison area. He notes

that there are only two other such specialty providers, with advanced training in male infertility, in the entire state. Having joined the Division of Urology in September 2006 as an Assistant Professor, Dr. Williams already has a growing clinical practice. His specialty training includes a fellowship in Male Reproductive Medicine and Surgery under Dr. Larry Lipshultz at Baylor College of Medicine (Houston, TX) in microsurgical vasectomy reversal (vasovasostomy and the more complex vasoepididymostomy),



**DAN WILLIAMS, MD**  
ASSISTANT PROFESSOR

microsurgical varicocelectomy, sperm procurement techniques and cryopreservation, and treatment of testicular failure and male hypogonadism (testosterone deficiency). In addition to male infertility, Dr. Williams is also interested in erectile dysfunction (ED) and received training during his fellowship in medical and surgical treatments of ED and Peyronie's disease, including placing penile prostheses.

While surgery is obviously a major focus for Dr. Williams, he is particularly passionate about his clinic visits with men and couples confronting infertility. "There is a lot of misinformation out there" about various tests and procedures, Williams notes, and says it's rewarding to correct the misconceptions and provide

evidence-based information "that people can use."

Dr. Williams' goals are to provide men with thorough male factor evaluations, help couples traverse the high-tech and expensive world of assisted reproductive therapies through explaining the various options, enhance coordination of care between urology and obstetrics and gynecology, and, ultimately, develop a clinical research program in male infertility at the UW-Madison. He also notes the need for a local long-term sperm cryopreservation unit and plans to explore this in the future. Dr. Williams has been giving presentations to local groups and doctors, promoting his initiative throughout the community.

Dr. Williams received his medical degree from Columbia University in New York and completed an internship and residency in urology at Northwestern University (Chicago, IL). He splits his time between his clinical and surgical practice at 1 South Park Street and his office at UW Hospital in Madison. **WU**

## >> UPCOMING WISCONSIN EVENTS

TRICIA MAIER

### ● 2007 Spring Urology Grand Rounds Visiting Professor

June 7-8, 2007  
COLIN DINNEY, MD

Dr. Colin Dinney will give a lecture on urologic oncology. Dr. Dinney is Chairman of the Department of Urology at the University of Texas MD Anderson Cancer Center in Houston. Dr. Dinney is also a Professor in the Departments of Urology and Cancer Biology and is holder of the Monteleone Family Foundation Distinguished Professorship for Research of Bladder and Kidney Cancers. His areas of interest include treating patients with all types of urologic malignancies including prostate, bladder and renal cancers.

# SEXUAL HEALTH CLINIC FOR MEN



**DAVID PAOLONE, MD**  
CLINICAL ASSISTANT PROFESSOR

Men experiencing sexual dysfunction can seek treatment and specialized care at a Sexual Health Clinic established by Dr. David R. Paolone. Erectile dysfunction, Peyronie's disease, and premature ejaculation are among the conditions treated through the initiative. The clinic is held every Thursday afternoon at the One South Park Street location. New patients have 45-minute appointments and procedures related to sexual dysfunction are performed during the clinic. The procedures may include intracavernosal injection therapy teaching and verapamil injections for Peyronie's disease.

"My goal is to provide an environment where men are completely comfortable to talk about their issues, and where the appointments are not rushed," said Dr. Paolone. "Having 45 minutes with each new patient allows me to provide in-depth discussions of risk factors, life-style modifications, and the variety of medical and surgical treatments available to men with sexual dysfunction."

Specialized questionnaires are mailed to each patient before his appointment to assist with diagnosis and initiate discussion. Patients are encouraged to bring their sexual partners to their appointments as this also facilitates discussion and optimizes treatment. While many men have been satisfied with relief of their symptoms through medical interventions alone, others have benefited from the focused continuity of care established through the clinic and have gone on to pursue surgical interventions such as the placement of penile prostheses for erectile dysfunction or plaque excisions with grafting procedures for Peyronie's disease. **WU**

## >> CLINICAL TRIALS IN WISCONSIN

### ASSESSING VISUAL FUNCTION IN PATIENTS WITH ERECTILE DYSFUNCTION

JOHN WEGENKE, MD  
CLINICAL PROFESSOR

A double-blind pharmaceutical trial with two marketed PDE5 inhibitors and placebo was conducted in collaboration with Michael Altaweel, MD, FRCSC, (PI), UW Department of Ophthalmology,

and John Wegenke, MD, (Sub-I), UW Department of Surgery, Division of Urology. The study looked at the visual function in healthy subjects or subjects with mild erectile dysfunction.

Approximately 198 subjects (66 subjects per treatment group) were randomized. Stratified randomization was used to ensure 1:1:1 ratio. This study was conducted at multiple sites in the United States.

The primary objective of this study was to evaluate mean changes from baseline to endpoint in dark-adapted bright flash b-wave amplitude on ERG in men receiving daily administration of the study medications compared to subjects receiving placebo for six months.

Additional objectives of the study were to evaluate intraocular pressure, visual acuity with refraction, peripheral vision mean deviation, total error score and hue angle, presence of anterior chamber cellular infiltrate or aqueous flare on slit lamp exam, presence and grade of three types of lens opacification (nuclear, cortical, and posterior subcapsular) and retinal hemorrhage, retinal detachment or tears, retinal atrophy, drusen, arterial-venous nicking, and cotton wool spots on dilated funduscopic exam.

This study is now closed and the results are pending the pharmaceutical sponsor's analysis. **WU**



PHOTO BY JEFF MILLER/UNIVERSITY COMMUNICATIONS

# 2007 ENDOUROLOGY FELLOW

TRICIA THAKER, RN, MS



**SAMUEL  
STERRETT, DO**

Dr. Samuel Sterrett will be joining the Division of Urology as the 2007 Endourology Fellow. Dr. Sterrett completed his urologic surgery residency at the University of Nebraska Medical Center in Omaha, Nebraska. He completed his doctorate at the University of Health Sciences, College of Osteopathic Medicine in Kansas City, Missouri, and his undergraduate work at Vanderbilt University in Nashville, Tennessee.

Dr. Sterrett has an exemplary academic record and has been awarded many honors during his academic training. He has extensive research experience and recently authored an article published in the International Brazilian Journal of Urology titled Radical Nephrectomy Performed by Open, Laparoscopy With or Without Hand Assistance, or Robotic Methods by the Same Surgeon. **WU**

## >> UPCOMING UW UROLOGY AUA EVENTS

TRICIA MAIER

### ● UW Alumni Reception

Sunday, May 20, 2007, 5:30-7:30 PM. We hope you will join us for this annual event. More info to follow on our website.

### ● UW Faculty at the AUA

**Dr. Stephen Y. Nakada** is Course Director for the course entitled Urolithiasis: Surgical Management—Ureteroscopy, Percutaneous and Shock Wave Lithotripsy. This evening postgraduate course offers the practicing urologist a comprehensive, case-based review of the surgical management of urolithiasis. This course will take place on Monday, May 21, 2007, 6:00-8:00 PM.

**Dr. Reginald Bruskewitz** will be giving the Take Home Messages on BPH/LUTS at 10:00 AM on Thursday, May 24, 2007. **WU**

## >> NOTABLE AND NEWSWORTHY

● **DR. SEAN HEDICAN**, ASSOCIATE PROFESSOR, received the 2006 Olympus Prize for the Best Research Paper at the 24th World Congress on Endourology in Columbus, OH for the abstract presentation, “Equivalent survival and superior primary tumor control of cryoablation relative to radiofrequency ablation in a murine model of advanced renal cancer.”

● **DR. WADE BUSHMAN**, ASSOCIATE PROFESSOR, along with **DALE BJORLING**, DMV CO-INVESTIGATOR, and **TRAVIS JERDE**, PhD, were awarded a \$175,000 NIH R01 grant to study prostatic inflammation.

● **DR. JON EWALD** (Dr. Jarrard’s Lab) received a travel award to the

American Association of Cancer Research, “Innovations in prostate cancer research,” meeting held in San Francisco, CA in December 2006. The award was won for an outstanding poster.

● **DR. JOE DOBOSY** and **VIVIAN FU** (Dr. Jarrard’s Lab) won a travel award to the Society of Basic Urologic Research meeting held in Phoenix, AZ for their poster entitled, “Aging-Related Loss of IGF2 imprinting in the prostate.”

● UW Urology DRS. **STEPHEN NAKADA**, **DAVID JARRARD**, **REGINALD BRUSKEWITZ**, **ANDREW GRAF**, **JOHN KRYGER**, and **DAVID PAOLONE** made Madison Magazine’s 2006 Top Doctors list.

● The UW Division of Urology recently completed its 100TH **ROBOTIC PROSTATECTOMY!**

● The 2006 Best Doctors in America list (bestdoctors.com) included our very own DRS. **STEPHEN NAKADA**, **JOHN KRYGER** and **DAVID JARRARD**.

● **DR. STEPHEN NAKADA** has been invited to co-direct the AUA Annual Meeting for Chairpersons in Urology with **DR. RICHARD WILLIAMS**, Chairman of Urology at the University of Iowa, on July 14-15, 2007 at AUA Headquarters, Baltimore, MD. This two-day seminar is an invitation-only course for urology chairpersons within five years of becoming chair.

● **DR. CHARLES WEN**, 2005-2006 endourology fellow, won second prize in the endourology essay contest for his work on ketorolac and ureteral contractility.

● **DR. CURTIS CRYLEN** won the Silban Award for compassion and bedside manner at the 2006 meeting of the North Central Section. His paper, “Minimally Invasive Treatment of Small Renal Tumors, UW Experience,” also won for best clinical poster of the meeting. **WU**

# OUT OF AFRICA

REGINALD BRUSKEWITZ, MD  
PROFESSOR



A recent article in the New York Times highlighted the problems related to pregnancy and childbirth in Central Africa. Most pregnancies are unattended by medical personnel and women birthing in rural areas may develop a hole or fistula between the bladder and vagina, so called vesicovaginal fistulas. Prolonged labor and pressure on the bladder can result in a hole that ranges from dime-sized up to ones which destroy the entire backside of the bladder. I had never seen such a fistula which had been caused by pregnancy and delivery. To my great amazement the New York Times found that upward of 2 million women in Central Africa have fistulas.

In 1984 and 1985 I had the privilege of working with Dr. Thomas Gasser, who spent 18 months as a research fellow in Urology at the University of Wisconsin. He is currently practicing urology at an academic hospital in Basel, Switzerland. We have remained close friends. When he told me he was heading to northern Zambia to do corrective surgery on women with fistulas in a small village, I signed on to team up with Thomas. This would be my first trip to Africa!

Last November we met in Johannesburg, South Africa. From there we traveled in a 4 seater plane to Botswana and on to Zambia. A day in Botswana gave us the great opportunity to travel the back roads in Land Rovers and watch wild life. Giraffe, impala, warthogs, ostrich, guinea hens, and wildebeests (yes, that's how it's spelled) were everywhere. The South African wine isn't bad either. Thomas even picked up a wildebeest skull as a souvenir.

We then flew to Zambia and the Catholic Mission Hospital in Kashikiwi, Zambia to begin our work. Word went out that surgeons would come to operate on women with fistulas. About 35 women came on several days notice, often walking for 2 days. The women spoke Swahili, but the staff at the hospital spoke English with a heavy British accent. We had to listen closely at first until we got used to their proper use of the language. We did a total of 15 fistula repairs over 4 days, leaving about 20 women disappointed.

At our disposal were second hand surgical instruments, little to no air conditioning with temperatures hitting 120 degrees, a 60

watt bulb as the only surgical light and generators usually running, as electrical power came and went frequently. At night we slept under mosquito netting to ward off malaria. It was the dry season so we had running water from 6:45 to 7:30 AM most mornings.

The surgical experience was exhilarating. To operate in Madison with such minimal resources would be irresponsible. In Africa there was no choice. The challenge of getting through procedures with so little made helping these women all the more rewarding.

Now back to Out of Africa. To reiterate Thomas had taken a wildebeest skull on our first day in Botswana. A year ago there had been a larger than usual drought and an estimated 3000 of the animals died. As Thomas was boarding a commercial plane to head back to Basel, he was stopped by security who said he was stealing a government trophy. Off to jail he went. And he had to post \$120,000 cash bail. Five days later he got out of Zambia with a \$200 fine, and I had wished I had picked up a wildebeest skull myself. **WU**



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