



## Message from the Chair



As summer progresses, we are optimistic that the coming academic year will bring new milestones and excitement here at UW Urology. Our **2005 Uehling Lecturer is Alan Partin, MD, PhD**, who is the new chairman at Johns Hopkins and the editor of Urology. This year's Uehling Lectures promise to be fantastic and we hope to see you there October

20-21, 2005. Please note the meeting is also UW Homecoming weekend, so please secure your hotel early.

This academic year also marks the announcement of our second endowed chair in urology, **The John Livesey Chair in Urologic Oncology**. Dr. David Jarrard will be the first urologist to hold this named chair. In his 9 years at UW, Dr. Jarrard has contributed greatly to the prostate cancer program here. Dr. Charles Brendler will be here on September 22, 2005 as a visiting professor, and we will also celebrate the new Livesey chair as part of the festivities.

Dr. Sean Hedican was promoted to Associate Professor this academic year, and we are happy to announce Joy Schluckebier has joined us as our new clinical studies coordinator. Joy steps into the position vacated by Dianne Schmidt, who retired after 20 years of service this past winter. Kristina Penniston, PhD, RD has joined the Division to spearhead research in dietary issues in urologic diseases. Her presence brings a unique focus to our clinical and research efforts. Last, but not least, Ronald Slovick is joining the 1 South Park Faculty as a Clinical Instructor for the upcoming year.

Every new academic year brings promise and excitement, and this year is no exception. I hope you enjoy reading the remainder of the newsletter, and we look forward to seeing you this fall!

*Stephen Y. Nakada, MD*

## Notable and Newsworthy

- **Dr. Jason Gee**, Assistant Professor, has been awarded a Department of Veterans Affairs grant to study the "Synergistic Role of COX-2 and Polyamines in Bladder Cancer Prevention." The study begins October 1, 2005 and is funded for three years.
- **Dr. David Jarrard**, Associate Professor, received a three-year grant entitled "Biological Impact of Senescence Induction in Prostate Cancer." In this study, both in vitro and in vivo approaches using human prostate cancer cells will be utilized to identify and determine the mechanisms underlying senescence to permit the translation of this entity both as a marker of response and for directing therapy.
- **Kristina Penniston, PhD, RD** along with **Dr. Stephen Nakada**, Chair of Urology were awarded **\$9,979** for their grant to "Assess functional status, well-being, and other quality of life measures in patients with recurrent kidney stones."

## New Initiatives in Wisconsin

### InterStim Therapy: The Bladder's Pacemaker

*Jenny Baker, RN  
Clinical Program Coordinator*

Jane, a 53-year-old woman who has suffered from urinary urgency since high school, was among the first group of patients to undergo InterStim implantation at UW Hospital with Dr. Wade Bushman. She was seen initially in the UW Bladder Clinic reporting urinary frequency of 15 to 20 times per day, 2 to 3 times at night, and changing 2 to 3 large pads daily. She was prescribed anticholinergics and instructed on behavioral modification techniques but was unable to tolerate medication side effects and had minimal symptom relief.

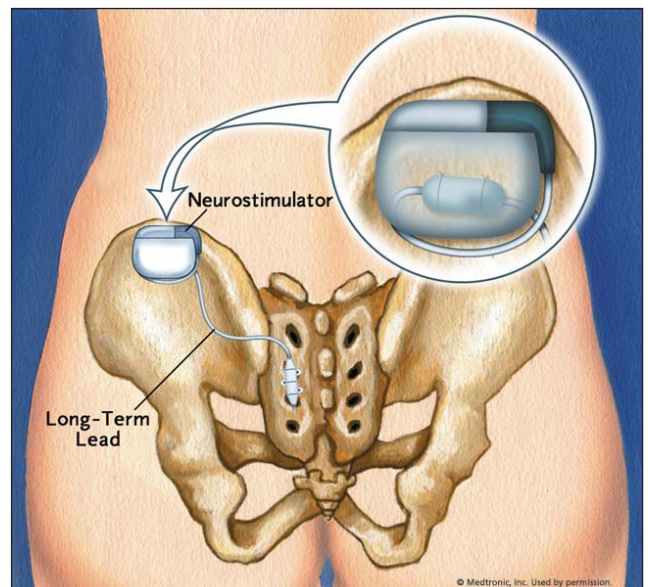
"I was tired of always looking for the bathroom and the anxiety of not knowing if I'd make it to a restroom before I wet my pants," said Jane. "I just felt like I should be able to control my bladder better." Jane's motivation made her a great candidate for sacral nerve stimulation and she was scheduled for InterStim test stimulation in June 2004.

InterStim Therapy is based on the electrical stimulation technology of pacemakers. Patients suffering from urgency-frequency, urge urinary incontinence, and nonobstructive urinary retention who have failed more conservative treatments are finding sacral nerve stimulation to be successful in symptom relief. The treatment is reversible and can be discontinued at any time.

Treatment with InterStim Therapy involves 3 steps: test stimulation, surgical implant, and post-implant follow-up. The test stimulation is preformed as an outpatient procedure using local anesthetic. A lead is placed in the S3 foramen to provide mild simulation of the sacral nerves,

which influence bladder function. The patient will go home for approximately 2 weeks with an external stimulator and test its effectiveness. A voiding diary tracks the patient's progress. If sacral nerve simulation is deemed successful, implantation of a permanent stimulator is performed. Following implant, the neurostimulator is activated. It sends mild electrical pulses via the lead to the sacral nerve. The patient typically experiences a gentle tingling sensation that is not intrusive. Physicians can adjust the stimulation to optimize the therapy for each patient. Follow-up examinations usually occur every 6 to 12 months to monitor the therapy's effectiveness. The patient programmer allows patients to adjust the intensity of the stimulation.

Dr. Bushman has been performing InterStim implantations since June 2004 with an approximately 85% success rate. Currently, Jane urinates 8 to 9 times per day, once at night, and uses one mini-pad "just in case." She felt very reassured with the test stimulation and appreciated the concrete data that showed her improvement. "I hardly know it's there, it's very comfortable. I feel like I have peace of mind knowing that I'll be able to make it to the bathroom." she said. "I can't imagine going back to the way things used to be."



## Research Breakthroughs at UW

### **An Ounce of Prevention May Be Worth a Pound of Cure**

*Bruce Slaughenbaupt, MD*  
*Assistant Professor*

This is exactly what Dr. Jason Gee, Assistant Professor of Surgery, is trying to prove with bladder cancer research in the Division of Urology at the University of Wisconsin. Dr. Gee has been studying the preventative effects of several agents such as Isoflavone Genistein, Difluoromethylornithine (DFMO), and Celecoxib on bladder tumor cells. His goal has been to see if these compounds can prolong the disease-free interval or even cure patients with bladder cancer.

As many of you are aware, superficial bladder cancer can often be treated effectively with very low morbidity. However, once it has invaded through the bladder muscle wall, the surgical treatment becomes much more debilitating and usually requires cystectomy and urinary diversion or creation of a urinary reservoir. Laboratory data and several recent clinical trials have suggested that COX-2 selective inhibitors, DFMO, and dietary supplements in the isoflavones and retinoid families may prolong the interval to tumor recurrence or prevent progression from superficial to invasive disease.

Dr. Gee's interest in bladder cancer began when he was a urology resident at the Lahey Clinic Medical Center in Massachusetts. He then pursued a Urologic Oncology Fellowship at the University of Texas MD Anderson Cancer Center in 2002 and 2003. While there, he received a pilot grant for the

bladder cancer SPORE project. Dr. Gee joined the University of Wisconsin faculty in 2003 and also has an appointment at the William S. Middleton Memorial Veterans Hospital, where he maintains his research lab. There, he has been working hard to establish a tumor tissue bank and matching it with clinical outcomes data to help yield a clearer understanding of the molecular findings induced by various agents upon bladder cancer cells.

Dr. Gee has recently been approved for an NIH/NCI sponsored clinical trial of Genistein in patients with superficial and invasive bladder cancer. The purpose of this study is to identify the biological effects of this dietary supplement, which is found in natural dietary soy products, on bladder tumor tissue. For patients with bladder cancer, this work may help provide an effective therapy to slow tumor progression.



*Physicians wishing to learn more about this and other clinical trials being coordinated by Dr. Gee or physicians with patients that may be candidates for enrollment in these trials can contact Dr. Gee at 608-262-0759.*

## Program News

### Welcome to the 2005 PGY-1 Urology Residents:

*Tricia Thaker, RN, MS*



#### **Matthew Christian, MD**

*Dr. Christian received his medical degree from Tufts University School of Medicine in May 2005. He graduated from Drew University with a BS in Biology in May 1999. Dr. Christian has an extensive volunteer history and has been very active in the Boy Scouts of America. Throughout his academic career he was involved in various extracurricular activities and was the leading percussionist in the Tufts Music Club. Dr. Christian has participated in many research projects, most recently as a student research fellow with Dr. Theoharis Theoharides at Tufts University School of Medicine. Together with Dr. Theoharides, Dr. Christian investigated the effects of stress on mice with bladder inflammation.*



#### **Christopher Manakas, MD**

*Dr. Manakas received his medical degree from Indiana University School of Medicine in May 2005. He graduated from the University of Urbana-Champaign with a BS in Liberal Arts and Science with High Distinction in Chemistry in May 2001. Dr. Manakas is an accomplished musician and has participated in the University of Illinois Marching and Basketball Band, Jazz Ensemble, and Concert Bands. He has participated in several research projects including the investigation of robotic prostatectomy with Dr. Chandru Sundaram at Indiana University.*

## Upcoming Events in Wisconsin

### 2005 Fall Urology Grand Rounds

#### Visiting Professor

*September 22, 2005 – Charles B. Brendler, MD*

**Dr. Charles Brendler** will give a lecture entitled, "Open Versus Robotic-Assisted Laparoscopic Radical Retropubic Prostatectomy: Comparison of Techniques and Outcomes." Dr. Brendler is Professor and Chief of Urology at the University of Chicago Medical Center. Dr. Brendler has a special interest in prostate cancer and his clinical and research efforts are dedicated to the treatment of men with this disease. Dr. Brendler is also in Madison to celebrate Dr. David Jarrard receiving the John P. Livesey Chair in Urologic Oncology.

### 2005 Uehling Lectures

The University of Wisconsin Division of Urology will be holding its annual David T. Uehling Lectures October 21-22, 2005 at the Monona Terrace® Community and Convention Center here in beautiful Madison, Wis. We have an excellent urologic curriculum planned discussing all aspects of prostate cancer. Our keynote speaker this year is **Dr. Alan W. Partin, MD, PhD** from The Johns Hopkins Medical Institutions in Baltimore, Maryland. Dr. Partin is the David Hall McConnell Professor and Chair of the Department of Urology and the Brady Urological Institute and Urologist-in-Chief at The Johns Hopkins Hospital.

### 2006 Winter Urology Grand Rounds

#### Visiting Professor

*February 16, 2006 – Ananias Diokno, MD*

**Dr. Ananias Diokno** will give a lecture on neurourology. Dr. Diokno is Chairman of the Department of Urology at William Beaumont Hospital in Royal Oak, Michigan.

### 2006 Spring Urology Grand Rounds

#### Visiting Professor

*June 8, 2006 – Margaret S. Pearle, MD*

**Dr. Margaret Pearle** will give a lecture on endourology. Dr. Pearle is a Professor in the Department of Urology at the University of Texas Southwestern Medical Center. She also holds a joint appointment with the Mineral Metabolism Center and is holder of the Ralph C. Smith Distinguished Chair in Urologic Education. Dr. Pearle's research interests include evaluation of dietary and medical therapies for kidney stone prevention, assessment of outcomes for minimally invasive surgical treatments and development and assessment of resident teaching tools.

## Clinical Trials in Wisconsin

*John Wegenke, MD*  
*Associate Clinical Professor*

Each year thousands of clinical trials are performed worldwide to evaluate new pharmaceutical compounds, evaluate new application of existing compounds, or compare existing compounds for effectiveness, safety, and convenience.

In the USA alone, 2,000 to 3,000 sponsored clinical trials are conducted each year. Here at the University of Wisconsin over 200 industry sponsored clinical trials are performed with approximately 75 of these being conducted through the Office of Clinical Trials. A number of these trials are conducted in the Division of Urology.

The benefits of these trials are to provide society with new medication, alternatives to current medication, or new use of existing medications. Some of these medications have the benefit of being more effective, some have a more specific mechanism of action, and some have a broader or expanded use.

- New drugs or reformulation of existing drugs can often provide more effective administration IM, IV, oral, nasal, sublingual, or transdermal.
- Some new formulations provide a more rapid onset or a longer duration of action - up to a yearly administration.

- Drugs can occasionally be restructured to provide less interaction with other drugs or food.
- Many new compounds are engineered to provide better or equal efficacy with fewer side effects making compliance a lesser issue.
- Although not a frequent benefit of new drugs, occasional “me too” drugs create competition and lower cost of medications.

In future articles, we will try to describe some ongoing studies at University of Wisconsin Urology that demonstrate some of these principals.

## Giving Opportunities

The Division of Urology welcomes your donations throughout the year. We encourage you to support our mission by donating annually to one or more of the following funds:

- **The Ira Sisk Memorial Resident Fund** to support resident education.
- **Urology Research Fund** to

support research in the Division of Urology.

- **The John B. Wear Lectureship** to support lectureships in voiding dysfunction.
- **The “Annual Fall Uehling Lectures” Fund** to support the educational portion of the annual fall symposium.

To send a contribution in support of our research programs or as a tribute, please make your check payable to “Division of Urology” and mail it to:

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