

Visiting scholars from China raise money for coronavirus supplies

By HELEN ADAMS
adamshel@musc.edu

A surgeon from China who's currently a visiting scholar at MUSC is raising money for colleagues dealing with a respiratory virus in Wuhan, the center of an outbreak. The World Health Organization calls the infectious illness novel coronavirus, or 2019-nCoV.

Changhai Li is a liver surgeon from Tongji Hospital in Wuhan, in Charleston for a research project. He's in touch with colleagues back in Wuhan and plans to return there this summer.

As a friend translated for him, Li described his emotions. "I feel sad about the way things are unfolding over there. My colleagues are working on ground zero. And I feel for them. My thoughts go to them, and I want to do whatever I can to help them in a meaningful way."

Media reports have noted that hospitals have been running low on supplies as they take care of more and more patients suffering from the new coronavirus. So Li started a fundraiser on the website GoFundMe with a goal of \$10,000 to buy protective masks, gowns and goggles for his hospital.

During an interview on the MUSC campus, surrounded by fellow scholars Ying Chao, Peng Chen, Zhenxiao Tu, Xuan Wang and Chaowen Zheng, Li

noted that they'd raised almost half that amount in just four days, thanks to the Charleston Chinese community, colleagues at MUSC and beyond.

Chao, the M.D./Ph.D. student translating for Li, said that these supplies are in high demand. "The materials they're trying to get right now have been very short of supply in both China and the U.S. In some places, the price has been raised to four times the normal price."

As of Feb. 5, the coronavirus had infected more than 24,000 people in China, causing 500 deaths. To put that in perspective, more than 1.3 billion people live in mainland China.

MUSC senior leaders have announced that no institution-related travel to China will be authorized until further notice. The restriction does not include personal travel. There are confirmed cases of coronavirus in other countries, including the U.S., but none in the Southeast.

The Centers for Disease Control and Prevention advises frequent handwashing to protect yourself from respiratory viruses, along with avoiding touching your face with unwashed hands, avoiding close contact with people who are sick, staying home if you're sick, covering your cough and frequently cleaning surfaces

See **FUNDRAISER** on page 10



Photo by Sarah Pack

From left: M.D./Ph.D. student Ying Chao, Dr. Changhai Li, Dr. Chaowen Zheng, Dr. Xuan Wang and Ph.D. student Peng Chen talk about the effect of a new coronavirus in China.

MUSC Health named 2020 SCHA Capstone Award winner

Staff Report

MUSC Health was named as one of two inaugural winners of the South Carolina Hospital Association's Capstone Award, a recognition of hospitals and health systems in South Carolina that are exemplars in pursuing excellence in delivering highly reliable care, developing a healthy workforce and building healthy communities.

The announcement was made at the 2020 SCHA annual meeting on Wednesday, Feb. 5. The Capstone

Award, given in conjunction with Live Healthy SC, the state's first-ever health improvement plan, serves as the highest honor that the SCHA bestows each year and represents the expansive efforts and extraordinary results that South Carolina hospitals like MUSC are achieving for their patients and communities every day.

The SCHA recognized MUSC for having implemented a suite of best practices to improve care delivery with constant communication and

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4 Telemedicine and opioids Program provides resource for pregnant women.

Women's Health Interest Group helps researchers understand differences.

3 MUSC Health & Well-Being
5 Meet Chad Robinson
10 Letter from President Cole

AROUND CAMPUS

PEOPLE

Brandon Brown



Brandon Brown, M.D., assistant professor and co-director of the Fundamentals of Patient Care theme and director of inpatient medicine in the Department of Family Medicine, was named a fellow in hospital medicine by the Society of Hospital Medicine.

Beth Hansell



Beth Hansell, vice chair of finance and administration for the Department of Pathology & Laboratory Medicine, has been selected to receive the 2020 Pathology Department Administrators

(PDAS) Distinguished Service Award from the Association of Pathology Chairs. She was recognized for her leadership and extraordinary contributions to the field of academic pathology administration. The award will be presented at the 2020 Association of Pathology Chairs annual meeting in San Diego, California.



Photo by Sarah Pack

Coastal Crisis Chaplaincy chaplain Edison De Arco, left, carries stuffed animals to his car while Sue Schady, Kids Comfort Kit coordinator, looks on. The items, which will be distributed in kits by the chaplaincy to children during crisis situations, were collected and donated by the MUSC Youth Collaborative.

Edward McCutcheon



Edward McCutcheon, M.D., will join the MUSC Health Lancaster and Chester divisional team as chief medical officer. McCutcheon is a board-certified emergency medicine

physician and practices at Atrium Health University City Hospital in Charlotte where he was president of the medical staff. In his new role, he will serve as the liaison between the medical

staff and hospital administration. He will begin officially in mid-April.

Robert Sade



Robert M. Sade, M.D., Distinguished University Professor, was recognized by the Expert Institute for placing in the top 0.11% of scholars who have written about professional ethics for more than 10 years. The

organization recognized Sade as a world expert in clinical ethics.

EVENTS

Southeastern Wildlife Expo

The 38th Southeastern Wildlife Exposition, a three-day event celebrating wildlife, nature art, conservation research and sporting life, will take place Feb. 14-16 in various areas of Charleston. Featured events include live animal shows with conservationist Jack Hanna, fly fishing, dog demos and so much more. Tickets are available online for multiple locations. Visit www.sewe.com.

Black History Month event

The North Charleston Police Department and the NCPD Cops Athletic Program will host a Black History Month 2020 celebration at 11 a.m., Saturday, Feb. 22 at City of North Charleston Council Chambers, 2500 City Hall Lane in North Charleston. For more information, call 843-740-2800.

Lowcountry Heart Walk

Lace up your shoes and join a friend or team and participate in the American Heart Association's 2020 Lowcountry Heart Walk, Feb. 29, which will be held at Brittlebank Park. Activities begin at 8 a.m. and the walk starts at 9. MUSC has several teams that will participate and has set a fundraising goal of \$150,000 to help build a healthier Lowcountry community. To register or support a team, visit www.lowcountryheartwalk.org.

MUSC CATALYST news

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RECYCLEMANIA TRIVIA

What new compostable service-ware items does Main Hospital cafeteria now use?



Respond to recycle@musc.edu for a chance to win a prize

musc.edu/gogreen

The first three correct responses are awarded a prize

GoGreen

MUSC leads the way at 2020 Charleston Health & Wellness Expo

MUSC Health recently served as the title sponsor of the Charleston Health & Wellness Expo for the third year since its inception in 2017. The Charleston Health & Wellness Expo is the largest event of its kind, bringing together health care providers and health-promoting businesses from across the state to give community members access to a wide range of information and resources that enable them to make positive health behavior changes.

MUSC Health led the charge at the event, offering hundreds of attendees free screening services, including fall-risk assessments with MUSC physical therapists, InBody composition assessments from the Wellness Center and blood pressure screenings from MUSC Health Primary Care.

Additionally, expo attendees were able to meet with patient navigators from Hollings Cancer Center, MUSC Digestive Health and Mental Health Services, enabling community members from across the Tri-county area to gain access to the highest-quality care and easily navigate their patient experiences.

MUSC providers were joined by nearly 100 other health and wellness exhibitors from across the state of South Carolina, providing expo attendees a unique opportunity to learn, engage and be active participants



Photo Provided

Dietitian Debbie Petitpain talks with a Health-Links Magazine coordinator at the Charleston Health & Wellness Expo at the Omar Shrine Auditorium.

in their own health.

Furthermore, attendees were able to attend interactive educational sessions with MUSC providers. These

MUSC Health & Well-Being

By Susan L. Johnson, Ph.D.,
MUSC Office of Health
Promotion



included a lifestyle medicine Q&A session with MUSC certified lifestyle medicine physician Erica Blank, M.D., as well as a deep dive into the Mediterranean diet with Debbie Petitpain, MUSC wellness dietitian and national spokesperson for the Academy of Nutrition and Dietetics. Attendees were also able to participate in a stability and mobility fitness class with MUSC Wellness Center trainer James Johnson.

This year's Charleston Health & Wellness Expo also featured the first ever "Best in Health" awards, honoring health care providers from across the state. MUSC was honored in several categories and was the most highly awarded health system in the state.

Congratulations to all of the MUSC Health providers and departments for being honored as a 2020 Best in Health award recipients.

Earl B. Higgins Leadership in Diversity Awards nominations closing soon

MUSC's Department of Diversity, Equity and Inclusion is currently accepting nominations for the three 2020 Earl B. Higgins Leadership in Diversity Awards that include:

- The Earl B. Higgins 2020 University Leadership in Diversity Award
- The Earl B. Higgins 2020 Student Leadership in Diversity Award
- The Earl B. Higgins 2020 MUSC Health Leadership in Diversity Award

Nominees should be individuals who have contributed significantly to diversity in three of five areas:

- Enriches diversity through student/employee recruitment, retention and enrichment.
- Improves/enhances diversity through excellence to patients, families and visitors.
- Advances race relations or gender issues or disabled, aging or

international constituencies.

- Takes initiative to affect/influence organization/work environment as it relates to diversity.
- Promotes improvements that will benefit understanding of diversity at MUSC and the community.

Entries must include the nomination form and two letters of endorsement for each nominee. All submissions should be received by 5 p.m., Monday, Feb. 10 to burnham@musc.edu or faxed to 843-792-1288. Awardees will be announced in March.

The 2019 Earl B. Higgins Awards will be presented at a reception on Wednesday, April 1 from 5 to 6 p.m. at the Wickliffe House on Ashley Avenue.

For information, call 843-792-1072 or email swintona@musc.edu.

Staff notice of Magnet Recognition Program site visit

- Your organization has applied to the American Nurses Credentialing Center (ANCC) Magnet Recognition Program® for redesignation of the prestigious Magnet designation. This designation recognizes excellence in nursing services.

- You have an opportunity to participate in the evaluation process and are encouraged to do so. We will be coming to your hospital, Feb. 24, 25, 26 and 27, 2020 for site visits.

- Comments may be e-mailed or mailed to the Magnet Program Office prior to the site visits. All phone comments to the Magnet Program Office must be followed up in writing. Your comments are confidential and never shared with anyone in your organization. If you choose, your comments may be anonymous but must be in writing.

- There will also be time set aside to speak with the appraisers during the site visits. Time, date and location of meeting rooms will be provided by your organization.

- Your comments must be received by Feb. 14, 2020.

Phone 866-588-3301 (toll-free)

Email: magnet@aoa.org

Write: Magnet Recognition Program
American Nurses Credential Center
8515 Georgia Ave., Suite 400
Silver Spring, MD 20910-3492

- Your organization has submitted written documentation for the appraisal team to review. That information is available to you for review at <https://muschealth-internal.submissiondoc.org/index.html>.

Telemedicine helps pregnant women tackle taboo issue

BY HELEN ADAMS

adamshel@musc.edu

Sarah, a military veteran living on the coast of South Carolina, knew she had a problem. The opioids prescribed for her pain were becoming a headache of their own.

“We trust our doctors. I went to my pain management doctor and said, ‘I feel like I’m getting addicted to this. We have a problem. I’m waking up sick.’ And instead of decreasing my medication, he added another medication on top of it.”

Her opioid use disorder became an even bigger problem when she got pregnant. But Sarah, who asked that her last name not be used to protect her privacy, got help at MUSC Health in Charleston. A psychiatrist and an OB-GYN worked together to coordinate her care.

Sarah was one of the lucky ones.

Nationally, less than 20% of pregnant women with opioid use disorder get treatment. Not getting treatment has been linked to poor fetal growth, preterm birth, birth defects and even the death of the mother or child. Babies born to mothers who use opioids, even under the supervision of doctors, may also suffer from neonatal abstinence syndrome, or NAS – they go through withdrawal after birth.

But psychiatrist Constance Guille, M.D., an associate professor in the Department of Psychiatry and Behavioral Sciences, said there are effective treatments. She and colleagues at MUSC have been studying the best ways to help women with opioid use disorder during

and after pregnancy.

Their latest study focused on whether telemedicine, which uses technology to connect doctors with patients for online appointments, is another way to reach women who live too far away to get to Charleston on a regular basis. It was published online in JAMA Network Open.

In a trial involving 98 women at four obstetricians’ offices, the researchers explored whether moms-to-be who saw doctors through telemedicine did as well as women who saw doctors in person for opioid use disorder treatment. All of the women saw the doctors in person for their first appointments, as required by law, because controlled substances were involved.

After that, Guille said that there were no statistically significant differences in important maternal and newborn outcomes between the telemedicine group and the women who continued to see their doctors in person during and after their pregnancies.

That has important implications for mothers and children, Guille said. Through telemedicine, doctors can reach patients in rural areas, including people who don’t have the time or money to go to bigger cities for treatment.

“Integrated, collaborative care, where obstetricians and psychiatrists can work together, is the ideal model for treatment of pregnant women with opioid use disorder. It’s been really hard to create that model from a financial standpoint and because there aren’t a

AWARD *Continued from Page One*

rounding practices, including weekly safety rounds, daily safety huddles and daily check-in calls. Also cited was MUSC’s Office of Health Promotion for its efforts to create a culture of well-being through supporting initiatives and activities, including the MUSC Urban Farm, as well as MUSC’s extensive community health efforts that include

Healthy Tri-County, a multi-sector regional initiative to improve health outcomes in Berkeley, Charleston and Dorchester counties. The SCHA pointed also to MUSC’s leading efforts to address food insecurity with “Kids Eat Free at MUSC” and “Farmacy,” a weekly offering of free fresh produce and health information in downtown Charleston.



Photo by Sarah Pack

Dr. Lisa Boyars, one of the psychiatrists involved in a study comparing telemedicine to in-person appointments for pregnant women struggling with opioids, shows how she does

“Integrated, collaborative care, where obstetricians and psychiatrists can work together, is the ideal model for treatment of pregnant women with opioid use disorder.”

Constance Guille, M.D.

lot of people with expertise in this area,” Guille said.

“Being able to take the people who specialize in this area and maximize their reach to obstetric practices by telemedicine is just a really great way to get women lifesaving treatment for this chronic disease and reduce maternal opioid overdose deaths.”

Not all obstetricians have a telemedicine option, but the number is increasing across South Carolina. MUSC is a key player in the expansion through its Center for Telehealth, one of only two National Telehealth Centers of Excellence in the country, and the headquarters of the South Carolina Telehealth Alliance.

Treatment for opioid use disorder, whether the patient is pregnant or not, often involves medication-assisted treatment, also known as MAT. It combines medication with counseling. The doctors prescribe drugs such as buprenorphine, which reduces opioid craving, withdrawal and the risk of overdose and talk with the women about what led to their addiction and ways to change their behavior.

Guille women need to continue treatment for opioid use disorder after their babies are born. “A lot of women will start treatment in pregnancy and do really well. But then in the postpartum period, they are often without insurance and can’t afford to continue their treatment and relapse. Drug overdose is one of the leading causes of maternal mortality in the postpartum period.”

Sarah encouraged other women struggling with opioid use disorder to get help. “There’s still a lot of taboo about it. I think we, a lot of us, feel very guilty, very alone. But look for resources. I know there are Facebook groups for pregnant mothers who are on any type of maintenance program. All of those things are so awesome, and it’s important to know – because I didn’t know it.”

MEET CHAD



Chad Robinson

Department; How long at MUSC
College of Dental Medicine; second year

How are you changing what's possible at MUSC

I am furthering my education at MUSC to help shape the future of dentistry by learning new advanced techniques that will ultimately lead to better patient care and quality of work.

Family

Wife, Sierra Robinson; daughters, Ansley and Lyla

A unique talent you have

I can dunk a basketball

Favorite football team

BYU Cougars

Favorite restaurant

Vicious Biscuit

Best thing about living in Charleston

Being close to family and the ocean

Favorite movie quote

*"We must live by faith not by fear."
— Quentin L. Cook*

MUSC Women's Health Interest Group



Please join us for our quarterly meeting on

Monday, February 24th

12:00-1:00pm

BSB 100

Lunch will be provided

This workgroup meets quarterly to discuss potential and ongoing cross-campus research collaborations in the field of sex and gender differences.

 This group is sponsored by the MUSC SCORE
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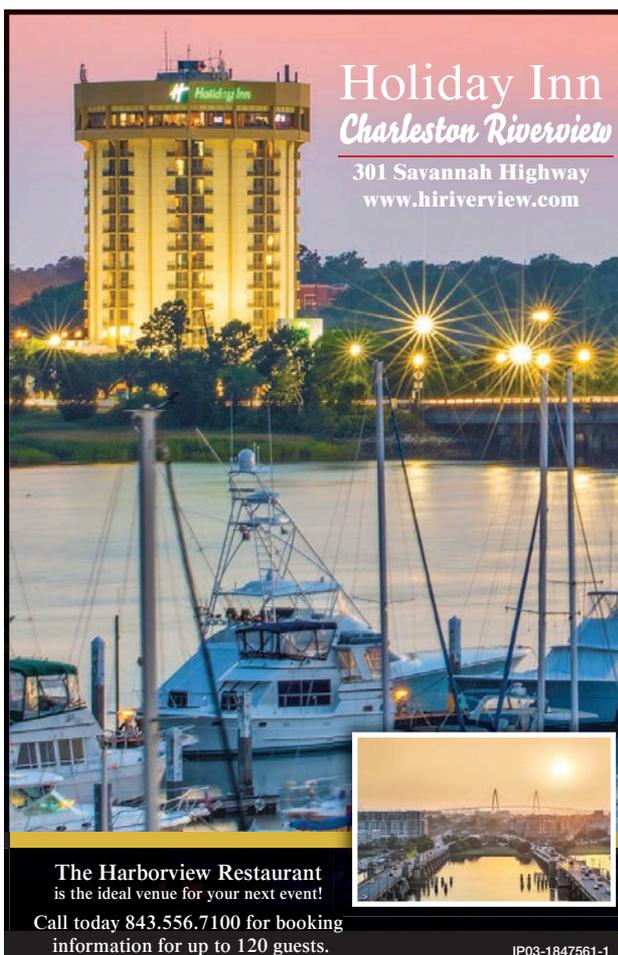
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Open to the community. To RSVP or for details, please visit:
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Contact Dr. Cristina Smith for more information:
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Changing What's Possible

photos and manuscripts courtesy of Avery Research Center at the College of Charleston

IP03-1847561-1

New Women's Health Interest group 'scores' at takeoff

By CINDY ABOLE
aboleca@musc.edu

In 2018, MUSC received renewal of a National Institutes of Health (NIH) grant reconfirming it as a Specialized Center for Research Excellence (SCORE) on sex differences – one of only six in the country. The SCORE program was established by the NIH Office of Research on Women's Health to promote translational research and understand sex and gender differences in women's health while establishing support hubs for research that can provide training, mentoring and education.

No one is more excited about this renewal than Aimee McRae-Clark, Pharm.D., professor in the Department of Psychiatry and Behavioral Sciences and director of the Office of Research Integrity. She also heads up the campus' new MUSC Women's Health Interest

group established in 2019.

"I'm excited about this workgroup because it highlights some of the great work that's being conducted around campus. There's more sex and gender research work at MUSC that people just don't know about mostly because it's being conducted in small groups within a department. This group wants to improve by connecting people, sharing ideas and promoting resources," said McRae-Clark.

The Women's Health Interest group meets quarterly as a midday meeting typically in Room 125 – the Solomon Conference Room – in the Gazes Cardiac Research Institute.

The group has already met three times since its inception and has identified ongoing sex and gender work that's being conducted in OB-GYN, cardiovascular research and addiction research as a jumping in point. To increase the group's visibility, they invite guest speakers from



Photo by Anne Thompson

Members of MUSC's SCORE principal investigators include (Top row, from left) Dr. Mike Saladin, Dr. Gloriane Schnabolk, Dr. Kevin Gray, Nathaniel Baker; Second row, Drs. Rachel Tomko, Peter Kalivas, Rachel Penrod-Martin, Carmela Reichel; Third row, Drs. Constanza Garcia-Keller, Jenna McCauley, Connie Guille; bottom row, Dr. Kathleen Brady, Dr. Brian Sherman, Amanda Wagner, Dr. Viswanathan Ramakrishnan and Dr. Aimee McRae-Clark.

all areas of campus to discuss research topics and other areas of interest. During its fall meeting, researchers

from MUSC Hollings Cancer Center discussed the value of connecting

See **GROUP** on page 12

David Kent and Charlotte Lemon



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MUSC doctors deploy Botox to help repair a hernia

BY LESLIE CANTU

cantul@musc.edu

Botox may be most famous for helping celebrities maintain an illusion of youthfulness, but the drug is increasingly used by doctors far from the cosmetic realm – including MUSC Health trauma surgeon Evert Eriksson and physiatrist Emily Darr, who used the toxin to prepare a patient for an otherwise unfeasible hernia repair.

“When he came up with the Botox, I thought ohhhh-kayyy,” recalled patient Jacqueline Goff.

But, she added, she trusts Eriksson with her life. That’s because Eriksson, Trauma medical director in the Division of General and Acute Care Surgery, was on call the night of June 22, 2018. That’s the night that a wrong-way driver crashed into a car that Goff and her best friend, then-Congressional candidate Katie Arrington, were in. The pair suffered severe traumatic injuries. The other driver died at the scene.

As the Congressional candidate who had defeated Rep. Mark Sanford in the primary election not two weeks earlier, Arrington received nationwide coverage. Goff wasn’t a public figure and didn’t get the same level of media attention, but her case was actually far more difficult to treat, Eriksson said.

“Jackie’s injury is considerably more complex than Katie’s. Katie’s is a more typical car wreck injury that we see. Her injuries are something we deal with every day. Jackie’s injury is a whole different ball game and much harder to get a good outcome from,” he said.

The seatbelt had sliced through Goff’s abdomen like a taut nylon cord through wet clay. The injury required multiple surgeries during Goff’s initial hospital stay just for basic repairs to internal organs. While Arrington went home after two weeks, Goff remained in the hospital for 62 days before transferring out for rehab.

“This is the worst seatbelt injury I’ve ever seen,” Eriksson said. “Among all the attending doctors as well, no one’s seen this bad of an injury from a seatbelt.” Goff needed an entire reconstruction of the left side of her abdominal wall after all the muscle was pulled off of the pelvis bones.

Goff left the hospital with a bridging biologic mesh acting as a stand-in for her abdominal wall – the muscles that normally “keep all her insides inside,” according to Eriksson. Because of the injury, her right and left abdominal muscles no longer met in the middle. Even with the mesh and the stiffest Spanx she could find, she still had a visible hernia. And it wasn’t



Photo by Lauren Hooker

Dr. Evert Eriksson, patient Jackie Goff and nurse practitioner Amanda Waite shortly before Goff was discharged after a successful hernia repair.



Photo by Sarah Pack

Eriksson keeps this 3-D printed model of Goff’s abdominal injury as a teaching tool.

some small bulge, either, Goff said. She looked several months pregnant.

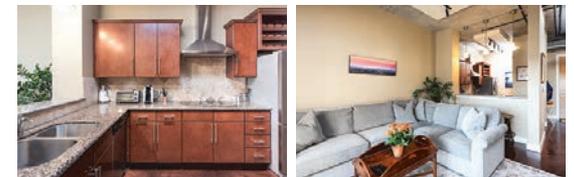
Eriksson and Goff knew she would need to return for surgery to repair the hernia, but first she went home to the New Orleans area to recuperate. It was another four to five months at home before she even felt strong enough to return to yoga, Goff said.

Living with the hernia wasn’t really an option, though.

“Your belly muscles being to the midline in front

See **BOTOX** on page 9

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IP04-1802115-1

Public enemy number one: Single-use plastics

By **BRYCE DONOVAN**

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Good riddance, single-use plastics. At the beginning of 2020, the City of Charleston — along with the entire MUSC campus — made the call to move away from many plastics in favor of more environmentally friendly materials, such as paper, and reusable materials, such as glass and metal.

Plastic bags, straws, Styrofoam coffee cups? They are so yesterday's news. Now when you get something to go from any university-operated cafeteria, it will leave in a compostable, recyclable box or cup.

An undertaking this massive and widespread is never easy, but officials and employees at MUSC worked together to slowly phase out and then eliminate plastic straws and flimsy to-go bags for compostable substitutes. If you're a real go-getter, bringing your own containers, such as a reusable coffee mug, will not only get you a pat on the back from Mother Nature but a \$0.25 discount on your drink as well. Plus, PJ's Coffee and Starbucks are all offering a 10% drink discount for bringing your own cups.

John Brooker, communications specialist for MUSC's Sustainability and Recycling program, naturally thinks that this is a great move for MUSC and Charleston.

"There are a lot of different ways people weigh



Single-use plastics, such as disposable water bottles, are a thing of the past in the City of Charleston — and by extension on the MUSC campus — as the new ban went into effect on Jan. 1, 2020.

Photo by Unsplash

sustainability and judge it, but I think the big win here is that we're all working toward making Charleston's waterways and the Lowcountry cleaner," he said. "And given the fact that MUSC has the goal of building healthy communities, this is just such a smart and logical move."

Christine von Kolnitz, sustainability manager at MUSC, echoed Brooker's sentiments.

"Instead of everything going in the trash when we're done with it, a lot more will be going to compost and recycling now," she said.

Sodexo, the company used by MUSC to handle its food services, has worked hard to make the changes and is already looking down the road, exploring even more

compostable options.

In patient rooms, clinical staff will now refill existing cups and pitchers versus giving out new cups each time. In waiting rooms, the use of cups follows the same eco-friendly rules as the cafeterias.

"The best thing people can do is walk around with their water bottles. Don't get a cup to begin with, whether it's Styrofoam or not," von Kolnitz said. "It's going to take time, but eventually new habits will be formed, and then we won't even think twice about them."

Single-use Plastics: Changes you'll notice around MUSC's campus

Out:

- Plastic single-use carryout bags.
- Polystyrene (also known as plastic foam or Styrofoam).
- Nonrecyclable and noncompostable disposable food containers and service wares, such as bowls, boxes, clamshells, cups, plates, stirrers and straws.



In:

- Reusable bags made of cloth or other washable fabric.
- Recyclable paper bags.
- Disposable food containers and service wares made out of materials that are

New compostable clamshell food carriers have replaced Styrofoam ones.

compostable or accepted by the Charleston County recycling program (example materials include aluminum, cardboard, glass, paper, recyclable plastics).

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BOTOX *Continued from Page Seven*

help stabilize the back, helps stabilize the entire body for activity,” Eriksson said. “So it’s an important thing to get the muscles back to the middle for long-term recovery.”

Finally, in the summer of 2019, it was time to plan the hernia repair surgery. Eriksson ordered CAT scans to study the current state of Goff’s abdominal wall. Unstretched for a year, the right and left abdominal muscles had retreated to their sides, shortening and thickening even further. Eriksson knew he wouldn’t be able to pull the muscles back into place manually.

But he’d heard about cases where Botox was used to relax muscles enough that they could be pulled and stretched back into position. He didn’t know of anyone at MUSC Health who had used such a technique, so he spoke to hernia experts around the country and came to the conclusion that Botox was Goff’s best chance for recovery. Without it, he said, she’d likely have a bridging repair – a surgical fix that could lead to ongoing issues with mobility and strength and had a high chance of hernia recurrence.

Eriksson then reached out to Darr, a physical medicine and rehabilitation doctor who uses Botox in her practice. For children with cerebral palsy, for example, Botox injected into the calf relaxes the muscle from a contracted state to help them walk normally rather than on their toes. Botox is also used to treat chronic migraines, excessive sweating and amblyopia, a condition also known as lazy eye.

Darr hadn’t used Botox in the way Eriksson was proposing, but she looked at the research he sent. Botox is made from botulinum toxin, a potentially deadly neurotoxin. In large doses, the toxin causes the illness botulism, paralyzing muscles throughout the body, including the muscles needed to breathe. In smaller doses used cosmetically, the toxin paralyzes the tiny muscles in your face so they can no longer contract and give you frown lines. The Food and Drug Administration has approved the use of up to 40 units of Botox Cosmetic into the forehead.

Darr, relying on her experience and the latest research, calculated that 300

“Difficult cases demand advanced techniques, which are ultimately generated through collaborative thinking.”

Bruce Crookes, M.D.

units would be an appropriate dose for Goff. She used ultrasound to guide her with precision as she injected the neurotoxin into the muscle.

“Botox in your forehead makes you look beautiful – Botox in my stomach makes it look like a bowlful of jelly,” Goff recalled texting to Amanda Waite, the nurse practitioner who cares for Eriksson’s patients. The two women had become close over the course of Goff’s care. Waite showed the text to Eriksson, who said that was exactly the result he was looking for, Goff said.

Eriksson and Goff returned to the operating room in August for the final hernia repair. With Goff’s muscles now relaxed from the Botox, Eriksson could pull them from their shortened and thickened state – rather like Silly Putty, he explained – to a longer, thinner position where they met in the middle. He sewed the muscles together, giving her a functional abdominal wall. Once the Botox wore off, he explained, the muscles began to adapt to their new stretched position.

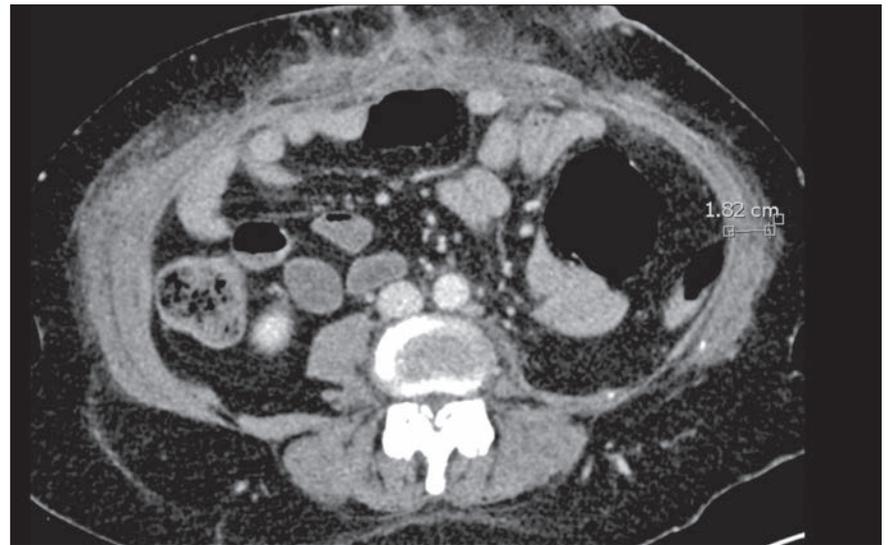
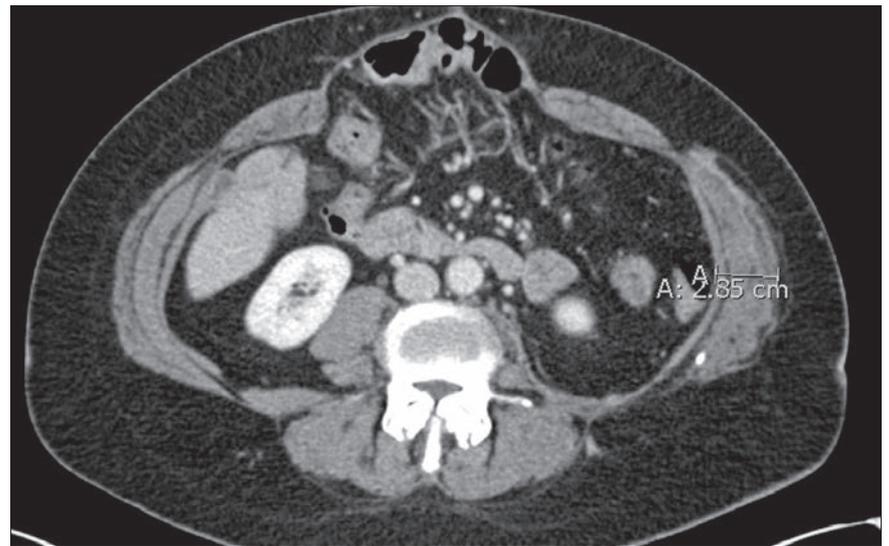
Eriksson said this is a technique he can envision using again.

“I do think it’ll be something we’ll use more in the future. We had a very good result with this. We are getting more referrals for this type of repair, and I think it’s an important tool. The data is getting stronger that it’s a good tool, and as that data becomes more robust, I think it will be a lot easier to get these patients preapproved for it,” he said.

For Goff’s surgery, he noted, he had to write a letter to the insurance company to make a case for using Botox.

Goff’s case shows the type of complicated repair that MUSC Health doctors will be able to perform in the planned Advanced Hernia Center.

“This is an excellent example of the



Images Provided

These CT scans of a cross-section of Goff’s abdomen show how the Botox enabled Eriksson to pull her abdominal muscles back into position. At top, pre-surgery, the hernia is visible at the top of the scan. A measurement shows the right abdominal muscle has retracted and, as a consequence, has thickened to a width 2.85 cm. In the lower image, the muscle has been stretched thinner, so the new measured width is 1.82 cm, and pulled back to the center of her body.

type of advanced hernia care that we can offer in difficult cases such as Ms. Goff’s. Difficult cases demand advanced techniques, which are ultimately generated through collaborative thinking,” said Bruce Crookes, M.D., Chief of the Division of General and Acute Care Surgery. “The type of innovative thinking Dr. Eriksson used is only propagated when talented, interested, and passionate clinicians coalesce into an integrated structure

like MUSC’s Advanced Hernia Center, scheduled to open July 2020.”

Goff remained in the Lowcountry recuperating until Oct. 5. She’s back in Louisiana now and getting on with life, though she still doesn’t like to drive at night. She remains amazed that she and Arrington survived the crash. And she thinks constantly about Eriksson and his team.

“When I wake up in the morning, he’s in my prayers,” she said.

A letter from MUSC LEADERSHIP

Dear MUSC family,

Due to the rising level of concern regarding the coronavirus (2019-nCoV), the U.S. Department of State has elevated its risk assessment to a level 3 for all of China (not just the Hubei province where the virus was first identified). Additionally, the Centers for Disease Control and Prevention has announced a warning level 3 alert and recommends that all nonessential travel to China be avoided, and many airlines have already suspended flights to and from China.

In light of these and other considerations, MUSC senior leadership has made the decision that effective immediately, no institution-related travel to China such as study abroad, academic program visits, or research collaborations will be authorized or approved by the university until further notice.

This travel restriction is similar to the restrictions that many universities, businesses and organizations across the U.S. have already implemented. It does not restrict personal travel, but we do advise that individuals traveling to China for personal reasons carefully review the latest health information from U.S. government sources. Be aware that anyone returning from China may be subject to national screening and quarantine guidelines in place at the time and that flights leaving China will be limited for a period of time.

The decision by MUSC to restrict travel to China was made to ensure the health and safety of our students, faculty and staff and to reduce the possibility that our activities with colleagues in China could put the larger Charleston community at risk. As always, the safety of our MUSC family is our No. 1 priority.

Anyone experiencing a fever and cough, sore throat or shortness of breath within 14 days of departure from China should call ahead to his or her doctor's office and advise them of recent travel and symptoms. Students with these symptoms should contact Student Health at 843-792-3664, select option 2 and ask to speak to a triage nurse.

Resources:

A quick link has been established on the university's landing page at <https://web.musc.edu/coronavirus-updates> where updates for the university community will be posted as warranted, including updates on the MUSC travel restrictions.

MUSC Health is also closely monitoring the virus and has established a webpage with updated information related to our clinical operations and other general information about the outbreak for patients and visitors. A link to that webpage can be found from the main landing page at muschealth.org.

General information related to the virus is available from the CDC at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>.

Information for Travelers to and from China

- Frequently Asked Questions
- Coronavirus Fact Sheet (PDF)
- Map with confirmed cases

Our thoughts are with all of those affected by the coronavirus and those MUSC family members with loved ones, friends and colleagues in affected areas.

Yours in service,

David J. Cole, M.D., FACS
MUSC president

Lisa K. Saladin, P.T., Ph.D., FAPTA
Executive vice president for Academic Affairs and provost



Photo by Sarah Pack

Dr. Wang points to statistics about coronavirus on Dr. Li's computer. Dr. Li is seated next to her.

FUNDRAISER *Continued from Page One*

Symptoms of the coronavirus include fever, cough and shortness of breath.

Li said that the good news is that it's not as bad as some feared. Chao translated his comments on the subject. "At the beginning, we felt very apprehensive about the unknown. Now, as things are unfolding, we have more information on the new virus. Healthy

young people can naturally fight off the viral infection. So the doctors and nurses feel more hopeful and confident, and they are following through and doing their job."

For information about Li's project to support Wuhan Tongji Hospital, visit www.gofundme.com and search "Masks N95 for 2019-nCoV in Wuhan." Li's fundraiser is listed under Mount Pleasant, South Carolina.

	<p>science café</p>	<p>Coronavirus and Influenza - An Expert Shares What You Need to Know</p>
		<p>There is a lot of information out there on Coronavirus and Influenza. Hear from an expert on emerging infectious diseases, Dr. Robert Ball. He'll share the latest understanding and what you need to know to stay healthy.</p> <p>Tuesday, February 11, 2020 5:30 pm Holiday Inn Riverview - The Round 301 Savannah Hwy, Charleston, SC 29407</p> <p>Robert T. Ball, Jr., MD, MPH, FACP Assistant Adjunct Professor Division of Infectious Disease Division of Public Health Sciences College of Medicine</p>  <p>Science for the rest of us MUSC's Science Café is a series of presentations offering entertaining talks on scientific subjects in a fun, non-technical way in a pleasant social environment. To learn more, contact Tara Abbott at 843-792-2926 or abbott@musc.edu.</p>

Telehealth to make follow-up care easier for transplant patients

By LESLIE CANTU

cantul@musc.edu

Once a patient undergoes transplant surgery at MUSC Health, the organ recipient needs to visit the doctor every month for the first year. That's a lot of visits for someone who doesn't live in the Charleston area or near an MUSC Health regional hospital. Thus, transplant nephrologist Karim Soliman, M.D., is excited about the expanding telehealth options for kidney and pancreas transplant patients.

MUSC Health is partnering with Columbia Nephrology to allow patients who live in the Midlands to go to their monthly check-ins with their MUSC Health doctors via a telehealth linkup at the practice's office in Columbia. The telehealth option should make life a lot easier for patients who now drive for hours to get to a Charleston appointment, Soliman said.

Carole Ann Norman, Columbia Nephrology practice manager, said many patients struggle financially to travel regularly to Charleston.

"This will help alleviate some of that stress and burden of having to travel back and forth," she said. She hopes the psychological relief will help lead to better physical health.

The partnership follows a launch of the transplant telehealth service at Tidelands Health in Murrells Inlet in

2019. The Murrells Inlet location has been successful in providing telehealth services for several months now, said Daniel Stanton, administrator of the MUSC Transplant Center, and with an even greater number of transplant patients living in the Midlands area of South Carolina he expects to see a good number take advantage of the Columbia Nephrology partnership.

The service is also available to living donors, Stanton said. Donors have follow-up visits at one month, six months, one year and two years after surgery. Even though they don't have as many checkups as the recipients, donors are generally healthy working adults who don't necessarily have time to drive all the way to Charleston for an appointment.

"Telehealth is really a fantastic option for them," Stanton said.

Already, the Transplant Center has seen donors improve their follow-up visit rate from about 60% to almost 100%, an improvement that Stanton attributed partly to increased efforts by staff to stress the importance of follow-up visits and partly to the convenience of telehealth.

And MUSC Health has not forgotten those in the Upstate. The health system is establishing a clinic in Greenville, planned for the first quarter of 2020, that will have a full-time nurse practitioner on site; monthly in-person



Photo by Sarah Pack

Bryna Rickett, R.N., left, explains the telehealth software to Dr. Karim Soliman as he conducts a test run with the Columbia Nephrology site.

visits from kidney, lung, heart and liver doctors; and a telehealth option for transplant patients as well.

While the kidney program has been in the vanguard of transplant telehealth, "there has been a lot of enthusiasm and

excitement from our other transplant programs," Stanton said.

Once the infrastructure and routines are in place, he can envision other transplant services also offering telehealth follow-up options.



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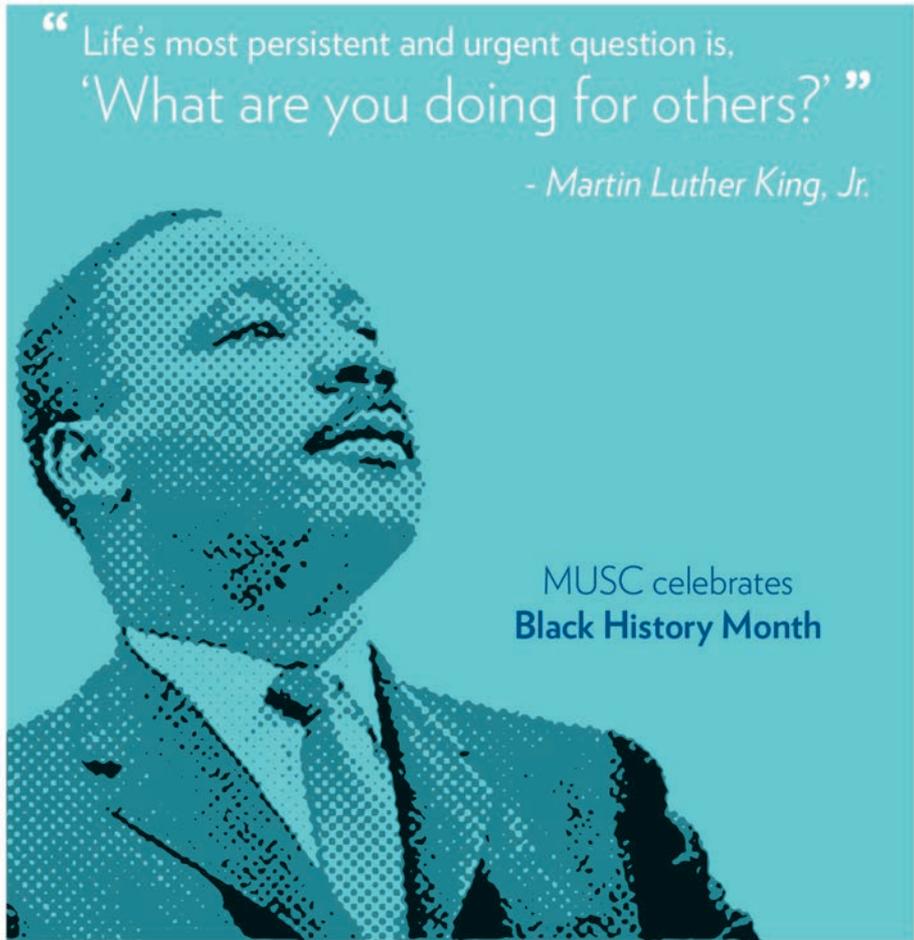
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GROUP *Continued from Page Six*

others in the campus research community who are doing similar or related research. They also spoke about how they engage, collaborate and share ideas and feedback on research methods and resources.

For decades, females were excluded from health research and participating in most clinical trials. The research community assumed they could broadly apply male-only study results to females, which ignored fundamental biological differences between the sexes in clinical research.

This female sex bias within research studies created a huge gap of knowledge as it related to men and women as well as the study of diseases such as cancer, cardiovascular disease, autoimmune diseases, obesity, depression and addictive disorders and the relationship between stress and relapse.

In 1993, the Society for Women's Health Research and other groups advocated for Congress to pass the NIH Revitalization Act, creating a mandate to include women and minorities in NIH-

funded clinical trials. And in 2016, the NIH implemented a policy regarding sex as a biological variable, instructing that women should be included in preclinical research and reporting in all human studies and vertebrate animal studies.

Today, women represent about half of all participants in NIH-funded clinical research, thereby expanding the knowledge of women's health. According to McRae-Clark, MUSC's SCORE program offers opportunities on campus for translational research, pilot research and training projects through the NIH that prepare the next generation of research leaders.

"With all these important changes, everyone in the research community needs to be thinking about this and how it can enhance their research," she said.

SCORE sponsors the WHI group. The group's next meeting is scheduled for Feb. 24 from 12 to 1 p.m., BSB Room 100, auditorium. It is open to everyone at MUSC – faculty, staff, students postdoctoral fellows, etc. Lunch will be provided. For information about the program, contact wagne@musc.edu or 843-792-0484.



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