

Changes in General Surgery

Continued from page 12



faculty and is important in assisting and advocating for the more senior faculty within the Section in their endeavors; several of whom are involved in groundbreaking research and policy development. Given the importance of Surgical Oncology as well as the depth and breadth of knowledge necessary to provide effective leadership, Dr. Byrd is also maintaining the Surgical Oncology Section Chief role for the day-to-day operational leadership of Surgical Oncology. We are fortunate to have David for these roles.

Alessandro Fichera Appointed Section Chief of GI Surgery



Fichera

[Alessandro Fichera, MD](#), Professor, Department of Surgery has been appointed to fill the Section Chief role in GI Surgery left vacant by Dr. Brant Oelschlager's appointment to the Chief role. Dr. Fichera is a nationally-renowned, board-certified colorectal surgeon specializing in the latest surgical techniques. Dr. Fichera's research interests focus on inflammatory bowel disease, minimally invasive and robotic surgery, prevention and treatment of colorectal cancers, and the

management of a wide variety of digestive disease. He is leading the UW Medicine initiative to further develop and expand the Colorectal Surgery Program.

Dr. Fichera received his Doctorate with academic honors from the Catholic University of Rome, Italy and completed his internship and residency in general surgery at the 2nd University of Rome and at the University of Chicago, followed by fellowship training in colorectal surgery at Mt. Sinai in New York.

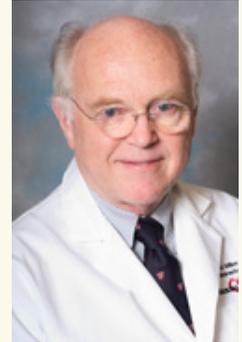
Before moving to the University of Washington's Department of Surgery in 2012, Dr. Fichera spent the last 10 years at University of Chicago Medical Center.

His enthusiasm, his energy, his willingness to listen and his ability to bring fresh perspectives will serve the Division well as he undertakes the role of Section Chief of all of GI Surgery.

These changes in General Surgery will provide stable and excellent leadership for a long time to come. Our congratulations and thanks to all of these individuals.

Donald Miller, MD Retirement

We wish to salute [Donald Miller, MD](#), Professor Emeritus, on the occasion of his retirement in October 2013 and thank him for his years of service in the Division of Cardiothoracic Surgery, Department of Surgery and as the Director of Cardio-thoracic Surgery at the [Veteran's Affairs Puget Sound Health Care System \(VAPHCS\)](#). Dr. Miller has done a superb job leading this program, with a long and interesting career in medicine and enhanced by his many other interests and passions.



Miller

Dr. Miller was born in Hawaii, where his father was a Navy Surgeon. He attended Dartmouth College and received his M.D. degree from Harvard Medical School in 1965. In 1970, after completing a five-year general surgery residency in New York, he joined the Navy on active duty as a Lt. Cmdr. USNR for two years at Camp Lejeune, North Carolina. He then did a two-year fellowship in cardiothoracic surgery at Columbia-Presbyterian Medical Center and Harlem Hospital. He moved to Seattle in 1974.

He started practice at Swedish Medical Center but soon joined the faculty at the University of Washington School of Medicine as an Assistant Professor (1975-1978), and then Associate Professor and Chief of the Division of Cardiothoracic Surgery (1978-1980). He returned to Swedish in 1980 and practiced adult cardiac surgery there for 23 years, serving as Medical Director of the Swedish Heart Institute from 1994 to 1997. In 2003 he was asked to rejoin the full-time faculty at the UW School of Medicine, as a Professor of Surgery, and to direct the cardiothoracic surgery program at the VAPHCS, performing and teaching cardiac surgery there and at the University of Washington Medical Center.

He has pursued many interests in his life beyond medicine. In college, he studied philosophy of religion and played the alto and baritone saxophone in a jazz quintet named "The Modern Men." Inspired by Jack Kerouac's *On the Road*, in 1961, he spent the summer before medical school hitchhiking around Europe with his alto saxophone. He played with jazz groups in clubs on the Left Bank of Paris and Schwabingm, the bohemian quarter of Munich, Germany. In 1965-1970, during his general surgery residency at the Roosevelt Hospital in Manhattan, he served as the Lincoln Center "house doctor," a position that allowed him to attend performances at the New York State Theater (New York City Opera and Ballet), Avery Fisher Hall (New York

(continued on page 14)

Donald Miller, MD Retirement

Continued from page 13

Philharmonic), and the Metropolitan Opera. His passion for music has continued in Seattle where he has served on the Board of Directors of the Seattle Symphony Orchestra (1983-1987) and on the Board of Trustees of Seattle Opera (1984 to 2007). Along with a love of music, Don loves books. He has written two books on heart surgery: *The Practice of Coronary Artery Bypass Surgery* (1978) and *Atlas of Cardiac Surgery* (1983). A third one, *Heart in Hand* (1999), delves into the philosophy of Arthur Schopenhauer, film, science, religion, music, and life as a heart surgeon.

Since retirement, Don and his wife Linda reside in Leavenworth with their Bichon Frisé dog, George. Don spends his time hiking, skiing, reading, listening to music, and writing articles on a variety of subjects. He and Linda have four children: one at Microsoft; one, a physician in Boston; one in the boat business, currently living on a sailboat moored at Shilshole Marina; and one who has formed a new Seattle opera company, the Vespertine Opera Theater. In addition, he and Linda have four grandchildren.

Researcher Profile: Kimberly Riehle, MD

Improving Liver Regeneration in Liver Fibrosis



Kimberly Riehle, MD

The normal human liver is unique among mammalian organs in its ability to regenerate after injury. Most of the time cells in the liver are not dividing, but if the liver is injured, for instance if a toxin such as alcohol kills off some of the cells, the remaining liver cells will somehow get a signal to start dividing to replace the damaged cells. Likewise, if part of the liver is surgically removed, the liver will grow back to its original size in just a

few months, and then stop growing. Unfortunately, many patients who undergo liver resection to cure primary or secondary liver tumors have underlying liver disease, such as liver fibrosis or steatohepatitis, which hinders normal regeneration processes.

Fibrotic livers in particular do not regenerate well, leading to a significant increase in post-resection complications, including a high risk of post-operative liver failure, which is the major cause of death after resection. The cellular mechanisms behind the defective regeneration seen in this setting remain unknown. Specifically, it is not yet known whether the underlying mechanism is related to structural inhibition of regeneration by fibrotic scar, abnormal function of non-parenchymal cells in the liver; or whether fibrosis causes liver cells to fundamentally change at a genetic or epigenetic level and thus stop responding to normal signals.

[Kimberly Riehle, MD](#), Assistant Professor of Surgery in the Division of Pediatric Surgery, has spent the past two years collaborating with Jean Campbell, PhD, Assistant Research Professor of Pathology, to develop a mouse model in which progressive fibrosis develops, leading to worsening regeneration and outcome after hepatectomy. Her current work focuses on ways to improve regeneration in liver fibrosis, such as by pre-treatment with the tyrosine kinase inhibitor Imatinib. The next step will be to translate these studies into therapies that will ameliorate liver fibrosis in patients such that a patient with liver cancer can tolerate a potentially curative resection and regenerate normally afterward.

Dr. Riehle's work has been supported by the 2012-2013 American College of Surgeons Louis C. Argenta Faculty Research Fellowship and the American Surgical Association Foundation Fellowship (2013-2015). In 2012, Dr. Riehle also received a competitive award from the Department of Surgery Research Reinvestment Fund to study a specific subtype of liver cancer that occurs primarily in children, fibrolamellar carcinoma. In collaboration with Raymond Yeung, MD, Professor of Surgery in the Division of General Surgery, she is working to identify critical signaling pathways that drive the formation of these tumors in otherwise healthy children.

While Dr. Riehle is making significant progress in these areas, there remains an increasing need to provide more treatment options to the 500 patients that pass through the University of Washington Liver Tumor Clinic annually. To address this need, Drs. Riehle and Yeung recently joined with fellow Department of Surgery faculty members, Venu Pillarisetty, MD, Assistant Professor in the Division of General Surgery, and James Park, MD, Associate Professor in the Division of General Surgery, along with several

(continued on page 15)