

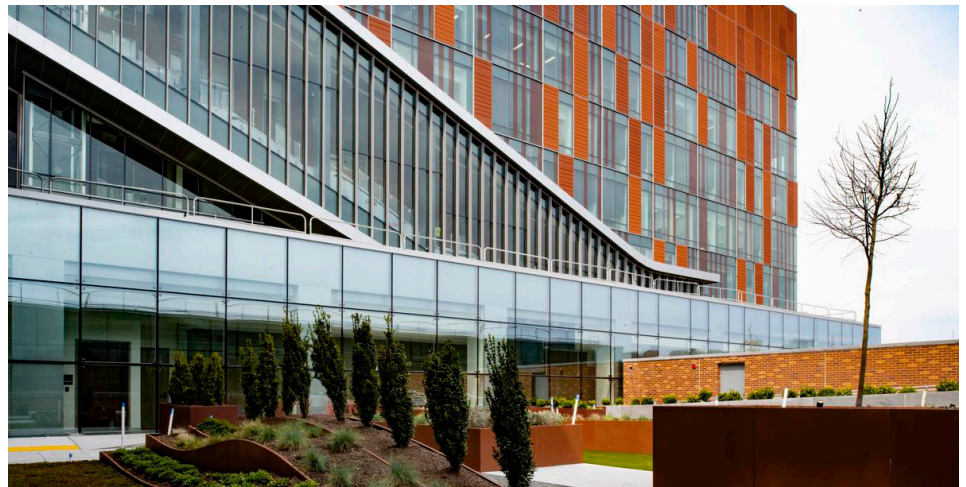
SIGHT + SOUND

SPRING EDITION

An Amazing New Asset for our Community and People with Vision Loss Worldwide

When José-Alain Sahel, MD arrived in Pittsburgh in July of 2016 to assume the Distinguished Professor and Chair of Ophthalmology role at the University of Pittsburgh and the Eye & Ear Foundation Endowed Chair, there were no plans for a new building to house a Vision Institute. But UPMC leadership saw the opportunity for Dr. Sahel, with his skills and experience as the Founder of the Institute de la Vision in Paris, to create an asset for our community for people with vision loss worldwide.

Patients visiting the UPMC Vision Institute at the new UPMC Mercy Pavilion will have a unique experience. In the vision tower section of the building, everything was designed, chosen, and built intentionally, and it is all dedicated to ophthalmology. The building will also be home to the UPMC Rehabilitation Institute.



The Vision Institute at the UPMC Mercy Pavilion

The look and feel are distinctive because the building is brand new, significantly updated, and innovative. In addition to various clues to help patients navigate, there is a thoughtful color scheme along with special lighting so people with low vision can adapt. Great thought was put into the navigation design for people with low vision, as well as those who use a cane, to find their way to their location.

The building has a beautiful front entrance where patients can be dropped off, or vehicles can proceed to the attached parking garage. This area is covered and level, not at an incline like the Eye & Ear Institute. When you enter the front doors, you will go through the four-story glass atrium into the West Lobby, bearing the names of Daniel G. and Carole L. Kamin, thanks to their generous support. Immediately,

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All stories written by Lisa A. Goldstein

you will notice the artwork, just one of many commissioned installations throughout the building. The first floor has an expanded optical shop, pharmacy, urgent care, comprehensive ophthalmology, and a grab-and-go food station.

As Ian P. Conner, MD, PhD, Assistant Professor of Ophthalmology and Director of Glaucoma and Cataract Service, said, “a building is just a building. It is the people and the work done inside that are actually important.” But he pointed out that the Ophthalmology Department outgrew its footprint at the Eye & Ear Institute decades ago. The Department has also grown over the last several years. It is time.

The enhanced clinical space, lab space, and suite of ophthalmology-specific operating rooms with specialized equipment in one place are big draws. Joseph N. Martel, MD, Assistant Professor of Ophthalmology and Vice Chair, Patient Experience and Access, also mentioned the new Institute’s significant role in training future generations of eye surgeons.

A big attraction is the new ophthalmology surgical training center on the fourth floor, which will teach the next generation of surgeons about the latest surgical innovations. This space will be aptly named after E. Ronald Salvitti, MD, one of the Department’s most distinguished graduates and supporters.

There are eight surgical operating rooms in the Pavilion, which along with all clinic spaces, have all been thoughtfully designed and planned, thanks to Vishal Jhanji, MD, Professor of Ophthalmology, and Jerome Finkelstein, MD, Clinical Associate Professor of Ophthalmology, Vice-Chairs of Operations, and other faculty on the planning team. “The surgery center is phenomenal,” Deepinder K. Dhaliwal, MD, LAc, Professor of Ophthalmology and Director of Refractive Surgery and the Cornea Service, described it as dedicated operating rooms to ophthalmology, which is “really important.” Unlike now, where one operating room is used for different types of cases, this one will only be dedicated to ophthalmology. The equipment will be robust and cutting-edge, delivering the best quality care with the newest technology.

The bottom line: “We are going to look at each individual patient and really think about which strategy would be ideal for that particular patient,” Dr. Dhaliwal said. “It’s not one-size-fits-all. It’s a customized approach for every patient, and that is our philosophy.”

All the physicians interviewed mentioned the ample clinic space, which will make their work and patients’ visits easier. Patients will experience a holistic approach to care. The “hurry up and wait” clinic flow will be no longer; patients will basically stay in the same room for the duration of their visit.

Having operating rooms in the same facility as clinics, research, and other multi-use space leads to something else Dr. Conner views as exciting – the ability to partner with surgical commercial partners. There is a long tradition in surgery and ophthalmology, and especially in academics, for some private physicians to partner with industry to make the implants, machines, and equipment they use and to improve upon products and designs. This can be difficult when in 100 different places, Dr. Conner said. “To actually make those partnerships work in a meaningful way, we really have the opportunity to work closely with our industry partners to make better, more efficient surgeries for our patients,” Dr. Conner said. “We should all expect to see that type of surgical innovation occurring on a daily basis.”

Another feature is that researchers are nearby. There is a collaboration staircase that connects clinicians with scientists. The hope is that this will foster collegiality and collaboration, so the team can deliver a lot of innovative concepts to restore vision from bench to bedside as soon as possible.

An exciting aspect of the building will be a state-of-the-art conference center on the fourth floor. Just outside the conference center is a lobby called the Fine Foundation Winter Garden, in honor of Milton and Sheila Fine. Doors from the lobby take you to the Bruce and Barbara M. Wiegand Roof Terrace. Thanks to the generous support from the Wiegands, this space will have beautiful gardens and provide outdoor access for faculty, staff, and guests to the conference center.

The building will invite reflection down to the sensory garden and intentional, dynamic artwork. It will provide the uptown community with access to much-needed services and will drive innovation to restore vision for every cause of vision loss.

“Our goal is to provide the best opportunity to preserve and restore vision to each and everyone, which implies developing cutting-edge technologies, keeping a person-centric perspective constantly, and addressing the needs of all in the community and beyond,” said Dr. Sahel. **S+S**



An operating room in the new Vision Institute

Honoring Two Legacies and Supporting a Third

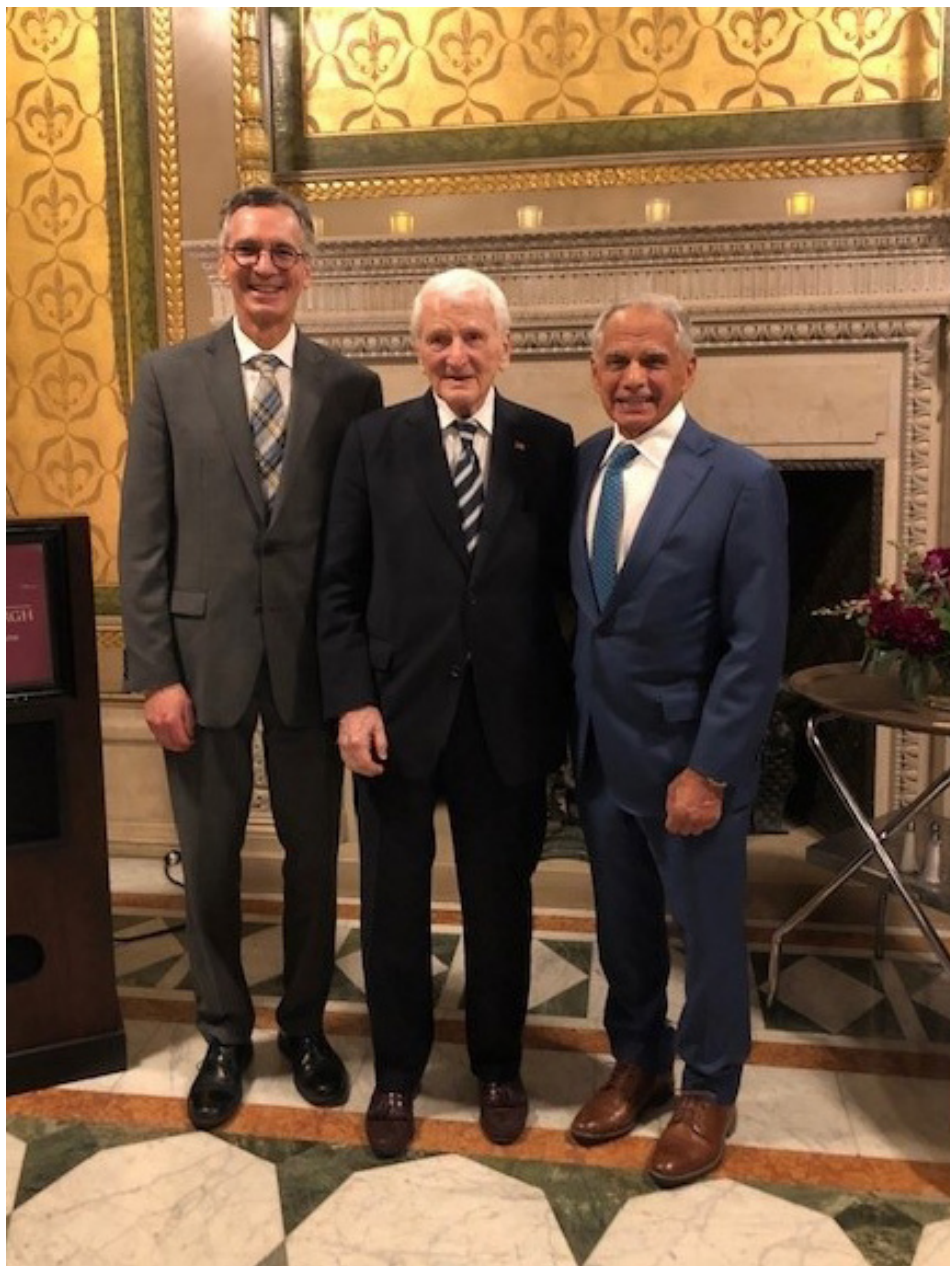
One million dollars has been raised to endow the Pioneers in Skull Base Surgery Chair, thanks to many donors. UPMC will match the funds.

Once Dr. Joseph Maroon, Clinical Professor of Neurological Surgery and the Heindl Scholar in Neuroscience at the University of Pittsburgh School of Medicine, retires, the name will change to the Myers & Maroon Chair. Dr. Eugene Myers, Distinguished Professor Emeritus of Otolaryngology and Emeritus Chair, Department of Otolaryngology, and Dr. Maroon contributed significantly to the endowment.

Housed in the Department of Otolaryngology, the Chair has a focus on the world-class training aspects of skull base surgery that Drs. Myers and Maroon developed at the University of Pittsburgh School of Medicine. The inaugural holder of the chair will be Dr. Carl Snyderman, who refined the techniques over the last 25 years. Along with Dr. Paul Gardner, Dr. Snyderman trained not only this generation of surgeons on minimally invasive skull base techniques but is now working on training the next generation on even more advanced treatment modalities.

“In 1975 Dr. Joseph Maroon and I performed the first skull base surgical operation,” Dr. Myers said. “Our skull base surgery center is recognized as the world’s best. Changes have taken place over the years both in leadership and surgical techniques. To keep our noted center on top, there has been a Chair endowed which will provide the incumbent, Dr. Carl Snyderman, with funds which will allow for him to continue his research and the teaching of his technique to surgeons from around the world.”

After Drs. Myers and Maroon provided equal funding for the Chair, Dr. E. Ronald Salvitti – founder and medical director of the Southwestern Pennsylvania Eye Center and Eye & Ear Foundation Board member – told the Coury family he would match whatever they donated. This ended up being a total of \$200K with several Eye & Ear Foundation Board members donating. Due to Dr. Myers’



Carl H. Snyderman, MD, Eugene N. Myers, MD, and Joseph C. Maroon, MD

aggressive fundraising with otolaryngology alumni, approximately another \$250K was received. Patients of Dr. Snyderman donated another \$75K. And then the widower of Dr. Gardner’s neurosurgery patient finished it out with an estimated \$130-140K donation.

“The funding of the Pioneers Chair in Skull Base Surgery recognizes the pioneering contributions of Dr. Myers from Otolaryngology and Dr. Maroon from

Neurosurgery in the development of modern skull base surgery at UPMC,” Dr. Snyderman said. “Without their vision and ongoing support, UPMC wouldn’t be a global leader in skull base surgery today. The funding of this chair provides the support necessary for ongoing research activities that will usher in the next paradigm shift in the treatment of skull base disease.” **S+S**



Catherine V. Palmer, PhD

Hearing SUPPORT – Making Sense of Your Choices for Hearing Health

To meet the critical need for a reliable performance standard for amplification technology independent of industry claims, the Hearing SUPPORT project was created. It will now become a reality, thanks to a \$100,000 grant from the Hearst Foundation to the Eye & Ear Foundation and the Department of Audiology at the University of Pittsburgh.

As stated in the proposal, “New hearing technologies enter the market every 3-6 months, and a large influx of hearing devices are expected in the next 1-5 years given the emergence of over-the-counter hearing aids. This timing mandates a fast and effective test protocol that can be accomplished in a neutral laboratory setting in an ongoing manner that produces data that is also immediately accessible to multiple stakeholders.”

Hearing SUPPORT stands for Scale of Usability, Performance, and Participation for Optimizing Real-World Technology. The project has four stages, the first being Exploration and Discovery. This will involve a

literary review and focus groups to identify what individuals want from amplification. Next is Intervention Development, in which research will create a laboratory test battery that predicts real-world performance on functions important to consumers. Intervention Effectiveness will test devices with real people with the test battery. Data will be used to create a dashboard of real-world situations to help consumers, families, audiologists, healthcare providers, insurers, and device developers make informed decisions. Last is Scale-Up, to test if the data is being accessed by different groups and if the information is understood and acted on by consumers.

The project started on April 1, 2023, when the team met to map out the year. A new research audiologist joined the team on this date as well. Dr. James Katz has over 30 years of experience in the hearing aid industry and in audiology, which makes him a perfect match for the project, said Catherine V. Palmer, PhD, Professor and Interim Chair, Department of Communication Science

and Disorders, University of Pittsburgh, Professor, Department of Otolaryngology, and UPMC Director of Audiology.

“A critical, exciting part of this project is our ability to team up with our Health Information Management (HIM) colleagues in the School of Health and Rehabilitation Sciences,” Dr. Palmer said. “We will work closely with them to take the data we generate to turn it into usable, accessible information that will be in a consumer dashboard accessible through the Internet. This is a key component of the project, to create meaningful information for consumers as opposed to the traditional technical specifications that are reported and do not help consumers make individual decisions based on their communication needs and lifestyle.”

Dr. Palmer is excited to have the resources and support to move forward with this project that will assist consumers and audiologists in navigating what is becoming “an ever more confusing array of products related to hearing health care.” **S+S**

And the Awards Keep Coming for Dr. Sahel

Dr. José-Alain Sahel, Chair of the Department of Ophthalmology at the University of Pittsburgh, has two more awards to add to his already sizeable collection.

Along with his collaborator Botond Roska, PhD, of the Institute of Molecular and Clinical Ophthalmology Basel, on June 22 in Hamburg, Dr. Sahel will receive the 2023 International Prize for Translational Neuroscience of the Gertrud Reemtsma Foundation, administered by the Max Planck Society. The prize has been awarded for outstanding achievements in basic neurological research since 1990 and provides 50,000 Euros in funding. The Max Planck Society is a not-for-profit organization headquartered in Munich, Germany, with more than 80 institutes and research facilities around the world.

Dr. Sahel was also recently promoted to Commander in the National Order of Merit by the government of France. Established in 1963, the Order honors French citizens who have made distinguished achievements in


the service of others. Dr. Sahel first received the rank of officer in the National Order of Merit in 2012.

“We are never surprised to hear Dr. Sahel is receiving another award, as we know how much his work has contributed to new therapies and technologies for people with vision loss,” said Eye & Ear Foundation CEO Lawton Snyder. “What is surprising is his humility with everything he does and everyone he meets.”

As one of the world’s top experts in retinal diseases and vision restoration research, Dr. Sahel has developed several interventions — including stem cell implantation, gene therapy, innovative pharmacologic approaches, optogenetics, and the artificial retina — for retinitis pigmentosa, age-related macular degeneration, vascular eye disease and other vision impairments that currently are untreatable. Over the past decade, he has led pioneering efforts in optogenetic vision restoration, a technique in which cells in the retina are genetically modified to express light sensitive proteins. This therapeutic

technique has the potential to help patients who are blind or visually impaired because of a genetic defect.

The second award Dr. Sahel is receiving is the Corinne Kirchner Research Award from the American Foundation for the Blind, on April 20.

“José is truly deserving of these awards not only because of his many years as a worldwide leader in vision restoration research and treatment, but also for his passionate embrace of team science, educational goals, and health equity,” said Anantha Shekhar, Dean of the University of Pittsburgh School of Medicine. “He would be the first to say his greatest achievement is bringing together the right group of investigators with varying approaches to curing blindness, and he is fiercely determined to ensure that any resulting breakthroughs benefit all patients equitably, including those from underserved communities who may not always have access to the most cutting-edge vision treatments and care.” 

“We are never surprised to hear Dr. Sahel is receiving another award, as we know how much his work has contributed to new therapies and technologies for people with vision loss.”

**– Lawton Snyder,
Eye & Ear Foundation CEO**



José-Alain Sahel, MD

Swallowing Caused by Dementia – Important Reason for ENT Management

Swallowing is often an issue for people with dementia. This bodily function is a very complex and orchestrated reflex that requires the neurologic system to be intact, said Dr. Sandra Stinnett, laryngologist and Assistant Professor of Otolaryngology at the University of Pittsburgh.

“There are many causes of dementia that could be secondary to stroke or other neurologic deficits,” she added. “This can lead to swallowing difficulty, also known as dysphagia, secondary to decreased sensation of the throat (pharynx and supraglottic area), decreased tongue strength, decreased transit movement of the food from the mouth to the throat, and delay in swallow reflex.”

According to Dr. Stinnett, people living with Alzheimer’s disease are at significant risk of having swallowing deficits secondary to a slower, delayed pharyngeal reflex and oral phase as well as difficulty clearing the food from the pharynx or throat. These swallow symptoms usually correlate with the degree of their dementia.

Symptoms to watch out for include evidence of coughing while eating, the presence of throat clearing, unintentional weight loss, pain or discomfort with swallowing, or a history of pneumonia. Caretakers may notice less chewing, an inability to feed themselves, or holding food in the mouth without swallowing for a prolonged time.

Having difficulty swallowing leads to other complications. Patients are at risk of losing significant weight, resulting in failure to thrive which can be life-threatening. Dehydration can be serious, especially if the patient is avoiding liquids. Other dangers include choking and aspiration pneumonia, which can result in death.

If swallowing difficulties are suspected, the patient should be evaluated by a multidisciplinary team, including an ENT or



specifically, a laryngologist, with a speech-language pathologist that specializes in swallowing. An assessment may be completed in the office, which can include a complete history and physical, and looking at any medications that may cause significant side effects such as dry mouth.

“Swallow therapy may be recommended contingent upon the deficits visualized,” Dr. Stinnett said. If any surgical intervention is warranted, this will be addressed as well. If severe, patients may need to undergo feeding tube placement to prevent life-threatening complications of dysphagia.

Practical things that can be implemented include eliminating distractions during meals, emphasizing the importance of

good oral hygiene in order to mitigate pneumonia risk, implementing small meals with hydration breaks to ensure that they are well hydrated, incorporating a dietary consultant to ensure adequate caloric intake, and providing food choices for the individual as well as making it appetizing and appealing for them.

The good news is there are several new devices on the horizon to assist with oral intake of food and volume control to reduce the risk of aspiration. “There are also studies that are proving early intervention for strengthening exercises and respiratory exercises help to reduce the danger associated with aspiration,” Dr. Stinnett said. **S+S**

UPMC Vision Institute and EEF Partner with Brother's Brother to Bring Care to Where it is Needed

The Eye & Ear Foundation and UPMC Mercy received a \$150,000 mobile "eyeVan" from Brother's Brother Foundation for the Department of Ophthalmology to use for free community vision clinics in the Pittsburgh Region.

The key exchange was Wednesday, March 1 on the Mercy Hospital campus.

The van is like a doctor's office on wheels, equipped with medical technology to provide eye exams, screenings, and treatments for people in underserved communities. It will be used as part of the Guerrilla Eye Service, a program that started in 2006 to provide free vision screenings, glasses, and referrals at various locations around the Pittsburgh region.

"We're like a commando mobile eye squad," said Dr. Evan "Jake" Waxman, Director, UPMC Mercy Eye Center, who oversees the Guerrilla Eye Service. "We take medical students and residents and mobile equipment to places where people are getting their primary care for free – and we provide their eye care for free."

Waxman's team takes a thoughtful and targeted approach to helping people by coordinating with community health clinics and schools to determine where the van goes.

The partnership between BBF and UPMC Mercy is a testament to the shared vision of promoting health and well-being to those in need. This mission inspires Dr. José-Alain Sahel, Chair, Department of Ophthalmology at the University of Pittsburgh School of Medicine, and Director of the UPMC Eye Center.

"While we are developing many cutting-edge programs to restore vision, at the same time, we are aware of the many people who live in this city and surrounding neighborhoods who do not have access to the care they need," Dr. Sahel said.

Ozzy Samad, BBF president, was on site to commemorate the donation and highlight the importance of helping people in Pittsburgh. Samad noted that BBF helps people all around the world but is also focused on what BBF can do to help people within its own footprint.

"When the idea for the mobile clinic came up, we understood that the key is to have implementation partners – the people who are actually doing the work – and the Eye & Ear Foundation and UPMC Guerrilla Eye Service are the perfect partners," Samad said.

With the van keys in hand, Waxman said he and his team were scheduled for their first outing to help the unhoused later in March. 



The key exchange: Brother's Brother delivers the eyeVan to the Department of Ophthalmology for the Guerrilla Eye Service



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412.864.1305 F

**UPMC Eye Center
(412) 647-2200**

**University Ear, Nose &
Throat Specialists of UPMC
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