

# Orthopaedic Update

## Celebrating 100 Years of Excellence in Orthopaedic Surgery

This year marks the 100<sup>th</sup> anniversary of orthopaedic surgery at both University Hospitals Case Medical Center and Case Western Reserve University School of Medicine. Our department is one of the oldest orthopaedic practices in the United States. Even the American Academy of Orthopaedic Surgeons was not created until 1933, followed one year later by the founding of the American Board of Orthopaedic Surgery in 1934.

### 1907 to 1910

The Orthopaedic Service at Lakeside Hospital began in 1907 when Dr. Dudley P. Allen, the Surgeon-in-Chief at the hospital, assumed the care and supervision of the orthopaedic surgical cases. Dr. Allen had received his medical training at Harvard Medical School and the Massachusetts General Hospital, where he studied under Dr. Henry J.

Bigelow, who authored the first American book on orthopaedic surgery. Dr. Allen had received further training in Europe with Dr. Von Lagenbeck in Germany and Dr. William MacEwen in Scotland. The first in our Orthopaedic Service, Dr. Allen was described as a surgeon with a “natural surgical skill” who had studied with some of the most prominent early orthopaedic surgeons in the world.

### 1910 to 1911

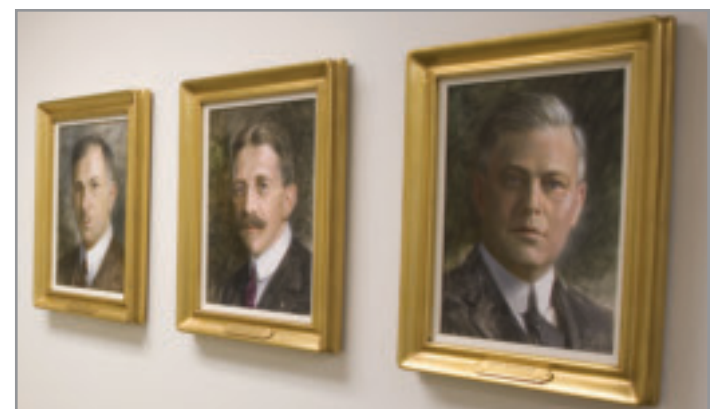
Dr. Allen remained in charge of Orthopaedics at Lakeside Hospital until 1910, when Dr. Henry Becker was appointed Surgeon-in-Charge of the Clinic for Fractures and Dislocations. Working in Dr. Becker’s Orthopaedic Division were Dr. Henry O. Feiss (Assistant Surgeon-in-Charge of Orthopaedic Surgery) and Dr. Gordon N. Morrill (Assistant, Orthopaedic Surgery). Dr. Feiss had received his medical education at Harvard

Medical School and had studied under Joel Goldthwait, one of the early orthopaedic surgeons in Boston. Dr. Feiss joined the staff of Lakeside Hospital in 1904 and was active in both basic and clinical research, publishing 48 articles in orthopaedic surgery. His basic science research included work on nerve regeneration. During his career, he studied at the University of Edinburgh, where he received a Doctor of Science Degree, as well as in Madrid and at the Pasteur Institute in Paris. During World War I, Dr. Feiss served as a medical officer in the United States Army in France. His family and friends, following his death, established the first endowment fund in the Orthopaedic Department at Case Western Reserve.

### 1911 to 1920

In 1911, Gordon N. Morrill, who had worked with Dr. Feiss

See **Years**  
Page 2



Portrait paintings of the renowned leaders of orthopaedic surgery spanning the last 100 years are showcased in the departmental offices at UHCMC.

## Donald Goodfellow, MD, ACL Expert and Team Physician



Donald Goodfellow, MD, helps athletes recover to optimal performance.

If you ask Dr. Goodfellow how he became interested in sports medicine, he’s pretty straightforward with his response.

“I was an athlete,” says the UH Director of Sports Medicine.

He’d always been pretty good in math and science, but he wasn’t quite sure what he wanted to do when he landed at Case Western Reserve University. Originally, he went into pre-dentistry. But when he found himself taking the same classes as his pre-med roommates, he decided he was better suited for a career in medicine. He was further influenced by his sister, a Harvard University graduate who became a general surgeon.

“I was pretty sure I wanted to be in surgery since my main exposure to physicians was the ones taking care of teams because I was involved in sports,” says Dr. Goodfellow, who earned his M.D. from CWRU in 1977. “As I went through medical school, that solidified my idea of going into orthopaedics and eventually into sports medicine.”

After completing his post-graduate training at CWRU and serving as chief resident in orthopaedics, Dr. Goodfellow headed to the University of California, Los Angeles, Medical Center in 1982 as the facility’s first sports medicine fellow. But he knew he’d be returning to CWRU because he had the promise of a position as a staff orthopaedist – and his

wife, Kathleen Gordon, a native Clevelander, decided this was where the couple would settle.

Upon his return to CWRU and the University Hospitals Department of Orthopaedic Surgery in 1983, Dr. Goodfellow brought with him a relatively new minimally invasive anterior cruciate ligament (ACL) procedure that causes less damage to joints, leading to faster and smoother recoveries for patients. Today arthroscopy is the most commonly performed orthopaedic surgical procedure to treat a wide range of injuries.

“Pain management, both inter-operatively and postoperatively,

See **Goodfellow**  
Back Page



## A Message from the Chairman

Dear Colleague,

Improving outcomes for patients depends on quality – not only that of the care we provide each and every day to our patients, but also the caliber and innovation of the work done in our laboratories to develop new implants for hips and knees, new internal fixative devices for broken bones and new and more durable orthopaedic materials for joint replacement.

It is that balance of clinical care and research, together with its educational mission, that has earned the Department of Orthopaedics at University Hospitals Case Medical Center its outstanding reputation. In fact, our roots reach back an entire century to 1907. I am extremely proud of this long-standing tradition of excellence and believe that you will enjoy reading more in this issue of *Orthopaedic Update* about the remarkable accomplishments of our orthopaedists throughout the past century.

The past few months have brought more exciting developments, both in research and clinical offerings, which we also feature in this issue:

- **Edward M. Greenfield, PhD**, and his research team are doing basic science work that has important implications for the regulation of bone turnover in various diseases, including osteoporosis, loosening of orthopaedic implants and tumors.
- **Donald Goodfellow, MD**, is a "surgeon's surgeon." He continues to utilize his expertise in ACL repairs for all his patients, physicians, professional athletes and weekend warriors alike.
- Our total joint replacement team is at the forefront of joint replacement research and innovations over the past several decades.

Also in this issue, we share with you the latest news and awards about our faculty, as well as remind you about our **Professional Referral Service** that is always available to facilitate your access to all our orthopaedic specialists.

As always, we value our partnership with colleagues throughout the country and invite you to contact us anytime with questions, comments or referrals.

**Randall E. Marcus, MD**  
Chairman, Department of Orthopaedics  
University Hospitals Case Medical Center  
Charles H. Herndon Professor and Chairman  
Department of Orthopaedics,  
Case Western Reserve University School of Medicine

## Division Spotlight

# University Hospitals Case Medical Center Joint Reconstruction

Studies show that patients have the best results and fewer complications when their total joint replacement surgeries are performed at hospitals and by surgeons performing a high volume of this type of specialized surgery.

The **Department of Orthopaedics** at University Hospitals Case Medical Center performs more than 700 total joint replacement surgeries annually by six board-certified and fellowship-trained orthopaedic surgeons with a subspecialty in joint reconstruction. The team consists of **Matthew J. Kraay, MD**, director of Joint Reconstruction and Arthritis Surgery at UHCMC, **Edgar B. Jackson, Jr., MD**, **Victor M. Goldberg, MD**, **Richard E. Grant, MD**, **Randall E. Marcus, MD**, **William J. Petersilge, MD**, and **Roger G. Wilber, MD**.

UH Case Medical Center was ranked as one of the top 50 orthopaedic programs in the country by *U.S. News & World Report* in 2006. The Orthopaedic Department at UH has ranked tops in the nation in six of the last nine years for research funding from the National Institutes of Health.

The orthopaedic program is comprised of medical and surgical orthopaedists with expertise in total joint reconstruction, spine, musculoskeletal, oncology, foot and ankle, hand and upper extremity, pediatric orthopaedics, shoulder and elbow, sports medicine and trauma. Combined they have booked more than 600 national and international orthopaedic surgery speaking engagements and have published more than 616 medical journal articles and texts.

The orthopaedic team also works with specialists from rheumatology, neurological surgery, neurology and radiology to provide comprehensive patient care. The team also collaborates with OR nurses, physical therapists, occupational therapists and social



UH's Division of Joint Reconstruction is made up of surgeons, including (L to R) Victor M. Goldberg, MD, Matthew J. Kraay, MD, Randall E. Marcus, MD, and William J. Petersilge, MD. Not Pictured are Roger G. Wilber, MD and Richard E. Grant, MD.

workers to ensure an easier and faster recovery and rehabilitation for each patient.

The UH orthopaedic program has been at the forefront of joint replacement research and innovations over the past several decades. The work done in the program's laboratories has helped orthopaedic surgeons around the world in the development of new implants, new internal fixation devices for bone fractures and more durable orthopaedic materials. Joints today are being replaced with smaller incisions using longer-lasting implants.

The focus in joint replacement over the past decade has been in engineering improved, more durable bearings, resulting in new materials and technologies that improve durability and wear resistance, as well as better implant designs.

The Joint Reconstruction and Arthritis Surgery Division at UH has been working with other major joint replacement centers across the nation on implant retrieval research. The study looks at why

implants fail and how they wear. The study earned an NIH grant increase from \$1.7 million to \$2.4 million in 2006, as well as the Hip Society's prestigious Otto Aufranc Award.

Dr. Kraay is among the first in Ohio to use gender-specific joint replacements. Two-thirds of all knee replacement surgeries are performed on women, leading researchers to design implants geared specifically toward gender differences.

The future holds continued refinement of implants to improve total joint replacements, including new materials, minimally invasive surgical techniques and state-of-the-art computer navigation systems in the OR.

The UH Department of Orthopaedics also is pioneering research into alternatives to joint replacement, including engineering cartilage. Researchers also are studying the basis for various developmental musculoskeletal abnormalities to better treat patients with emerging technology and devices.

## Staff News

**Randall E. Marcus, MD**, Chairman of the Orthopaedic Department, was recently elected President-Elect of the American Board of Orthopaedic Surgery. In April, he was also elected President of the Association of Bone and Joint Surgeons.

**Matthew J. Kraay, MD** was recently appointed the inaugural holder of the Kingsbury G. Heiple and Fred A. Lennon Professorship in Orthopaedics by the Case Western Reserve University Board of Trustees.

**George H. Thompson**, professor of orthopaedics and pediatrics, chief, pediatric orthopaedics, and director of the Spinal Deformity and Scoliosis Clinic at University Hospitals' Rainbow Babies & Children's Hospital has been elected president of the Scoliosis Research Society (SRS) for 2006-2007. The SRS an international society founded in 1966 is recognized as one of the world's premier spine societies. The primary focus of the Scoliosis Research Society is on providing continuing medical education for health care professionals and on funding/supporting research in spinal deformities. The current membership includes over 900 of the world's leading spine surgeons as well as researchers, physician assistants and orthotists who are involved in research and treatment of spinal deformities.



# Researcher Seeks Answers in Regulation of Bone Turnover

**Edward M. Greenfield's, PhD,** foray into the medical field began with a revelation near the end of his graduate studies – he wanted to switch his research from clam shells to mammal skeletons to make his research more medically relevant.

Dr. Greenfield, Director of Orthopaedic Research at UHCMC, earned a bachelor's degree in biology from New College of Florida and decided to pursue a master's and doctorate degrees in marine science from the University of North Carolina at Chapel Hill. After working with marine life for several years, he decided working with mammals would be more fulfilling.

Fast forward to 2007 and Dr. Greenfield and his research team are focusing on basic science and how cells work in regulating bone turnover in response to various stimuli, including hormones, proteins, orthopaedic wear particles and bacterial endotoxin. His lab studies signal transduction, regulation of gene expression and differentiation of bone cells – both osteoclasts and osteoblasts.

These studies, he said, have important implications for the regulation of bone turnover in various diseases, including osteoporosis, loosening of orthopaedic implants and tumors.

Since 1987 Dr. Greenfield has been trying to unlock the mystery behind the workings of parathyroid hormone (PTH) – one hormone that regulates calcium stability in the body. PTH is prescribed to patients

with bone loss, or osteoporosis, and is the only U.S. Food and Drug Administration approved agent that stimulates bone formation. On the flip side, PTH also stimulates bone resorption, or the breaking down of bone.

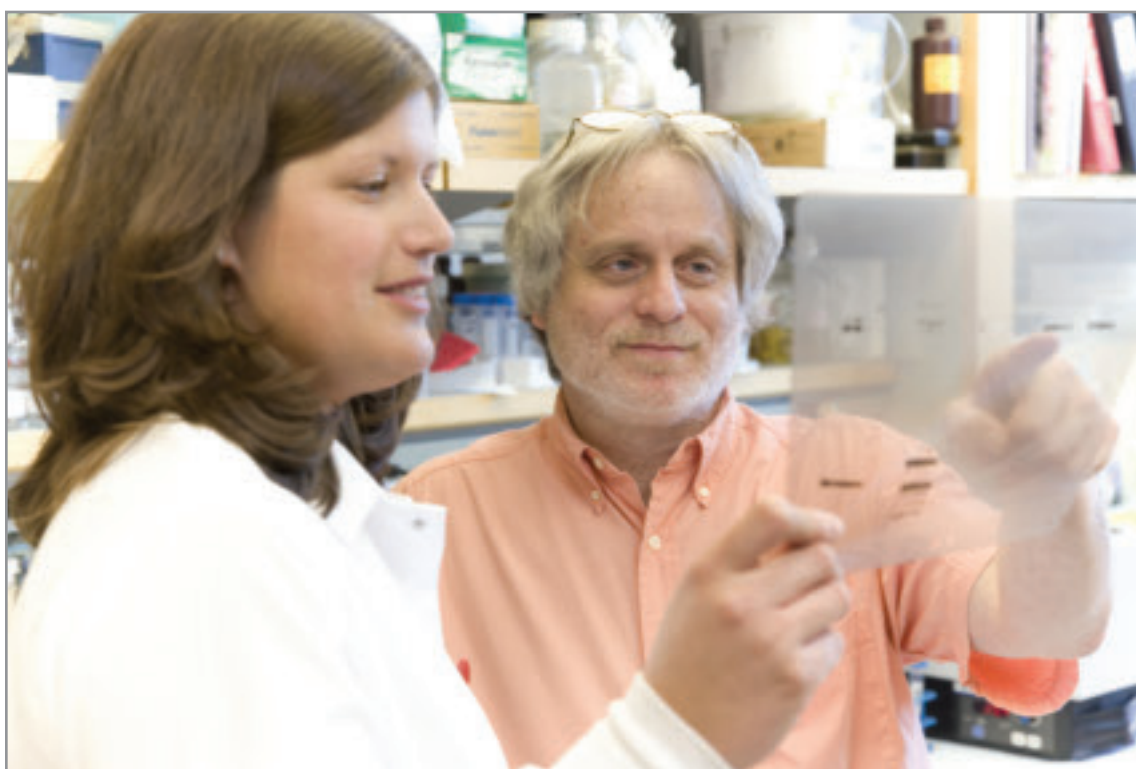
Dr. Greenfield's lab is trying to understand PTH in an effort to develop a co-therapy to tip the balance away from bone deterioration.

"About 20 percent of patients don't respond to PTH by itself. Even those who do stop responding after a few years," Dr. Greenfield said. "If we understood what was going on better, we could improve on one or both of these aspects."

Dr. Greenfield earned a National Institutes of Health (NIH) grant in 2003 to study the loss of PTH responses in osteoblasts, or bone-forming cells. His lab has focused on a molecule that regulates the signaling in the hormone.

"Potentially we'd like to develop a co-therapy to increase the bone formation effect of PTH and/or decrease the bone resorption effects," he said.

A second main area of research in Dr. Greenfield's lab is the role of bacteria in aseptic loosening of orthopaedic implants, including total joint replacement of hips and knees, as well as other implants. Roughly 10 percent to 15 percent of patients experience aseptic loosening of their implants within 15 years. Dr. Greenfield is working on the assumption that although there are no clinical signs of bacteria, bacteria may play a role in the loosening of the implants.



**Dr. Greenfield (right) and graduate student Michelle Beidelschies at work in the laboratory.**

"Aseptic loosening is one of the major problems in clinical orthopaedics. What we don't know is how important the bacteria aspect of it is in patients," Dr. Greenfield said. "(Implants) are a very good approach and incredibly successful for people around the world. If we understood what happened in that 10 percent to 15 percent, we could prevent or better treat or even predict which patients are more at risk and do something."

The best approach to the problem, at this point, is a genetic approach. Dr. Greenfield's lab is collaborating with a lab in England, which is supplying the necessary samples, to look for patients with different forms of

molecule receptors to determine their rate of aseptic loosening.

This research is being funded by the Sulzer Settlement Trust Fund, which is funding medical research into failed implants following a class action settlement. Dr. Greenfield also has had NIH funding for this area.

A new area of research in Dr. Greenfield's lab centers on osteosarcoma, the primary tumor of bone cells. Osteosarcoma affects between 400 and 500 people per year in the United States. Unfortunately, most cases involve young adults and adolescents with devastating results.

Current therapy involves aggres-

sive chemotherapy, which brings with it many side effects, as well as removal of a large portion of the affected bone. The tumors tend to target rapidly growing long bones of the legs and arms. Long-term survival rates are 60 percent to 70 percent, which has not improved over the past two decades. Dr. Greenfield's lab is searching for important signaling molecules that create this particular tumor and regulate tumor growth.

"If we understand the process better, we can build on work to develop better therapies," Dr. Greenfield said. "Hopefully, what we're working on will lead to the development of smart chemotherapies."

## YEARS (continued from cover)

in Dr. Becker's Orthopaedic Division, was appointed Director of Orthopaedic Surgery at Western Reserve School of Medicine and Lakeside Hospital. In 1919, during Dr. Morrill's tenure, Dr. Clarence Heyman returned from service in World War I in the armed forces and became actively involved in the crippled children's program in Northeast Ohio. Dr. Heyman had trained with Dr. Royal Whitman in New York City and was one of the first orthopaedic surgeons in our country to specialize in pediatric orthopaedics. He was a founder of the Ohio Society for Crippled Children, an organization eventually responsible for establishing the International Society for Crippled Children. He also founded the Crippled Children's outlying clinics throughout Northeast Ohio, many of which are still active to this day. Dr. Hayman became the first Clinical Professor of Orthopaedic Surgery at Western Reserve School of Medicine. He was an attending surgeon at Rainbow Hospital and later became President of the American Board of Orthopaedic Surgery (1952-1953).

### ●●1920 to 1924●●

George I. Bauman, MD, a gradu-

ate of Western Reserve Medical School, became Director of Orthopaedic Surgery at Lakeside Hospital and Western Reserve University in 1920. Dr. Bauman had trained in orthopaedic surgery in Europe, published multiple papers on orthopaedic subjects and served as an editor of *The Journal of Bone and Joint Surgery*. While Dr. Bauman was Director of Orthopaedics, Dr. Louis Sterin became the first orthopaedic resident in 1922 (followed by Dr. Justice Pickett, who completed his residency in 1930. Dr. Pickett later became Director of Orthopaedic Surgery at the University of West Virginia and an editor of *Clinical Orthopaedics and Related Research*).

### ●●1924 to 1953●●

In 1924, Dr. Maxwell Harbin, who had trained under Dr. Harvey Cushing at the Peter Bent Brigham Hospital in Boston, was recruited to become Chief of Orthopaedic Surgery at Lakeside Hospital, Rainbow Hospital and Western Reserve University School of Medicine. In 1926, Lakeside Hospital, Babies and Children's Hospital and the maternity hospital formed an amalgamation and were incorporated as University Hospitals of Cleveland. Lakeside Hospital moved to its current University

Circle location and Rainbow Hospital moved to its new campus on South Green Road in South Euclid. The orthopaedic staff consisted of Dr. Harbin, Dr. Clarence Heyman, Dr. John Murphy, Dr. Glen Barber and Dr. Wilbert McGaw.

In 1947, Dr. Charles H. Herndon was recruited to join the orthopaedic staff of University Hospitals. Dr. Herndon, a graduate of Harvard Medical School, had completed his internship at UH and then volunteered to join the American Hospital in Oxford, England. Following World War II, he completed his training at the Hospital for Special Surgery in New York.

### ●●1953 to 1982●●

In 1953, Dr. Charles Herndon became Chairman of Orthopaedic Surgery at University Hospitals and Western Reserve University School of Medicine. Under Dr. Herndon's leadership, Orthopaedics at Case and UH flourished. He built a robust clinical and research program that attracted outstanding resident applicants from across the country. Dr. Herndon was elected President of the American Board of Orthopaedic Surgery (1964-1966) and President of the American Academy of Orthopaedic Surgeons (1967-1968). In 1961, Mr. and Mrs. George

Humphrey established the Rainbow Professorship in Orthopaedics at the School of Medicine, and Dr. Herndon was appointed to this Chair.

In 1978, Orthopaedics became a separate department in the School of Medicine and quickly became one of the pre-eminent orthopaedic departments in the United States. Under Dr. Herndon's tenure, the full-time faculty increased from three to 17 orthopaedic surgeons, with an additional nine basic scientists. The endowment funds increased ten fold.

### ●●1982 to 1988●●

On July 1, 1982, Dr. Kingsbury G. Heiple became the first holder of the Charles H. Herndon Professorship at CWRU and Chairman of the Department. Dr. Heiple completed his orthopaedic residency at CWRU and was recognized as an excellent technical surgeon and brilliant clinical scientist. Under his leadership, the department continued to grow its clinical and research divisions. During Dr. Heiple's tenure, the department sub-specialized and increased its national recognition through its excellent faculty and residency program. Dr. Heiple served as President of the American Board of Orthopaedic Surgery

(1984-1985) and served as Chairman of the department until 1988.

### ●●1989 to 2002●●

In 1989, Dr. Victor M. Goldberg was appointed the Charles H. Herndon Professor and Chairman of the Department of Orthopaedics. Under Dr. Goldberg's leadership, the department became internationally recognized in orthopaedic research and led the United States for many years in funding from the National Institutes of Health. Dr. Goldberg is an internationally recognized expert in joint replacement surgery and was elected President of the Knee Society in 1996 and Chairman of the Orthopaedic Research and Educational Foundation (2003-2005) and served as Chairman of the Department through 2002.

### ●●2003 to Present●●

In 2003, Dr. Randall E. Marcus became the third holder of the Charles H. Herndon Professorship and the Chair of the Department of Orthopaedics. Dr. Marcus is the ninth surgeon to lead Orthopaedics at University Hospitals Case Medical Center and Case Western Reserve University.

See **YEARS**  
Back Page

## GOODFELLOW (continued from cover)

has improved dramatically," he says. "Patients can go home after just a couple of hours in recovery. When we first started doing these, it took a year and a half for even big time athletes to completely recover. Now they recover within six months."

Soccer players have benefited from Dr. Goodfellow's expertise in sports medicine since the mid-1980s when he was named head team physician for the Cleveland Force – and later the Cleveland Crunch – indoor soccer team. When two former Force coaches became involved with the U.S. Soccer Team, they brought Dr. Goodfellow along with them to serve as a team physician.

As a team physician for the U.S. World Cup Soccer Team since 1992, Dr. Goodfellow has traveled to Germany, Italy, France, Ecuador, Mexico and various U.S. venues, caring for players. He's also served as a team physician for the U.S. Soccer Olympic Team in 1993 and 1994, and head team physician for the U.S. Soccer U21 Mens Team from 1996 to 2000.

Dr. Goodfellow – who is a member of the American Academy of Orthopaedic Surgeons, the Ohio Orthopaedic Society and the American Orthopaedic Society for Sports Medicine – said sports medicine has branched out from its beginnings as a specialty for elite athletes at the collegiate, professional or Olympic levels. Now the services are standard for weekend warriors to children.

Along with Sports Medicine's care for professional athletes, Dr. Goodfellow says Sports Medicine has an outreach program at local high schools and colleges. The department provides trainers for school sports teams, as well as training services.

"We use our residents to provide an educational experience for them and to help the training staff and coaches by having a doctor on site for sporting events," he says.

Two sports medicine specialists – Susannah Briskin, MD, and Michael Kelli, DO – provide nonoperative sports medicine services to manage issues that don't require surgical involvement, including

working with patients with potential cardiac ailments or asthma that may inhibit an athlete's ability to perform.

"We're sort of full service for sports medicine, both operative and non-operative," Dr. Goodfellow says.

And the Sports Medicine team is always looking for ways to better treat patients. One major area of research involves establishing programs in meniscal and articulate cartilage regeneration.

When patients tear the meniscal cartilage – the C-shaped cartilage in the knees – the standard procedure is to remove the tissue. But that leads to arthritis since the meniscal cartilage acts as additional cushioning for the joints. The goal, Dr. Goodfellow says, is to replace the torn tissue with tissue that can regenerate itself and provide that cushioning.

"It's a complex structure and we've had challenges," he says. "It would be nice at one point if we have the meniscus partially removed to sew another piece in there and have it regenerate."

## UH Sports Medicine Committed to Athletes Through Preventive Care, Injury Treatment and Research

When the concept of sports medicine first came about, the recipients of top-tiered medical care were elite athletes at the collegiate, professional and Olympic levels.

Today sports medicine services are standard care for everyone from children to weekend warriors to professional athletes. The University Hospitals Orthopaedics Department is committed to maintaining an active role in sports medicine. A full service Sports Medicine division treats patients and offers outreach programs to high schools and college, provides trainers to sports teams and offers training services.

One of UH's sports medicine specialists is **Shana Miskovsky, MD**, (pictured above) who is focusing her research and clinical work in sports medicine, particularly in the area of figure skating. A former competitive figure skater and coach, Dr. Miskovsky is interested in designing a new figure skating boot better suited for the sport's increasing physical demands.

Her research is focusing on the biomechanical aspect of figure skating to reduce injuries while improving overall performance. Ultimately, she



wants to see a skate boot designed to improve a skater's ability to jump higher, provide enhanced shock absorption and decrease shear stresses on the skin.

Another skater on the team – orthopaedic surgeon and sports medicine specialist **Brian N. Victoroff, MD** – turned his affinity for speed skating into a medical career focused on repair of shoulder and knee injuries. Dr. Victoroff, head of the shoulder surgery section, started speed skating after watching the 2002 Winter Olympic Games. Sore muscles ensued from skating clockwise at high speed with knees bent to 90

degrees, pushing the skates to the side. Finding scarce medical literature on speed skating injuries, he attended elite level speed skating events across the county to collect data. His investigation of injuries will be published in the future in a sports medicine journal. He also served as a team physician for the US World Cup Short Track Speed Skating Team and traveled to World Cup races in Asia and Europe.

**Reuben Gobezie, MD**, joined the Department to strengthen the shoulder and elbow service and to continue his basic science research in musculoskeletal proteomics. His expertise includes treating traumatic instabilities, rotator cuff, arthritis, sports-related injuries, arthroscopically-treated problems, conventional shoulder replacement, reverse total shoulder replacement, shoulder and clavicle fractures.

Dr. Gobezie, who developed an expertise in the emerging field of musculoskeletal proteomics, helped lead a translational research team to use proteomics technology to study arthritis. His research uses liquid chromatography, tandem mass spectroscopy and protein microarray technology. Dr. Gobezie's

## YEARS (continued from page 3)

"It is my privilege to lead an outstanding orthopaedic and basic science faculty and residency program," Dr. Marcus says.

During the last five years, the department has recruited an additional 10 clinicians and three basic scientists and continues as a leading recipient of NIH funding among orthopaedic departments in the country. Additionally, the department has increased its endowment, and its number of endowed professorships has grown from one to seven. The department currently receives more than 500 applications per year for its six residency positions. As in previous decades, the department has been honored nationally by the election of its Chairman to leadership positions. This year, Dr. Marcus was elected as President of the Association of Bone and Joint Surgeons and President-Elect of the American Board of Orthopaedic Surgery.

In our 100<sup>th</sup> year, Orthopaedics at University Hospitals Case Medical Center forges ahead in its tradition of excellence in service to its patients, innovative research and outstanding educational programs for residents, fellows and students.

## Professional Referral Services Resource for Physicians

Whether your patient suffers a clavicle fracture or a meniscus tear, we in the Department of Orthopaedics at UH recognize the importance of providing easy access to our specialists and timely communications.

That's why we offer our **Professional Referral Services** to help referring physicians. Through Nancy Hagen, you can be immediately linked via pager for any complex questions regarding your orthopaedics patients, as well as access to all faculty, staff and services.

Hagen appropriately triages all patients and assures appointments for patients within 48 hours when necessary.

**Our Professional Referral Services can be accessed  
Monday through Friday until 5 pm by calling  
216-983-0393**

**You can reach our Orthopaedic Appointment Scheduling  
at 216-844-7200**



research has already resulted in the identification of a protein biomarker profile for early and late osteoarthritis.

**John H. Wilber, MD**, director of UH's Orthopaedic Trauma Service, specializes in trauma and adult reconstruction with expertise in multiple and complex fractures, pelvic and acetabular fractures, and nonunions and malunions. His interests lie in treating injuries of the knee and shoulder using arthroscopic techniques.

Dr. Wilber was one of the first

fellowship-trained orthopaedic traumatologists in Cleveland. For 25 years he has taught courses nationally and internationally on basic and advanced AO/ASIF, a technique he learned in Switzerland. He is known for his skill in treating complex fractures using these techniques.

Through their combined talents, along with others in the Sports Medicine department, weekend warriors and professional athletes alike can rest assured their shoulders and knees are protected.

*Orthopaedic Update* is published for the Department of Orthopaedics at University Hospitals by the Department of Marketing & Communications to inform physicians of current research, treatment and advances in orthopaedic care.

**Executive Vice President, University Hospitals  
President, University Hospitals Case Medical Center**  
Fred C. Rothstein, MD

**Chairman, Department of Orthopaedics**  
Randall E. Marcus, MD

**Editor**  
Ann Bungo

**Contributing Writers**  
Kim Bonvissuto

**Professional Referral Services**  
216-983-0393

**Orthopaedic Appointment Scheduling**  
216-844-7200

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University Hospitals  
Department of Orthopaedics  
11100 Euclid Avenue  
Cleveland, OH 44106



Department of Orthopaedics

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## Department of Orthopaedics 2007 Visiting Lecture Series

■ **WEDNESDAY, JUNE 20, 2007**  
7:30 A.M. - 8:30 A.M.

### Rainbow Distinguished Visiting Professor

**Leon Root, MD**  
*The Pediatric "Orthopaedic Surgeon's Role in the  
Treatment of Neuromuscular Disorders"*  
Hospital for Special Surgery

Dr. Root is the author of several accomplished consumer books, such as *No More Aching Back*, *Beautiful Bones Without Hormones* and million-copy bestseller *Oh, My Aching Back*. Dr. Root is the former Chief of Pediatric Orthopaedics at the Hospital for Special Surgery and a past president of the American Academy for Cerebral Palsy and Developmental Medicine. He was also fundamental in establishing the Leon Root Motion Analysis Laboratory.

■ **WEDNESDAY, SEPT. 5, 2007**  
7:30 A.M. - 8:30 A.M.

**Randy Rosier, MD**  
*The Molecular Biology of Orthopaedic Surgery*  
University of Rochester Medical Center

Dr. Rosier is the former Chair of Orthopaedics at the University of Rochester and currently leads the program's research efforts, including a \$7.8 million Center of Research Translation (CORT) grant from the National Institute of Arthritis and Musculoskeletal and Skin Diseases. As Chair, Dr. Rosier established the Center for Musculoskeletal Research to coordinate all intra- and inter-departmental research. This establishment paved the way for the University of Rochester to earn the No. 1 funding ranking by the NIH in 2005.

■ **TUESDAY NOV. 6, 2007**  
Lecture begins at 4:00 P.M.

### Carter-Makley Lecture

**Bogdan Czerniak, MD, PhD**  
University of Texas M.D. Anderson Cancer Center

Dr. Czerniak is a Professor of Pathology, Nathan W. Lassiter Distinguished Chair in Urology and Deputy Division Head for Research at The University of Texas M.D. Anderson Cancer Center in Houston. This lectureship was established by the Departments of Orthopaedics and Pathology to honor Dr. John Carter, a former Chair of the Department of Pathology, and Dr. John Makley, a former Director of Musculoskeletal Oncology.

**All lecture sessions are at the  
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For more information or

to RSVP, please contact:

KATHY GRISWOLA

216-844-4896