

Department News

Chair's Welcome

Fall 2024



From the earliest ancient civilizations across the globe, teachers have been custodians of knowledge and moral integrity. Teachers' unique role in society to shape lives of their students and provide guidance to future generations is the reason why teaching

since the earliest times has been considered a noble profession. Today, teachers continue to hold respect in society, despite the fact that there is a often disconnect between that high level of respect and their often meager salaries. One of the vice-presidential candidates in 2024 is a former public-school teacher, bringing new focus on this profession.

Today's teachers face unique challenges never before encountered--the ubiquity of social media at the fingertips of every student with a cell phone, cyber bullying, increasing competition for jobs and college admission, etc. My son just started 9th grade in our local public high school, and my daughters attend middle school in the same district. The critical role teachers play in each of our children's futures does not seem to be reflected in the investments our society makes. Where I live, the state of Arizona has a history of chronic under-funding of public education, ranking 32nd in teacher salaries and 49th in per student spending. Given these grim statistics, I am sometimes amazed that there continues to be bright and talented individuals who take up the noble calling of pursuing a career as a public-school teacher. My wife and I are so grateful to our children's teachers, who inspire and dedicate themselves to their students. Why do people choose to be teachers? For some, it may be the satisfaction that they are making a difference in their students' lives. For others, it may be the passion they feel for their chosen subject and the desire to share that knowledge with others.

As physicians, we don't always think of ourselves as teachers, but it is inherent to the profession that all physicians are teachers, whether to our patients, to the allied health workers who support our clinical work, or to our trainees. To those physicians and otolaryngologists who choose to work in an academic setting, the leading reason for this career choice is the opportunity to participate in education—to be a teacher.

I recently returned from the Annual American Academy of Otolaryngology meeting in Miami and had the opportunity to run into many of my former students and trainees--some recent, and in some cases, from 20 years ago. How incredibly satisfying to learn of their current work successes and to hear their kind words, whether true or not, of appreciation to me for the impact I somehow made in their lives and careers. I also had the opportunity at a recent meeting to reconnect with some of my own teachers and mentors and to thank them for their influence on my career.

Modern medical education in the United States traces its origin back more than 130 years ago to the Johns Hopkins School of Medicine, with the traditional format of the first two preclinical years of medical school consisting of mostly lectures followed by a series of monthlong clinical clerkships for the last two clinical years—an educational pathway which continued mostly unchanged in US medical schools through most of the 20th century. In recent decades, however, medical education in the US is undergoing many changes. Rather than large classrooms and minimal direct patient care experience during the first two years of medical school, there is now the concept of the small group tutorials, the flipped classroom,

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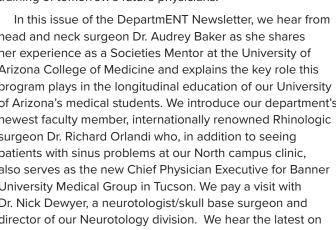
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and earlier introduction of clinical care with longitudinal patient panels assigned to 1st and 2nd year medical students. For procedural training, requirements for reduced work hours have meant a greater emphasis on simulation training and the use of technology to augment residents' surgical experience and positively impact patient safety. But the fundamentals of medical students learning from actual practicing clinicians who share their perspective, knowledge, and professional values, remains as critically important as ever to the education and training of tomorrow's future physicians.

head and neck surgeon Dr. Audrey Baker as she shares her experience as a Societies Mentor at the University of Arizona College of Medicine and explains the key role this program plays in the longitudinal education of our University of Arizona's medical students. We introduce our department's newest faculty member, internationally renowned Rhinologic surgeon Dr. Richard Orlandi who, in addition to seeing patients with sinus problems at our North campus clinic, also serves as the new Chief Physician Executive for Banner University Medical Group in Tucson. We pay a visit with Dr. Nick Dewyer, a neurotologist/skull base surgeon and director of our Neurotology division. We hear the latest on Dr. Carlos Caulin's head and neck cancer research and catch up on many other exciting recent happenings and accomplishments of the Department.

Stare of Word





Dr. Wang with his former trainees, Dr. Bearelly (UA), Dr. Groppo (SacENT), and Dr. Huoh (UCIrvine).



Dr. Wang with a few of his mentors and former teachers at a recent meeting.

Research Spotlight – Dr. Carlos Caulin



Dr. Carlos Caulin, Associate Professor, Department of Otolaryngology – Head and Neck Surgery and member of the Cancer Biology Program at the University of Arizona Cancer Center (UACC) received a \$750,000 grant from the Arizona Biomedical Research Centre (ABRC) to study cellular mechanisms of resistance to immunotherapy in oral squamous cell carcinoma (OSCC), Co-investigators on this award include Dr. Justin Wilson, Assistant Professor of Immunobiology, Dr. Megha Padi, Assistant Professor of Molecular and Cellular Biology and Dr. Robert Klein, Associate Professor of Pathology.

Dr. Caulin's team investigates how genetic alterations found in OSCC contribute to tumor development and response to therapy. Recent studies from this group suggest that mutations in p53, the most frequently mutated gene in OSCC, promote resistance to immune checkpoint inhibitors (ICI), a type of immunotherapy that reactivates the anti-tumor effects of immune cells. "Immune checkpoint inhibitors are becoming part of the standard of care of OSCC patients. However, only approximately 20% of the OSCC patients respond to this treatment modality, and it is presently unknown why some patients respond but others do not".

This ABRC award will support Dr. Caulin's team in their efforts to understand why tumors with p53 mutations are more resistant to ICI. The goal is to uncover mechanisms of resistance that will enable the design of target therapies to sensitize OSCC to ICI. "We will use in vivo experimental models to study the cellular and molecular content of resistant tumors to define the specific immune microenvironment of these tumors and to identify molecular pathways that promote resistance to ICI. In addition, we will implement preclinical studies designed to sensitize p53-mutated tumors to ICI. We anticipate that these studies will provide experimental support for future clinical trials aimed at expanding the number of OSCC patients who can benefit from immunotherapies."

Resident Spotlight – Claire Gleadhill, MD, PGY-5, Chief Resident

I was born in Tempe, AZ and spent much of my childhood in Memphis, TN. For my undergraduate degree I attended California Polytechnic State University in San Luis Obispo, CA where I majored in Child Development and Psychology. I then attended East Tennessee State University Quillen College of Medicine for medical school in Johnson City, TN. During my fourth year of medical school, I had the chance to rotate with University of Arizona's Otolaryngology – Head and Neck Surgery team and immediately felt at home with the residents and faculty. I was excited to have the chance to train at a place that has so much camaraderie between its providers. In my free time, I love to garden, travel, practice yoga, hike, fly fish, and spend time cooking and eating with family and friends. I have enjoyed joining the ranks of such an awesome group of people here and exploring all the adventures Arizona has to offer!

What attracted you to U of A?

I was very fortunate to spend a month on the ENT service during my fourth year of medical school. Through this experience I was able to gain an incredible amount of surgical knowledge and skill in a supportive and encouraging atmosphere. I knew it was the right place for me to continue my training. The amount of surgical experience and support is amazing, I was even operating on my very first day of intern year!

What is your favorite surgery to be involved in?

My favorite surgeries are parotidectomies, neck dissections, and free flap reconstructions. Throughout my residency, I have come to enjoy head and neck cancer surgery with its variety of procedures from large resections requiring knowledge of intricate anatomy to delicate microsurgery.

What do you enjoy doing in your spare time?

I absolutely love plants and animals. The biodiversity of Tucson is incredible, and I have enjoyed watching my many species of cacti and succulents thrive here. I also love to read, practice yoga, and hike.



Left to right: Chris Adams, PA-C, med student Phil Tseng, PGY-1 Bridget Vories, and PGY-5 Claire Gleadhill



Dr. Andrew Johnson and Dr. Gleadhill on top of Mt. Lemmon



Dr. Gleadhill honing her skills in the OR.

What is it like being the Chief Resident?

In a word: AMAZING. I'm fortunate to lead an incredible team, and it's deeply fulfilling to care for patients throughout their surgical journey and recovery. I also enjoy teaching newer residents and discovering their unique strengths.

How have your research interests evolved during your residency?

Although I am going into a fellowship focused on head and neck cancer reconstruction, I have always been fascinated with laryngology and airway management. Thanks to the excellent mentorship of Dr. Helena Yip, I was able to research subglottic stenosis and vocal cord dysfunction. From there I went on to hone my interests in head and neck surgical oncology and studied the late effects of radiation. Recently, my research has centered on osteoradionecrosis of the calvarium and the best approaches for reconstructing large scalp defects.

What are your long-term goals?

I was honored to match at Case Western Reserve University for Head and Neck Surgical Oncology and Reconstruction Fellowship! After fellowship, I hope to work at an academic institution training medical students and residents while treating patients with head and neck cancer.



Dr. Gleadhill with her fiancé.

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Faculty Spotlight – Nicholas Dewyer, MD

Nicholas Dewyer, MD is an Assistant Professor of Otolaryngology - Head and Neck Surgery and is the Director of the Division of Otology, Neurotology, and Skull Base Surgery and Director of Audiology. He is a surgeon with expertise in disorders of the ear, hearing, and balance systems. He treats patients with conditions including hearing loss, otosclerosis, superior semicircular canal dehiscence, cholesteatoma, and vestibular schwannoma (acoustic neuroma). As a skilled otologic surgeon, he uses innovative approaches like minimally-invasive endoscopic ear surgery and balloon eustachian tube dilation, and has taught these techniques to other surgeons in national and international courses.

Dr. Dewyer graduated Magna Cum Laude from the University of Michigan with a degree in biomedical engineering and received his medical degree from the University of Michigan Medical School, where he was the recipient of the prestigious full-tuition Dean's Scholarship. He completed his residency in

Otolaryngology - Head and Neck Surgery at the University of California, San Francisco (UCSF), followed by a two-year fellowship in Neurotology at Harvard Medical School. He is dual certified by the American Board of Otolaryngology - Head and Neck Surgery in both Otolaryngology and Neurotology. He joined the faculty at the University of Arizona in 2019. We interviewed Dr. Dewyer for this newsletter's Faculty Spotlight.

What is your favorite part of your work?

My favorite part of my work is when I can really help a patient with a problem and improve their life. I'm fortunate that as a neurotologist I can do this often. Fixing a chronically draining ear, or improving hearing with a stapedotomy or cochlear implant, or even just clearing out a cerumen impaction can make patients very happy, and that is fun and rewarding.

I also enjoy being an expert and helping patients with tough or puzzling cases. Some of my favorites are the patients with superior semicircular canal dehiscence syndrome, who often live with strange symptoms that no one could explain, like feeling their eyes vibrate when they sing. Many times, I can validate their experiences, explain why they are having them, and then fix them with an operation. These have been some of my happiest patients.

Another part of my work that is very rewarding is teaching residents. These are amazing young doctors who are working hard and building the foundation for the rest of their career. They start out knowing very little about otology, but by the end of their five-year residency they know enough and have the skills to go out and take care of patients independently. It is a privilege to play a role in their education and fun to see them learning in action.

What are your goals for the Division of Otology, Neurotology, and Skull Base Surgery?

We have accomplished quite a bit as a division in the last five years. Our cochlear implant program continues to grow and serves as a destination for not just the people of Tucson but all across Arizona and New Mexico, even as far as Albuquerque.

We also routinely care for the veterans of southern Arizona. Our center's expertise and volume positioned us to start a multi-institutional prospective study examining how cochlear implants influence mental health, which is ongoing. As our reputation for taking great care of patients with hearing loss and otologic disease expands, we plan to engage in more research studies that could lead to better understanding and treatment of these conditions.

What new things are happening in the world of otology and neurotology?

This is a really exciting time to be working as a neurotologist! Inner ear gene therapy for monogenic deafness has shown success in early clinical trials and I think will likely become a treatment option for a select group of patients with congenital deafness. Our understanding of the interplay between migraine and Meniere's disease continues to evolve and I think will completely redefine how we think about and treat these conditions. And over-the-counter hearing aids and amplifiers are a new frontier for treating patients with hearing loss that hopefully will expand awareness and access. There is a lot of good stuff to look forward to.

Finally, what is your favorite thing about living in Tucson?

Without a doubt my favorite thing about Tucson is the natural beauty. It is a totally different natural world than anywhere I have lived before, with beautiful cacti, mountains, hummingbirds, sunsets, and bobcats among others. There are great hiking trails all around town, and my family and I look forward to getting back out on them in the cooler fall weather.



Alumni Update –

Dr. Erynne Faucett

After finishing her residency in 2017 as the first resident in Otolaryngology – Head and Neck Surgery at the University of Arizona, Dr. Erynne Faucett completed a complex pediatric otolaryngology fellowship at the University of Toronto/ Sick Kid's Hospital (Toronto, Canada). During this time, she and her now-wife, Joyce (Gozdecki) Faucett were married in San Juan, Puerto Rico. Dr. Faucett is double-board certified in Otolaryngology - Head and Neck Surgery and Complex Pediatric Otolaryngology (CPO). At the end of her fellowship, Dr. Faucett moved back to Arizona to join her wife and started practicing at Phoenix Children's Hospital in 2018. In May 2020, their twin daughters were born at 32 weeks amid the pandemic. Dr. Faucett and her family have recently moved to Sacramento, CA in 2023. She joined the Department of Otolaryngology - Head and Neck Surgery at the University of California, Davis. She is the past chair for Diversity, Equity, Inclusion for the AAO/HNS-F and continues to serve in many roles that focus on DEI efforts nationally and locally. She currently serves in many roles at the UC Davis School of Medicine including curriculum development and student promotion/retention. Her clinical interests include pediatric endocrine/thyroid disorders, head and neck malignancies, and complex sleep and airway surgeries. She and her team were the first to implant a hypoglossal nerve stimulator in a pediatric patient in Northern California. Outside of work, Dr. Faucett enjoys spending time with her family, traveling (the twins have been on over 50 flights), coaching her daughters in soccer, taking care of their chickens and dog, and learning Spanish (to keep up with her wife and daughters).









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Banner University Medicine welcomes new Chief Physician Executive: Richard R. Orlandi, MD, MBA



What brought you to Banner-University Medicine and what are your goals?

Simply put, it was the potential of this organization. Academic medicine in the US faces significant headwinds, with physician shortages creating access problems for patients and shrinking clinical margins threatening the academic mission. A partnership between two excellent organizations like Banner Health and the University of Arizona

has great potential to thrive in this challenging environment. Nearly ten years after these two entities' affiliation, the partners continue to deepen collaboration and trust. I'm excited to be a part of Banner-University Medicine and help achieve its potential for our teams, our patients, and our community. To me, that potential manifests as providing high-quality health care that is accessible and patient-oriented, and that's accomplished by supporting our providers and staff with what they need to excel. All of us went into health care to serve others, and it's that "other-focused, internally driven" nature of our team members that inspires me.

What has been your career path?

A fellowship-trained rhinologist with over 25 years in practice, I completed my residency at UCLA and fellowship at University of Pennsylvania. I was on faculty at the University of Michigan and then the University of Utah where I spent the last 24 years practicing as well as training residents and fellows.

Early in my time at Utah I was involved in biomaterials research and was a PI on an NIH STTR grant using hydrogels to reduce ostial narrowing after sinus surgery. The research led to the co-founding of a biomaterials company, an IPO, and subsequent acquisition. While at Utah I also became more involved with health care administration over the course of my career, with responsibilities for our outpatient enterprise and for strategic planning. I've also served in leadership positions within the American Rhinologic Society and have been the lead author on the *International Consensus Statement on Allergy and Rhinology: Rhinosinusitis*, published in 2016 and 2021. I'm honored to join Banner-University Medicine as a professor of Otolaryngology – Head and Neck Surgery in the University of Arizona College of Medicine-Tucson and as the Chief Physician Executive for the Banner-University Medical Group.

Tell us more about you.

I was born in New York City and raised in both Utah and the New York area. Neither of my parents spoke English as their first language, and I was the first in my family to graduate from college. Having health problems as a child with my family's limited resources, I'm a strong advocate of providing as much high-quality health care access to our community as we possibly can. I've been married for over 35 years and have three children and two grandchildren. Besides enjoying spending time with family, I enjoy cycling (both road and mountain), skiing (both alpine and Nordic), traveling and reading.

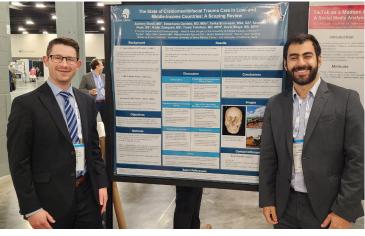


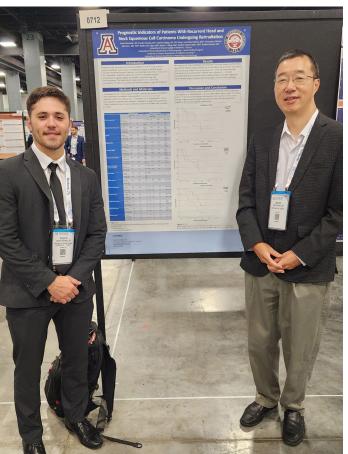
American Academy of Otolaryngology Annual Meeting

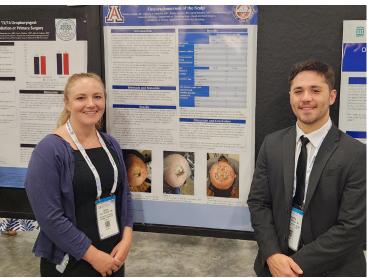
September 28 – October 1, 2024 in Miami, Florida













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2024 Otolaryngology Resident Graduation

The annual Otolaryngology Resident Graduation Dinner was held on June 8, 2024 at the Westin La Paloma Resort. Dr. Andrew Johnson received his certificate as the eighth graduate from the University of Arizona Department of Otolaryngology Residency Program. Born and raised in Fairbanks, Alaska, Andrew attended the University of Washington in Seattle, where he received a degree in bioengineering. He attended medical school at Case Western Reserve University in Cleveland, Ohio, where he was introduced to the field of otolaryngology at the end of his first year and was involved in research on pediatric hearing loss. He was drawn to the field of otolaryngology by its diverse surgical and clinical practice and the fascinating anatomy of the head and neck. After graduation, Andrew relocated to Bend, Oregon to begin his career as a general ENT.

During the graduation dinner, remarks were given by Dr. Steven Wang, Dr. Shethal Bearelly, Residency Program Director, and Dr. Audrey Baker. The evening also featured a special musical performance by the Wang Family.

The following awards were presented during the evening's event:

The Stephen Goldstein Memorial Teaching Award:
Established to honor a faculty member who offers excellence in teaching the principles and practice of Otolaryngology.
Dr. Nicholas Dewyer received the award for 2023-2024.

Affiliated Clinical Faculty Teaching Award:

Presented to an affiliated faculty member within the Tucson community.

The 2023-2024 recipient was Dr. Michael Bays.

Outstanding Research Presentation Award:

Given for the best presentation at the Research Symposium held the day prior to graduation, where residents showcase their ongoing research projects.

The 2023-2024 recipient was Dr. Matt Groysman for his presentation, "Acute Invasive Fungal Sinusitis: The University of Arizona Experience."



PGY-4 Matt Groysman and Dr. Shethal Bearelly



PGY-5 Claire Gleadhill and Dr. Michael Bays



Dr. Andrew Johnson

New Resident Orientation Picnic

We had beautiful weather for our annual New Resident Orientation Picnic at Rio Vista Natural Resources Park. Faculty and clinic staff welcomed our incoming residents, offered sage wisdom about how to navigate the ups and downs of residency, and gave advice about fun things to do in the Tucson area.



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ENT in the Desert 2025

February 6 – February 8, 2025

Loews Ventana Canyon Tucson, AZ

Miriam Loyo Li, MD

Associate Professor of Otolaryngology - Head and Neck Surgery Division of Facial Plastic and Reconstructive Surgery Oregon Health & Science University Facial Plastic Surgery Clinic

Sanjay Parikh, MD, FACS

Professor and Associate Chief of Surgery University of Washington School of Medicine Otolaryngology Head and Neck Surgery Seattle Children's Hospital

Uttam K. Sinha, MD, MS, FACS

Professor and Director of USC Head and Neck Center, Los Angeles Watt Chair in Head and Neck Cancer Research Keck Medicine of USC University of Southern California

Stacey Tutt Gray, MD

Walter Augustus Lecompte Associate Professor of Otolaryngology - Head and Neck Surgery Vice Chair of Education
Residency Program Director
Harvard Medical School, Department of Otolaryngology - Head and Neck Surgery
Sinus Center Director, Massachusetts Eye and Ear

Philip A. Weissbrod, MD

Director, Center for Airway Voice & Swallowing Professor, Otolaryngology Head & Neck Surgery Affiliate Faculty, Electrical and Computer Engineering University of California San Diego

https://bit.ly/ENTD2025

The Societies Mentor Experience — Dr. Audrey Baker



The Societies Program is the centerpiece of medical education at the University of Arizona. The Societies Program is a four-year longitudinal course covering basic medical interviewing, physical examination techniques, and providing consistent and structured exposure to the culture of medicine, professionalism, and the doctor-patient relationship. This learning community fosters deep mentorship between faculty and students and within the student group itself.

Over the past three years I've had the privilege of being a Societies Mentor at the University of Arizona College of Medicine. Each mentor is assigned to six students, following them throughout their medical school career. The mentors are there to "coat" their students at the white coat ceremony, and again to "hood" their students at graduation. In the preclinical years we meet weekly with the M1s and M2s. This is where students learn the fundamentals of the physical exam, history taking, and special labs focusing on the most common problems seen in medical practice.

We work with standardized patients and learn how to give and receive feedback openly and whole heartedly. We discuss difficult patient encounters and how to navigate hard conversations with our patients and our colleagues. After mastering basic history and physical skills, we then travel to the bedside, where students apply the skills they have learned in a hospital setting. During the clinical years, we meet monthly with students to discuss ethics cases, review their research projects and career goals, and to offer much needed support during long hours and trying rotations.

Learning communities have flourished and are ubiquitous in nearly every medical school, and these are mostly mentored by general practitioners: family medicine, internal medicine, emergency medicine physicians. Might I, an Otolaryngologist, be helpful to a group led by generalists? I dusted off my stethoscope and googled some lung sounds to find out. Can a head and neck surgeon teach basic heart sounds? The answer is YES. Am I truly prepared to re-learn pelvic speculum examination? Again, the answer is YES! (It's just like esophagoscopy, I swear!) In addition to the basic physical examination, we were able to establish an advanced head and neck examination lab. The entire department of Otolaryngology assisted in leading small groups through the head and neck examination including laryngoscopy. The lab, even in its first year, was rated the top learning experience of the entire course. Our department has used this success as a launching pad to create content within the preclinical years including lecture material, board review materials, participation in the gross anatomy lab, and the continuation of the highly rated head and neck lab.

As mentors, we learn so much from one another. The faculty meet weekly to discuss the curriculum, which is a fluid document that bends to our students' needs and the rapidly changing medical landscape. It improves with each iteration.

While our syllabus is full, much of the most important work in the societies group is in the unwritten curriculum. As we get to know each other over these formative years, the groups become intimate and sacred. Students share their fears, their triumphs, and the questions they can't ask anywhere else. A student of mine had her first patient die, and shared her experience with the group. We all wept. How precious it is for students to have trusted colleagues to support them from the very beginning of their career.

So much has changed in medical education since I went to school. (Students don't leave their homes! They stay in their jammies and watch lectures at twice the speed! They don't have books!) But so much has also stayed the same: the work is overwhelming, the first hospital experiences are exhilarating, and the relationships with fellow students and colleagues are formative. I've learned so much from the students' eagerness, from their willingness to learn and openness to inspiration.



Dr. Shethal Bearelly leading a small group head and neck lab



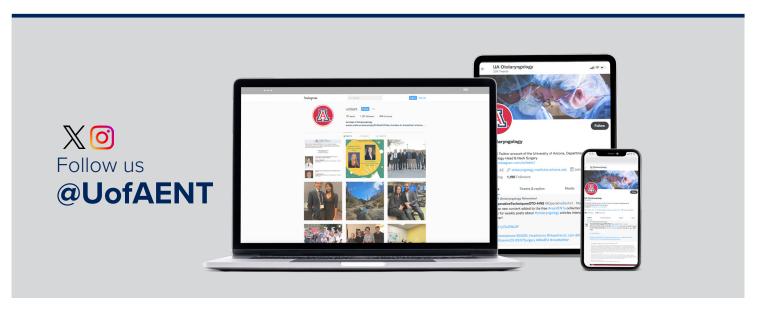
Dr. Andrew Johnson and Dr. Audrey Baker demonstrating flexible laryngoscopy



Societies Program Group Photo



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