

# H E A R T

## M A T T E R S

THE REGIONAL CARDIAC CARE PROGRAM  
NEWSLETTER DECEMBER, 2003 VOL.1, ISSUE 4



SOUTHLAKE  
REGIONAL HEALTH CENTRE

## PROFILES FROM THE HEART

### Dr. Byung C. Moon



**B**yung C. Moon, MD, FRCS(C), joined SRHC in 1999 as Medical Consultant to assist in planning for Southlake's cardio-

vascular surgery program. In 2002, he was appointed SRHC's Medical Director of Cardiovascular Surgery, and in 2003 as Division Head.

Dr. Moon graduated from Queen's University in 1982 and the following year he completed his internship in surgery. After completing residency in general surgery at Queen's University, he moved to the University of

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### Dr. Sylvain Plante



**S**ylvain Plante, MD, FRCP(C), FACC, was appointed Medical Director of the PCI Program at SRHC in 2003. Dr. Plante

obtained his medical degree in 1983 at the University of Sherbrooke, where he completed his internship the following year. From 1984 to 1988, he completed his training in internal medicine and cardiology. From 1988-1990, Dr. Plante earned a Fellowship to do experimental and clinical research in interventional cardiology at the

See DR. SYLVAIN PLANTE, page 5



Southlake's new Cardiovascular Intensive Care Unit.

## SRHC ON THE THRESHOLD OF OFFERING CARDIAC SURGERY AND PCI

**A**fter five years of meticulous planning and logistical organization, Southlake is poised to begin offering advanced cardiac services—cardiac surgery and PCI (Percutaneous Coronary Intervention)—before the end of 2003 to residents of York Region, Simcoe County, and Muskoka. The highlight of SRHC's Regional Cardiac Care Program centres on the development of an unprecedented and unique model of care for cardiac patients by the respective cardiac surgery and PCI teams. The focus of this unique model is on patient education and care *before (pre-habilitation)* and *after (rehabilitation)* their procedure. Pre-habilitation involves a

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## SRHC ON THE THRESHOLD *Continued from page 1*

thorough assessment of each patient's health status and assistance, through medical care and education, to achieve the best possible physical status prior to their scheduled procedure. Educating patients on the importance of rehabilitation in the post-operative phase is also stressed in order to attain optimal results and outcomes.

### Cardiac Surgery

Cardiac surgery is slated to commence in December 2003 under the leadership of Dr. Byung Moon with the assistance of Dr. Richard Bauset, formerly of Hôpital Laval, Québec. Dr. Charles Peniston, presently at Toronto's University Health Network, will join the team in Spring 2004.

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**SRHC ON THE THRESHOLD***Continued from page 2*

In order to meet the challenges of successfully implementing this impressive new service, SRHC's cardiac surgery program has recently hired the following key staff members:

- Anita Low - Manager of CVICU & Surgery In-patient Unit
- Paul Murphy - Manager of Perfusion
- Laurie McGuey - Resource Nurse, OR
- Byrna Rabishaw - Educator for Cardiac Surgery
- Paula Roberts - Coordinator of the Cardiac Surgery Program

In addition, many front-line nursing and professional and support staff have been hired. Since October, these newly-recruited staff

members have undergone intensive training and participated in clinical practice sessions at other cardiac centres in order to hone the specialized skills required as valued staff of the cardiac surgery team.

SRHC is grateful for all the support given by the staff of the University Health Network, St. Michael's Hospital, Sunnybrook and Women's Health Sciences Centre, and Trillium Health Centre for sharing their ideas, expertise, and years of training with Southlake's newly-hired cardiac staff.

When inaugurated in December 2003, cardiac surgery will be performed within two new operating rooms, which have recently been constructed within SRHC's new six-storey building.

Following surgery, patients will be transferred to the new Cardiovascular Intensive Care Unit for close monitoring, followed by a stay in the interim in-patient ward, pending the completion in Spring 2004 of the new 25-bed Cardiovascular Surgery In-Patient Unit within SRHC's new building. During the post-operative phase, patients will receive support not only from their doctors and nurses but also from the recently recruited pharmacists, dieticians, physiotherapists, occupational therapists, respiratory therapists, social worker and support staff. Cardiac rehabilitation to complete the recovery process will begin 4-6 weeks after a patient's discharge from the hospital.

**Percutaneous Coronary Intervention (PCI)**

The PCI program, led by Dr. Sylvain Plante, is also scheduled to start by December 2003. Dr. Plante will, at the outset, be assisted by Dr. Lorne Goldman, and Dr. Steve Miner will join the PCI staff shortly thereafter. When fully operational in Spring 2004, the PCI unit plans to perform over 1200 procedures during fiscal 2004-2005, and to provide 24-hour, 7 days a week coverage for primary PCI. At the start of the program, however, the majority of the procedures will be elective, which means they will be offered to patients who have recently undergone coronary angiography by one of SRHC's cardiologists, and who have been referred to the interventionalists for further intervention.

The PCI Program at SRHC, as envisaged by the three-member team of interventionalists, includes plans for regional primary angioplasty for patients suffering with acute MI (Myocardial Infarction), a PCI Clinic, and an acute-care PCI unit.

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## SRHC ON THE THRESHOLD

Continued from page 3

Pre-PCI assessment will be offered in the interventionalists' offices in order to provide a convenient and accessible location for patients awaiting PCI. Treatment for patients before the PCI procedure may include prescription medications, such as lipid-lowering therapy, anti-platelet therapy, beta blockers, and ACE-inhibitors. A PCI clinic nurse will be responsible for completing the assessment, and collecting information on each patient's medical history and medications taken. Patients undergoing PCI will also be invited to attend a group education session and meet with the interventionalist, who will discuss the risks and benefits of the procedure.

The post-PCI follow-up process

will involve an ECG, a treadmill test, a test to determine the patient's level of cardiac stress, and most important of all, a post-PCI assessment by the interventionalist. The importance of educating patients on cardiac rehabilitation strategies to reduce stressors in their life and improve medical compliance will be strictly reinforced in the post-operative phase. Long-term follow-up and continuing cardiac care will then revert to the patient's cardiologist and/or family physician.

SRHC's PCI team has also stressed the need for an acute-care clinic, which will be particularly beneficial for high-risk patients, who could be transferred from another hospital on *the day of or the night before* the procedure to receive specialized care.

To ensure the smooth running of the program from the day it is launched, the PCI unit has positioned the following key staff members:

- Janice Allen - Interim Manager of the Cath Lab
- Eleanor Joyce - Manager (on leave)
- Jan Maslak - PCI Coordinator
- Sue Sayewell - Coordinator for Diagnostic Catheterization

"The imminent introduction of the cardiac surgery and PCI programs represents a major accomplishment for Southlake," states Dan Carriere, President and CEO, Southlake Regional Health Centre. "I need to commend the team of dedicated individuals who have worked hard and creatively over the past five years to bring to fruition this much needed service."

## THE BEAT GOES ON

### SRHC implants its first Bi-Ventricular ICD

**T**he implementation of SRHC's comprehensive Arrhythmia Program, which began in October 2001 under the program's Medical Director Dr. Zaev Wulffhart, has now gone into full gear. Since April 2003, SRHC's Arrhythmia team has implanted 26 ICDs and completed 41 EP studies and 42 ablation procedures. In fact, SRHC has become the first community hospital in Canada to insert ICDs and perform electrophysiology studies (EP) and ablation procedures. It is estimated that by 2003-2004 fiscal year end, the numbers of these procedures will likely triple. The EP studies and ablation procedures are currently being done in Southlake's existing cath lab pending the completion in Spring 2004 of the new cath lab suites and procedure room to be housed within the Hospital's recently constructed six-storey building. At

that time, it is estimated that the number of EP studies and ablation procedures will reach 500. Dr. Wulffhart is presently supported by Marianne Beardsall (SRHC's first ACNP), but by the spring of 2004, the second electrophysiologist, Dr. Yaarvi Khaykin will join the team. Plans are under way to begin complex mapping procedures and

pulmonary vein ablations in the next fiscal year, when the program is fully operational.

On August 25, 2003, a prestigious milestone was reached at SRHC when its Arrhythmia team—Dr. Zaev Wulffhart and Dr. Norbert Perera, a vascular surgeon—implanted its first bi-ventricular ICD. This procedure represents not only a first for SRHC but also the first time that a bi-ventricular ICD implant was performed outside of a university-affiliated hospital in Ontario. The team plans to perform 1-2 of these procedures per month, and is currently developing an innovative model of care that involves pre-assessment and follow-up for patients requiring these specialized devices. This holistic approach along with maintaining close liaison with the patient's cardiologist and family physician will ensure successful recovery and an enhanced quality of life for patients.



Dr. Zaev Wulffhart, Director of Arrhythmia Services and Marianne Beardsall, SRHC's first Acute Care Nurse Practitioner.

# COUNTDOWN TO SPRING 2004

## Cardiac Surgery and PCI

**W**ith barely six months away from the entire completion of the interior of the newly constructed six-storey building at SRHC, the leadership team of the Regional Cardiac Care Program are bracing themselves to finalize interim preparations for Cardiac Surgery and PCI to commence in December 2003.

During the first five months, about 45 open-heart surgeries will



Above: Cath procedure with world-class monitoring and real-time data acquisition for more effective, efficient diagnoses. Right: A stent in place.

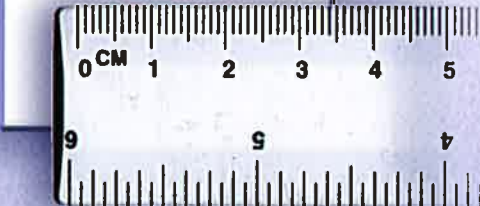
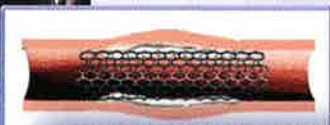
be performed per month. By fiscal year 2004-2005, the facility will schedule 914 procedures per year in the two operating rooms supported by the adjacent 9-bed CVICU and the then completed 25-bed Cardiovascular Surgical Unit.

**Percutaneous Coronary Intervention (PCI)** procedures will also start by December 2003 in a second, temporarily located catheterization lab. By 2003-2004, the number of procedures will have increased to more than 1200 per year—this figure is over and above the 4400 diagnostic catheterizations to be completed that same year at SRHC. To fully support the PCI Program, SRHC has recently received funding from the Ministry of Health for drug-eluting stents used in PCI procedures.

The **Arrhythmia Program**, which has been underway since April 2003, has to date performed

26 ICDs and completed 41 EP studies and 42 ablation procedures in the existing cath labs. When the permanent Arrhythmia unit opens in Spring 2004, the number of procedures will increase to more than 750 per year. The number of permanent pacemaker implants continues to grow since June 2000; in fiscal 2003-2004, 450 permanent implants will be performed.

Six years ago, **Cardiac Rehabilitation** at SRHC could barely support 40 clients per year. Today, however, the number has grown exponentially to almost 400 new clients in fiscal 2002-2003 thanks to the \$400,000 funding from the Ministry of Health to underwrite the operating costs. SRHC is encouraged to receive an additional \$400,000 during fiscal 2003-2004 which will add another 400 new patients to its cardiac rehabilitation program.



## PROFILES FROM THE HEART: Dr. Byung C. Moon

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Toronto in July 1988 to take the position of Senior/Chief Resident in Cardiovascular and Thoracic Surgery, and in July 1992 he assumed the additional role of Clinical Fellow at the Toronto General Hospital. In August 1992, he was appointed Staff Surgeon in the Division of Cardiovascular Surgery at the London Health Sciences Centre, where he remained until he joined SRHC.

While in London, Dr. Moon was also Assistant Professor in the

Department of Surgery, University of Western Ontario. He continues to act as Consultant and Visiting Professor in three different community hospitals in Seoul, South Korea. Dr. Moon has collaborated with other prominent cardiologists and surgeons in writing several articles for some of the prestigious North American medical journals and has been a leader in the endoscopic harvesting of veins used in bypass surgery.

As Division Head of Cardiovascular Surgery at Southlake, Dr. Moon's team will include cardiac surgeons, Dr. Richard Bauset, who recently relocated from Laval, Quebec, and Dr. Charles Peniston of Toronto's University Health Network.

"It's exciting," states Dr. Moon, "to have such an experienced and dynamic team to launch the cardiac surgery program at Southlake. Through our combined efforts, we will build a renowned program within the Province of Ontario and beyond."

## PROFILES FROM THE HEART: Dr. Sylvain Plante

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Thoraxcenter in Rotterdam, The Netherlands. Before joining SRHC, he was Interventional Cardiologist at Quebec Heart & Lung Institute, Laval Hospital and Associate Professor of Medicine, Faculty of Medicine, Laval University. During his medical career, Dr. Plante has won several prestigious honours from the Sherbrooke Medical Centre and le Fonds de la Recherche en Santé du Québec (Quebec Health Research Foundation). He has collaboratively authored numerous books and articles for several cardiology journals. Dr. Plante and his two colleagues—Dr. Steve Miner and Dr. Lorne Goldman—share a common vision to make SRHC the pre-eminent PCI centre in Canada: "Our vision for a PCI clinic, in conjunction with our plans for primary PCI and an acute care PCI-unit, will establish SRHC as an international leader in research, education, and patient care."

# YOU ASKED US

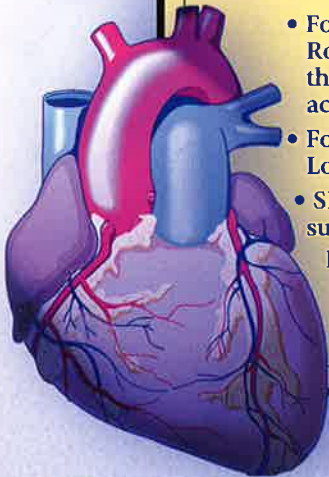
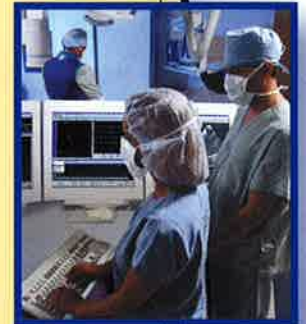
RESPONSES TO QUESTIONS FROM OUR READERS

**Q:** *How do I refer patients for Percutaneous Coronary Intervention (PCI) at SRHC?*

- A:**
- Referrals for Elective PCI can be made directly to SRHC's PCI Coordinator, Jan Maslak at 905-895-4521, extension 2707. A clinic appointment will then be arranged for the patient to meet with Jan and an interventionalist.
  - For patients requiring Urgent PCI, the cathing cardiologist will request a PCI opinion by the first available interventionalist immediately after the cardiac angiogram. If the interventionalist feels a PCI is appropriate, a date will be set for the procedure.
  - For emergent/after hours referrals, page the on-call interventionalist through SRHC's Locating Department at (905) 853-2216.

**Q:** *How do I refer patients for cardiac surgery at SRHC?*

- A:**
- For Elective Cardiac Surgery, cardiologists may refer patients using one of the following options:
    - directly to the cardiac surgeons' office:  
(F) 905-868-8371 (T) 905-895-4521, extension 2888
    - Paula Roberts, Regional Cardiac Care Coordinator - CV Surgery:  
(T) 905-895-4521, extension 2853 Pager 905-953-2227
  - For Urgent Cardiac Surgery, cardiologists will refer patients directly to Paula Roberts as listed above. Patients will be reviewed on a case by case basis by the surgeon, and the referring cardiologist will be informed of the patient's acceptance or refusal for surgery. Additional information and/or tests may be required.
  - For Emergent/after hour referrals, page the on-call cardiac surgeon through SRHC's Locating Department at (905) 853-2216.
  - SRHC also offers a "PreHab" Program, which provides patients awaiting elective surgery with supervised exercise, education and support. This program is designed to prepare patients, both physically and emotionally, for their surgery. Physicians wishing to gain further information or to refer a patient to the program can contact Janet Dominguez, Cardiac Rehabilitation Coordinator at 905-895-4521, extension 2805.



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