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Best Doctors

# Congratulations

to the nearly 600 UPMC  
physicians named as 2019  
**Best Doctors.**

Once again, there are more UPMC physicians on the annual Best Doctors list than from any other health system in the region. UPMC doctors make up **75% of the list across 77 different specialties.** With so many of Pittsburgh's Best Doctors delivering world-class care, UPMC is able to make a meaningful difference in our patients' lives.


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UPMC  
LIFE CHANGING MEDICINE

Affiliated with the University of Pittsburgh School of Medicine, UPMC Presbyterian Shadyside is ranked among America's Best Hospitals by U.S. News & World Report.

PATIENT  
STORIES



“We couldn’t ask for better doctors than those at Magee and Children’s. I can’t thank them enough. They saved my baby’s life.”

Stephanie Maines  
Haven’s Mom

*The experts at UPMC Magee and UPMC Children’s collaborate to provide the most complex care in more than 30 specialties for newborns.*

## Thirty Experts Help Baby Make Dramatic Entrance

After 11 years of hoping for a baby, Stephanie and Bryan Maines were over the moon when they found out they were expecting. At four months pregnant, Stephanie experienced abdominal pain and went to her local hospital in Dubois, Pa. Doctors performed an ultrasound and spotted a golf ball-sized mass on the fetus’ neck.

“We were devastated,” Stephanie remembers. “It was overwhelming because we tried for a baby for so long and then we hear something is wrong.”

The other news Stephanie and Bryan received was that they were expecting a girl.

### Prenatal Diagnosis of a Dangerous Mass

To receive the specialized care they needed, the Maines family was referred to Stephen Emery, MD, director of the Center for Innovative Fetal Intervention at UPMC Magee-Womens Hospital. The Center partners with UPMC Children’s Hospital of Pittsburgh to coordinate treatment for fetal abnormalities.

The rare benign mass, diagnosed as a teratoma, pressed on the fetus’ esophagus, blocking the ability to swallow and eventually to breathe. If the baby had any chance of survival, doctors would have to establish her airway during delivery.

Stephanie’s water broke early as a result of the abnormality. A helicopter flew her to UPMC Magee, where doctors were able to delay labor another week. But at 32 weeks, they couldn’t wait any longer. It was time for delivery.

“My husband told me he loved me,” Stephanie recalls. “Then he kissed my belly, told her that he loved her, and that she was strong.”

### Team Plans Complex Delivery

The multidisciplinary medical team performed a procedure called ex utero intrapartum treatment (EXIT), a specialized c-section that allowed them to create an airway for the baby. UPMC is the only health system in the region qualified to perform this lifesaving procedure, which involves specialists from numerous medical disciplines. According to Dr. Emery, “There can be 30 people in the room at the same time. This procedure shows the strength of UPMC. When Magee and Children’s collaborate, we are really powerful.”

During the EXIT procedure, doctors partially delivered the baby — her head and right arm visible — while keeping her attached to Stephanie through the umbilical cord and placenta. This allowed her to receive oxygen from her mother while doctors worked to insert a breathing tube.

On September 19, Haven Rayn Maines was born with black hair like her dad, weighing just over five pounds. The mass in her neck had grown considerably and accounted for almost half her body weight.

Once the doctors successfully established the airway, they completed the delivery and cut the umbilical cord. Stephanie had only a moment to see Haven before the newborn was taken to the neonatal intensive care unit (NICU) at UPMC Magee, where the neonatology team worked to stabilize her for transport to UPMC Children’s. Once there, the NICU team prepared her for surgery on the dangerous teratoma.

### Another High-Risk Surgery

In the two weeks before surgery, Stephanie and Bryan were able to visit Haven in the NICU at UPMC Children’s but couldn’t hold their long-awaited baby because of her delicate airway.

Allison Tobey, MD, pediatric otolaryngologist at UPMC Children’s, recalls, “Haven’s mass contained almost half her blood volume. Removing that much blood put her at high risk, but she wouldn’t have survived if the mass remained.”

When Haven was two weeks old, Dr. Tobey and her team removed the mass and performed a tracheostomy, creating an opening through the neck into the windpipe, stabilizing Haven’s airway.

Stephanie and Bryan were finally able to hold Haven in the NICU. “It was amazing. All you want to do as a parent is hold your child. Haven is my hero,” Stephanie says.

### The Journey Home

After six months in Pittsburgh, the family was finally able to go home together. They are grateful their daughter is with them today. While Haven will need care for the foreseeable future, she is doing well. “We couldn’t ask for better doctors than those at Magee and Children’s,” Stephanie says. “I can’t thank them enough. They saved my baby’s life.”



**Robert Friedlander, MD**  
Neurosurgeon  
UPMC Department of Neurosurgery

# Anesthesiologist Travels 1,000 Miles for Lifesaving Brain Surgery

Dr. Isaac Cohen was a newly minted anesthesiologist, practicing for only two months in Miami, Fla., when his burgeoning career almost came to an abrupt end.

One morning, what started out as a headache progressed to excruciating pain. Dr. Cohen was rushed to the emergency department, where doctors found that he had suffered from a hemorrhagic stroke, or bleeding inside his brain stem.

The stroke caused Dr. Cohen to lose function on the left side of his body. At age 31, after dedicating a decade to his medical training, Dr. Cohen was facing the possibility that his career might end almost as soon as it began.

He spent nearly three weeks in the hospital working with the rehabilitation team to relearn basic functions like talking and swallowing. When Dr. Cohen was discharged, he was in no shape to practice in his field.

"There was no way I could perform my job as a physician and anesthesiologist," he reflects. "I wasn't going to be able to return to work unless I figured out what caused the bleeding."

## From Miami to Pittsburgh by Way of Venezuela

Dr. Cohen suspected that he had a cavernous malformation or cavernoma, a group of abnormal blood vessels that can form anywhere in the body but is particularly dangerous in the brain and spinal cord.

Determined to get a definitive diagnosis and receive the best care, he looked for experts nationwide. One name kept popping up in his research and referrals from colleagues: Robert Friedlander, MD, chairman of the UPMC Department of Neurosurgery.

Dr. Cohen contacted Dr. Friedlander, and the two quickly bonded over their shared Venezuelan heritage. That connection was exactly what Dr. Cohen needed to move forward. "I was terrified to have surgery, but knew it was

the only way I would have a chance to work again. I trusted Dr. Friedlander, and my research showed he was one of the best in treating these problems," he says.

## Brain Mapping Enables Diagnosis and Treatment

To fully understand Dr. Cohen's condition, Dr. Friedlander used a special brain mapping technology called high definition fiber tracking (HDFT). Developed at the University of Pittsburgh, HDFT takes 3D images of the brain's intricate connections.

Dr. Friedlander confirmed that Dr. Cohen had a cavernous malformation and scheduled him for surgery. With HDFT, Dr. Friedlander was able to not only pinpoint the exact location of the malformation, but also determine the safest approach to remove it.

Dr. Cohen wasn't used to being on this side of the doctor-patient relationship. "It was a surreal experience to be the one getting anesthesia. I never had surgery before," he says.

It is not uncommon for patients to deteriorate neurologically after such an operation. But soon after surgery, Dr. Cohen noticed that his balance, coordination, and speech had actually improved. After a short course of rehabilitation, he returned to his neurological baseline.

## Back to Work with a New Perspective

Recovery took months but, today, Dr. Cohen is back to working full time as an anesthesiologist. To keep fit, he exercises more than before his stroke, attending a fitness boot camp four days a week.

His experience not only made him appreciate the little things in life, but also changed who he is as a physician. "I deal with many stroke patients. Now I can empathize with what they are facing since I went through it myself," he explains.

With the option to go anywhere in the country for care, Dr. Cohen is grateful he chose UPMC. "It was one of the best decisions I've made in my life."



**“I was terrified to have surgery, but knew it was the only way I would have a chance to work again.”**

**Isaac Cohen, MD**  
Anesthesiologist



“

The doctors, nurses, researchers, even the number of blood transfusions from donors — that’s dozens of people who came together to help me.”

Shari Kienzle

**James Rossetti, DO**  
Hematologist/Medical Oncologist  
UPMC Hillman Cancer Center



# Innovative Cancer Therapy Supercharges the Immune System

Shari Kienzle loves taking long walks with her two very slobbery but endearing Newfoundland dogs along Pittsburgh’s Mon River. “It’s my way to unwind,” she explains. “Walking, work, my family — these are my biggest hobbies.”

But a walk along the river means more than just a simple, carefree afternoon for the 52-year-old Canonsburg, Pa. resident. It’s one of many steps forward in recovering from a life-changing illness that started in the summer of 2017 when Shari returned from a family vacation with flu-like symptoms. When these symptoms escalated, she went to her local emergency department.

“By the time the doctors drew blood, they knew it was serious,” Shari says. She was transferred to UPMC Shadyside, where she received her diagnosis. Shari had diffuse large B-cell lymphoma, an aggressive cancer that primarily attacks the lymph nodes. In Shari’s case, the cancer also attacked her organs, bones, and bone marrow.

With the support of her husband and three daughters, Shari began chemotherapy at UPMC Hillman Cancer Center. Despite three different chemotherapy regimens, Shari’s cancer continued to spread. By January 2018, Shari’s doctors started exploring other treatment options, but had to rule out most of them.

## Breakthrough Therapy Offers Hope

There was hope for Shari yet. Around this time, UPMC started offering an innovative new treatment to select patients with certain types of cancers, previously only available through clinical trials. These trials — headed by Alison Sehgal, MD, and Kathleen Dorritie, MD, both hematologists/medical oncologists at UPMC Hillman Cancer Center — showed incredible promise that the team hoped would translate into successful treatment for Shari. The treatment, called chimeric antigen receptor (CAR) T-cell therapy, is a type of immunotherapy that uses the patient’s own immune cells to fight cancer.

T-cells are a type of white blood cell specially equipped to fight infection and disease. When a T-cell recognizes something in the body as a threat — like a virus — it attacks and destroys it to keep the body healthy. CAR T-cell therapy takes advantage of this T-cell characteristic by using a patient’s own genetically modified T-cells to find and kill cancer cells.

Under the expert care of James Rossetti, DO, and his team at UPMC Hillman Cancer Center, Shari decided to move forward with the innovative treatment. “It was scary, because it was a brand-new process,” Shari says. “But I knew it was my best option to beat this thing. I went into it with open eyes.”

Though CAR T-cell therapy proved to be lifesaving for Shari, it was not without challenges. By the time the therapy started, Shari’s body had been weakened by both the cancer and multiple rounds of chemotherapy, which caused her femur to break during the simple act of trying to put on a sock. She also experienced some side effects common to CAR T-cell therapy, including flu-like symptoms and brief, yet substantial, neurological impairment. With the support of her family and medical team, she recovered fully and quickly from her complications.

Thirty days after her first CAR T-cell infusion, doctors performed a full-body CT scan. The result? The scan showed no evidence of the disease.

## Back on the Trail

Like all cancer survivors, Shari will regularly follow up with her medical team in the months and years to come. She is grateful to have her life and independence back, along with the pleasures of unwinding along the river with her favorite walking companions: Hudson and Mocha.

“The care I received at UPMC was amazing,” Shari says. “The doctors, nurses, researchers, even the number of blood transfusions from donors — that’s dozens of people who came together to help me. It’s the best miracle I’ve ever had.”