

# Bulletin

JAN/APR 2022

MEMBER MAGAZINE FOR THE POLK COUNTY MEDICAL SOCIETY



**PCMS 2022 Legislative Coffee**

*NEW PCMS Executive Council 2022-23*

Ukraine Aid Efforts:  
Physician Volunteers thru Telehealth

**Learning and Giving Back: A Call to Action**

*Iowa Shortage of Behavioral Health Providers*

**Polk County Produce Rx Program**

*Myocardial Infarction: A Brief History*

# PCMS WILD LIGHTS

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Official Publication  
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**VOLUME 94 No. 1**

Des Moines, Iowa  
January/April 2022

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JAN/APR 2022

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COVER PHOTO: Ukraine Stethoscope representing support for our medical colleagues in Ukraine.

*Articles and editorial inquiries should be directed to:*

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of Iowa



## OUR CURRENT *State of Affairs*

**By: Jason Kruse, D.O.**

Dear PCMS Membership,

As I write this, the world seems as unsettled as ever and most of the headlines are about COVID, inflation, geopolitical unrest and of course at the top of the list the Russian invasion of Ukraine.

In times like these it is essential to know your foundational values and know that you have a community. Polk County Medical Society remains committed to our membership and to the well-being of our community.

The legislative session has been underway. We are focused on providing lowans with access to high quality, sustainable care. We continue to operate the Volunteer Physician Network (VPN) and our number one priority is maintaining funding for this ongoing project.

Last year the VPN helped almost 4,400 lowans at risk with access to specialty health in over 28 specialties and translated in over seven languages to communicate

services, care plans and diagnoses. I want to take a moment to express gratitude to the volunteering specialty physicians, hospitals and donors who make this program possible.

Beyond maintaining or expanding the VPN, PCMS advocates for a hard cap for medical liability, bringing us in line with surrounding states to keep Iowa competitive recruiting and retaining physicians. We are continuing to make progress on legislation to limit or ban nonmedical switching, a practice that shifts risks, costs to patients, and creates administrative burdens for prescribers.

In addition to our legislative efforts, PCMS remains a collegial organization. Entering the third year of the pandemic we are resuming event planning, to include upcoming events Celebrating Physicians at Wild Lights at the Blank Park Zoo, and The Terrace Hill Volunteer Physician Network Appreciation Reception, as well as The PCMS Annual Membership Meeting, which will be held in a garden

*continued from page 6*

party/reception style to responsibly gather with respect to social distancing. Many more events are currently being planned.

Please always refer to the Polk County Medical Society website ([www.pcms.org](http://www.pcms.org)) for updates and calendar events. We will continue to monitor the situation, but are optimistic that we can hold several safe gatherings for our membership.

I would like to close by focusing on physician wellness. Prior to the pandemic,

burnout within our profession was considered a threat to our individual well-being and a risk to the medical system as a whole. The last two years have almost certainly exacerbated the problem.

Please be sure you are watching out for yourselves, your families, and your colleagues. We are all in this together. Resources are available including local resource **Iowa Psychiatric Physician Support Line (888) 409-0141**. You can also find a national resource at **[www.standupstandoutdocs.com/home](http://www.standupstandoutdocs.com/home)**.

## PCMS FOUNDATION

### Did you know?

#### PCMS Collaborates to Benefit Public Health!

*The Polk County Medical Society continually strives toward its mission of improving the general health of the community by collaborating with many local health-care related organizations.*

#### **These organizations include, but are not Limited to:**

- The Volunteer Physician Network Program
- Polk County Health Department Lead Poisoning Prevention Coalition
- IHCC Domestic Abuse Guide
- PCHD lead Coalition Free Clinic
- Polk County Health Department
- Multi-Disciplinary Emergency Planning Group
- Iowa Collaborative Safety Net Provider Network
- PCHD Jump Start Back-to-School Fair
- PCHD Immunization
- Kathie J Lyman Scholarships for future physicians
- Back to School physicals
- Foot and ankle clinics

**You can help, by donating time or money to the PCMS Foundation TODAY!**

**<https://pcms.org/about-us/contact/donate/>**



**Congratulations to Shrey Velani, M.D.**, who was featured in the April 4, 2022, edition of **The Des Moines Register** in the article **"Iowa Doctor Alarmed by State's Lung Cancer Rates."** Dr. Velani states the importance of early detection and preventative testing available. **"If diagnosed early, there's a 60% chance of surviving cancer for five year after diagnosis."** Dr. Velani is a Pulmonologist physician at Des Moines MercyOne Medical center.



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# INVASION

## *and* Medical Outreach

**By: Paula A. Noonan, C.E.O.**

The Polk County Medical Society is actively supporting the Ukrainian medical community as they deal with the humanitarian crisis in Ukraine. We have set up a system to support our colleagues immersed in the invasion and on the battlefield.

Our Ukrainian colleagues have need of tactical medicine training, their specialties lying in other areas. Physicians in Ukraine are finding themselves thrown into the unknown on many fronts. Needs range from battlefield aid to humanitarian relief to mental health support.

We have been in close contact with three physicians who live in the cities of Kyiv and Lviv. Two of these physicians visited Des Moines during a sister city visit about three years ago. They made connections here in Des Moines through that visit with Polk County Medical Society physicians Tom Benzoni, D.O. and Noreen O'Shea, D.O.

Here in our own community, we know you may feel helpless at being able to make a positive impact on those under this oppressive dangerous situation in Ukraine. As colleagues, we are pulling together a shared library for physicians to help educate them as they practice outside of their comfort zone with battlefield medical assistance by virtual recordings.

We are also providing information shared by Ukrainian physicians on what their immediate needs are, how to get supplies and aid to them, as well as exploring mental health assistance for the physicians practicing under these dire circumstances.

If you are an individual, here is the best way to help Ukrainians with drugs or medical devices and avenues of aid and assistance on which you can act:

*continued on page 10*

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**How to help Ukrainian citizens and Army with drugs and medical devices:** Help Ukraine initiative (<http://helpukraine.center/en>) is organized by Ukrainian logistics companies and volunteers. It effectively delivers drugs and medical devices to Ukraine from its warehouse in Poland. Then they distribute shipments according to the needs of the Armed forces and civil medical system.

You can find the list of items needed on the website; they update it regularly. There are two ways you can help.

**1. Deliver drugs or medical devices you already have. To do this, you must arrange a shipment to the warehouse in Chelm, Poland.** The contact information is here: <http://helpukraine.center/en>

**2. Donate money for purchasing drugs and medical devices. There is a bank account for that purpose. Both private people and companies can donate any amount they wish. Then volunteers make the procurement according to the list of needs. Go here to donate:** <https://www.ernst-prost-stiftung.org/en-gb/spenden>

**Please share this information with people or companies who wish to help.**

In the words of those colleagues under siege . . . "The Free world will win. Slava Ukraini!" And thank all of you for any volunteer contributions you may make in aid or response to our need of volunteers to help build our library of battlefield tactical medicine virtual training for our Ukrainian Colleagues.





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# UKRAINE AID EFFORTS

## *for Physician Volunteers thru Telehealth*

On February 24, 2022, the Ukrainian people experienced an escalation of aggression in their country with the conflict now defined as the most significant European military conflict since World War II.

Nearly three million Ukrainians are fleeing the country, and as individuals of benevolence, we are called upon to respond to this violence with compassion.

As physicians, despite our ongoing recovery from the pandemic, some of you may still be drawn to contribute but may be uncertain of the best and most effective ways.

I have heard about countless physicians traveling and assisting through different national and international organizations.

However, not all of us have the ability to travel overseas.

Hence, we have found an opportunity for physicians to volunteer their time remotely, providing care to those who may benefit.

The Center for Telehealth and eHealth Law (CTeL), a federal telehealth policy group, has formed a national coalition of medical experts to provide virtual care services to the displaced and injured civilians of the Ukraine-Russia War.

Providers can volunteer to support virtual humanitarian health care efforts in Ukraine and the surrounding region in partnership with American and European organizations. The coalition aims to produce a dynamic database of health care providers that humanitarian

*continued on page 17*

# FROM IOWA TO KENTUCKY:

## *Giving Back and a Call to Action*



**Pruthvi Kilaru, DO-25**



**Naima Yusuf, DPM-24**

As a group of ten students, we made the journey from Iowa to Eastern Kentucky to learn about the healthcare system in Breathitt, Lee, and Wolf County. We stayed in the area for seven days and rotated to different sites and shared our experiences with one another. Some of us went with home health and hospital-based providers. Others visited the county health department where we shadowed environmentalists, the needle exchange program, covid testing, and school vitality checks.

We came to learn about the community and rural health, but we did not want to leave without giving back to the community. We put on an interactive event for the students to show how to take a patient history, how to use a stethoscope and how to tie a surgical knot. We spoke with students in elementary to high school and answered any questions they had about medicine. Our 1st and 2nd grade students asked us about everything from vaccines to constipation to the cost of healthcare.



*Continued from page 14*

That week we saw things that should never be seen in this country, especially when we tout having some of the best healthcare in the world. When parents ignore stroke symptoms for over 12 hours, due to lack of childcare, how do we expect them to be home tomorrow? What do you say to a 7-year-old asking you to convince their sick parent to take their medication, but their parent has to make the decision of either buying their medication or putting food on the table?

As physicians our role may be to manage the medical conditions of our patients, but our call to action for those reading this is to think about people we may have left behind and learn more about what you can do to help them. Start a feminine hygiene product drive, volunteer your expertise in a local rural community, support regional food banks and supplemental food assistance programs. Do something! Because if we do not act, it will not get better.





## PURPOSE BEFORE PORTFOLIO

KENT KRAMER, CFP®, AIF®, *Chief Investment Officer*

*"I'm looking for maximum return with as little risk as possible."*

That probably sounds familiar because it seems to be on every investor's wish list. The problem is that risk and return are (still) directly and positively related: To increase a portfolio's expected return requires, historically speaking, the assumption of greater risk, including the risks of permanent loss and price volatility.

But is maximum return really the best way to state your investment goal?

In professional golf, there are two major kinds of competition. One is PGA Tour tournament golf, where players try to shoot the lowest score over four eighteen-hole rounds where every stroke counts. The other popular golf competitions are Professional Long Drivers Association (PLDA) contests where players try to hit a golf ball as far as possible. To win, requires only one drive of the 5-10 balls they hit to stay in bounds and be longer than everyone else's. They are playing different games.

It is important that investors know what game they are playing before designing a portfolio or choosing an investment. To win the "game" that investors are playing is usually more complex than a single rate of return over one year or even twenty years. Investors have goals, stated or unstated, and the portfolio ultimately needs to contribute to the realization of the investor's definition of financial success. For most individual investors:

1. The portfolio likely needs to grow some assets faster than the rate of inflation in order to meet long-term goals like retirement.
2. It also needs to provide some liquidity (readily available cash) for planned spending and emergencies along the way.
3. The portfolio needs to have a degree of risk control to prevent temporary market losses from becoming so severe that the investor sells at precisely the wrong time.
4. For some investors, the portfolio should not rely on the success of companies and industries that conflict with the investor's deeply held values.

Those are just four kinds of investment success, among many, that are not measured simply by highest total return. Successful experiences, winning the investment game, usually looks more like winning a four-day golf tournament, with a combination of consistency, power, and finesse, as opposed to swinging as hard as you can at every opportunity and hoping one stays in bounds when you need it.

My 25 plus years of working with investors has taught me that clients make the best investment and portfolio decisions after they have established a clear financial plan. A well-constructed financial plan defines the game that the individual is trying to win.

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organizations can utilize for virtual care support. In addition, legal and technology experts will guide volunteers on effective virtual care support. All medical experts are welcome to volunteer—not only physicians.

Providers and groups can fill out the Volunteer Now link at [www.telehealth4ukraine.org](http://www.telehealth4ukraine.org) to get started.

### **Additional Organizations Aiding Ukraine**

*This is not intended to be a comprehensive list but a highlight of safe organizations where one is able to contribute directly.*

**Catholic Relief Services (CRS)** — The organization is at work in Ukraine and bordering countries, providing safe shelter, hot meals, hygiene supplies, transport to secure areas, counseling support, and more to the refugees that are 90% women and children. You can learn more about CRS's efforts here: <https://support.crs.org/donate/donate-ukraine?ms=agicrs2022ukr00her01&ga=2.177078497.55263168.1647465060-222442247.1647465060>.

**Ukrainian Red Cross** — All funds will help those in need, affected by armed conflict, blood collection, mobilization of volunteers and resources, and emergency activities. [https://donate.redcrossredcrescent.org/ua/donate/~my-donation?\\_cv=1](https://donate.redcrossredcrescent.org/ua/donate/~my-donation?_cv=1)

**UNICEF initiative “Protect Children in Ukraine”** — Children are the least responsible for the war in Ukraine, but they suffer most from its consequences. Your 100% tax-deductible donation will help UNICEF ensure that Ukraine's children access safe water, nutrition, health care, education, and protection. <https://www.unicefusa.org/stories/unicef-children-are-bearing-brunt-intensifying-crisis-ukraine/39481?form=FUNKBHMZQDQga=2.177078497.55263168.1647465060-222442247.1647465060>.

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## 2022 PCMS LEGISLATIVE COFFEE AT THE CAPITOL:

### Your Trusted Voice for Health Issues Impacting Your Patients and Practice

The Polk County Medical Society (PCMS) Legislative Coffee was held on Thursday, February 3, 2022, at the Iowa State Capitol.

PCMS Board members, physician members, Hospital CEOs, residents, medical students and PCMS staff met one on one with key Iowa Legislators on the important issues impacting healthcare in Iowa.

PCMS 2022 legislative priorities were advocated on, which impact on the scope/practice of medicine, physicians,

and patients in our community. This year's visit was crucial for Iowa's Tort Reform, Mental Health, Telehealth, and budget appropriations of vital programs, like the Volunteer Physician Network Program.

Thank you to all the very busy Physicians, Executives, residents, and students who were able to participate and represent urban medical community on behalf of all PCMS members. **We appreciate YOU representing the VOICE OF MEDICINE IN CENTRAL IOWA!**



Polk County Medical Society physician members, residents and medical students meet with legislators at the Iowa State Capitol.

*Continued from page 18*

Tony Coleman, Larry Severidt, M.D. and Representative Michael Bergan speak about PCMS Legislator priorities on mental health.



Representative Ann Meyer, University of Iowa medical students and Kelly Breffle speak about workforce shortage, residency slots in Iowa and our future of healthcare.

Representative Mike Sexton and Noreen O'Shea, D.O. discuss the vital funding of the Volunteer Physician Network program and the over 4300 Iowans it serves each year.



Representative Dennis Bush and Rachel Preisser, M.D. discuss breast imaging costs for patients and legislation regarding coverage.

## *In Memory of*



### **Julie Evans** **PCMS Benefactor**

Julie Evans, a friend and benefactor of the Polk County Medical Society, passed away February 6, 2022. She was the daughter of John and Priscilla Evans and was raised and lived in Des Moines.

Julie was a writer, publicist, advertising executive, entrepreneur, and philanthropist. She was owner and president of J.D. Evans & Associates and the Write Solutions Group. She served on the Evans Charitable Family Foundation as a trustee and board member serving many charities, organizations, communities, and college scholarships.

Julie was committed to children and Iowans in need of specialty care. Her concern for children and their well-being was so great, that she became a champion for the Polk County Medical Society Volunteer Physician Network program that provides millions of dollars annually for free specialty care to children and residents of Iowa, 200% below the federal poverty guideline level.

Julie's strong faith and commitment in preserving American's way of life was a passion of hers. She became good friends with Polk County Medical Society executives and members. She volunteered for special events, including the PCMS 150-year celebration, and over the years for PCMS fundraisers for the VPN and other events.

Julie was a generous, kind, caring and gracious lady who always made time to provide support and encouragement to everyone. She gave from her heart.

Year after year she was committed to support the Volunteer Physician Network to provide free specialty care to children and families in need, through the Evans Charitable Family Foundation's annual gifts. Julie gave from the heart and made such a difference in so many lives she touched, through her kindness and generosity. Her life made a difference to so many people. The Polk County Medical Society was profoundly grateful to Julie, admired her, she will be missed.

# MENTAL HEALTH CARE

## *and Iowa's Shortage of Behavioral Health Providers*



By Adam Bertroche, D.O.

While many Americans suffer from mental illness, a discouragingly low number actually receive treatment. According to the National Alliance on Mental Illness, in 2020 over 1 in 5 American adults, approximately 52.9 million people, suffered from mental illness. Treatment of mental illness remains staggeringly low, with only 46.2% of adults with mental illness receiving treatment and only 64.5% with severe mental illness receiving treatment. Access to care remains a barrier to receiving treatment, too. It is estimated that 134 million Americans live in a designated Mental Health Profession Shortage Area.

Around 600,000 Iowans suffer from mental illness. Additionally, Iowa has one of the highest rates of severe mental illness in the country, affecting 4.2% of the state's population, around 134,000 people. Access to mental health care remains an issue in Iowa

and nationwide, especially in rural Iowa. These access issues were exacerbated by the pandemic leading to increased ER visits for mental health care, substance use and overdose.

Nationwide, shortages in psychiatrists are estimated to be between 2,800 and 45,000 psychiatrists, a deficit that's expected to grow. In 2018, Iowa ranked in the bottom 10 states in the number of psychiatrists needed to treat its population, with 7.9 psychiatrists per 100,000 people, compared to the national average of 12.9. Access to inpatient psychiatric beds also can be a barrier for treatment. The Treatment Advocacy Center proposed a psychiatric bed target of 40-60 beds per 100,000 people in 2008. As of 2021, Iowa had 712 psychiatric beds or around 23 beds per 100,000 residents, significantly short of the recommended target.

*continued on page 24*



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# POLK COUNTY PRODUCE

## *Prescription Program*



By Dana Danley, M.D.

With the COVID-19 pandemic, more of our Broadlawns patients developed food insecurity due to closure of businesses and food resources. We tried to connect our patients with resources still available in the community to help. Many of our patients also have diet-related chronic conditions including diabetes, hypertension, and obesity. To empower patients to choose healthy foods, prevent food insecurity, and impact their health in a positive manner, the Polk County Produce Prescription Program was envisioned.

Leveraging partnerships, knowledge, and resources, Broadlawns and Iowa's Healthiest State Initiative (IHSI) collaborated to create the Polk County Produce Prescription Program. Through the Des Moines Community Foundation Leadership Grant (2021) and a grant from the Mid-Iowa Health Foundation, patients at the Broadlawns Family Health Center were enrolled in a six

month program. Patients with diet-related chronic conditions were seen by the family medicine physicians, health coach, or clinical pharmacist. Each month patients received educational handouts on different fruits and vegetables, set SMART goals for their care, and had chronic conditions addressed. A fresh fruit and vegetable voucher for \$30 per household member was prescribed at each monthly visit. Patients engaged their families to choose healthy produce at local retailers and farmers markets, supporting our local economy as well.

Through the Polk County Produce Prescription Program (PCPPP), 189 individuals received vouchers, \$13.9K was redeemed for fresh produce, and 311 bus passes were distributed to families with transportation needs. Many patients improved their A1C, weight, and blood pressure over the six months. However, the impact on families was immeasurable since vouchers were given

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*Continued from page 21*

Mental illness and deficits in treatment can impact many aspects of life. Those suffering from mental illness are at increased rates to develop other chronic medical illness such as cardiovascular disease, be unemployed, drop out of high school, experience homelessness, or be incarcerated.

Although Iowa still has a long way to go, important steps are being made to improve mental health care by the addition of the two Des Moines psychiatry residencies, a new rural psychiatry track

at the University of Iowa, expansion of virtual or mobile mental health services, addition of regional access centers, and the opening of Clive Behavioral Health and the Behavioral Health service at the Des Moines University Clinic. Solutions like these will have a much-needed impact on individuals, families, communities and our state.

*Adam Bertroche, D.O., is a psychiatrist at the Des Moines University Behavioral Health Clinic. For more information or to make an appointment, call 515-271-1716.*

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# A BRIEF HISTORY OF EMERGENCY INTERVENTION



## *for Acute Myocardial Infarction in Iowa*

By: Steven J. Phillips, M.D.

### ABSTRACT

This is a brief review of the modern management of unstable coronary artery disease, including acute myocardial infarction (AMI). During the past 50 years treatment of AMI has evolved from supportive care to therapeutic. In the 1970's cardiac surgeons demonstrated that rapid reperfusion of the culprit coronary artery with emergency coronary artery bypass grafting (CABG) significantly reduced morbidity and mortality. With the evolution and adoption of percutaneous coronary intervention (PCI) to treat AMI, PCI has become the standard of care for unstable coronary artery disease.

### INTRODUCTION

Enhancements in the management of acute and chronic disease typically evolve over time. Sporadically, a quantum leap in the management of a life-threatening event can result in a significant improvement in outcomes.

In 1876 Adam Hammer(1) postulated that a myocardial infarction was instigated

by the interruption of blood flow into a coronary artery. Notwithstanding Hammer's advice the management of unstable coronary artery disease, (CAD), including acute myocardial infarction (AMI), was traditionally managed conservatively with therapies designed to treat symptoms and sequelae, but not the cause. Symptomatic management alone resulted in the in-hospital AMI mortality between 15-30% with survivors demonstrating significant residual morbidities, and late mortality.

### DISCUSSION

The modern era of cardiac surgery was ushered in with the development of the heart-lung machine (2). The 1960's and beyond saw significant refinements in coronary artery bypass surgery (CABG) (3). These advances ushered in at first, the era of surgical management of chronic, stable coronary artery disease CAD, then evolved into the surgical management of unstable CAD.(4,5)

During the mid 1970s, the conventional management for AMI made the

*continued on page 30*

**Polk County Medical Society  
Annual Zoo Brew  
Wednesday, July 6th, 2022  
5:30 pm- 9:00 pm**

**Blank Park Zoo  
PCMS Private Party  
Main Pavillion  
for PCMS Members and Guests**

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- // Vein Therapy Center
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Medical Equipment
- // West Lakes Sleep Center
- // Women's Center

*Continued from page 23*

based on the number in the household. Children helped parents pick out choices they enjoyed too.

Patients improved diabetes control with no changes in medicine and some lost 20 pounds with the program.

The City of Des Moines, IHSA, and Broadlawns collaborated to gain additional funding through the US

Mayors Grant (\$175,000) winning first place for Medium City. Now, we will focus on children to prevent obesity and to help those with diet-related diseases. With monthly visits to provide support, education, and Produce Prescriptions, we hope to encourage healthy lifestyle habits for the entire family. Connecting families to other community resources will help families maintain their efforts.



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2022 VOLUNTEER  
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*Please join your colleagues for  
cocktails & hors d'oeuvres*

*Wednesday, May 18<sup>th</sup>, 2022*

*5:30pm – 7:30pm*

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**RSVP by Wednesday, May, 11th, 2022  
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quantum leap from treating symptoms and sequelae, to treating the cause. The cause, first postulated by Hammer a century earlier, was confirmed in the 1970s as the sudden occlusion of a coronary artery by a clot generated from a ruptured atherosclerotic plaque. Reports published by Berg (5) et.al. and this author (6,7) demonstrated that the rapid reestablishment of blood flow into the culprit artery with CABG resulted in a significant reduction of morbidity and mortality as compared to conventional, symptomatic only, management. Emergency reperfusion using CABG as a treatment of AMI reduced the in-hospital mortality in my institution from approximately 29% to 1.3%, with a one year mortality of 2.8%.

The pre-op emergency coronary angiogram typically demonstrated a total occlusion or a significant filling defect (clot) in the culprit coronary artery. At surgery, we routinely inserted a small balloon tipped catheter into that vessel to extract clot and, atherosclerotic debris. Though some expressed doubt related to the efficacy of emergency CABG (8) we and others continued treating AMI as an extreme emergency, analogous to a gunshot wound of the abdomen, or an aortic rupture. Emergency CABG reintroduces blood flow into the occluded AMI vessel, salvages myocardium, improves myocardial function, and permits the bypassing of other diseased coronary arteries. The revelation that an occlusive clot, generated from a ruptured plaque, predated but paved the way for thrombolytic and PCI therapies. PCI (9) is today's accepted and preferred standard of care for the entire spectrum of CAD,

including unstable CAD and AMI, and is one of the most commonly performed medical interventions.

## CONCLUSION

The concept of timely reperfusion is central to the modern treatment of CAD. As a general rule, the initial therapy for AMI is directed toward restoration of perfusion into the culprit coronary artery with the goal to salvage jeopardized myocardium. This may be accomplished through thrombolysis, PCI, or CABG surgery alone, or in combination.

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- \* Surgeon Emeritus  
Iowa Heart Center  
Des Moines, Iowa 50322  
Staff Scientist  
National Institutes of Health  
DHHS, Bethesda, Maryland 20894 (retired)

## News...News...News...News!

**Polk County Medical Society** wants to know what's new with you. Have you been appointed to a board or received an award? Please take a moment to write in below what's new with you to share and motivate your colleagues!

\_\_\_\_\_  
Name

What's new: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Return this information and any photos to the editor at [pcms@pcms.org](mailto:pcms@pcms.org)!**



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Is your birthday missing? Let us know!

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## *In Memory of*



### **William R. Hornaday, Jr., M.D.**

William Roy Hornaday, Jr. passed away on the 22nd of January, 2022, at the age of 92.

Born the son of William R. and Clementina (Wolfe) Hornaday on June 14, 1929, in Des Moines, Iowa, he attended Greenwood Elementary, Callanan Junior High, and Roosevelt High School, where he graduated in 1947.

He attended Northwestern University for three years before being accepted early to the University of Iowa College of Medicine.

Bill married Mary Mills and had a son and daughter. He interned at Highland Alameda County Hospital, then to Dothan, Alabama, where he served as a battalion surgeon with the U.S. Army at Fort Rucker. He returned to Iowa City

in 1957 to pursue training in urology, continuing in the footsteps of his father.

In 1961 Bill established a private urology practice in Des Moines, where he cared for his patients with skill, empathy, and mutual respect for more than 30 years. He was a member of the Polk County Medical Society, where he served as president in 1972.

Even when he was working hardest, Bill enjoyed life to its fullest - from fishing and canoe trips in the Boundary Waters of northern Minnesota to deep-sea fishing in Baja; from dancing to Count Basie, to weekend jigsaw puzzles and pitch games. He also loved experimenting in the kitchen, where his graceful surgeon's hands were perfectly suited to making delicate crusts for his favorite black raspberry pies. A loyal attendee of the

*continued on page 38*

*Continued from page 37*

Iowa State Fair and a fan of the Culinary Arts Building, Bill took it upon himself to enter the popcorn ball contest, spending a year refining the ideal ratio of popped kernels to Karo Syrup; having failed to win, place or show ("balls too sticky"), he redoubled his efforts and came back the next year to take the blue ribbon.

After being cooped up in air-conditioned offices and hospital rooms, Bill loved nothing more than to water the garden on a humid summer day, drink in hand, watching the sun go down over the zinnias Mary planted in their backyard on Greenwood Drive.

Upon his retirement in 1995, he was able to pursue his many passions including golf, tennis, gardening and building a vibrant community of friends and neighbors in the Park at Southern Hills. Memorial contributions may be directed to the Dr. William R. Hornaday Endowment for Continuing Nursing Education at UnityPoint Health-Des Moines, St. Paul's Episcopal Cathedral and the Animal Rescue League of Iowa.

*Publishing credit - Memorial derived from published Obituary from Legacy.com.*

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**Guest Speaker: Mary Jo Voelpel, D.O.**  
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