



# PULASKI COUNTY MEDICAL SOCIETY

When you think professional, ethical, quality healthcare, think physicians of Pulaski County Medical Society.



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## Presidents Message

The Pulaski County Medical Society (PCMS) has been serving the community and physicians in central Arkansas for over 150 years. We are the first and largest county medical society in the state. I look forward to 2017 as we continue to help guide the practice of medicine in our home state. This will be a busy year for us all and no time is better than the present to become involved in organized medicine. Our profession is constantly changing. With new federal and state administrations, our congressmen and women need our leadership, guidance and support. We need to voice our concerns regarding safe patient care for the people of our state. In the coming year, we are

likely to see bills regarding tort reform, private option, telemedicine, and opioid prescription regulation, just to name a few.

The society will continue to support UAMS medical students through the Carolyn Clayton scholarship fund and freshmen orientation luncheon. With the assistance of our PCMS medical student representative, we will continue to strengthen our support and relationship with our young physicians in training.

The PCMS will continue its monthly newsletter focusing on matters of local interest, as well as providing a forum for issues pertaining to the practice of medicine. We continue to offer service through the Pulaski County Medical Exchange, the only emergency medical answering service in central Arkansas exclusive for physicians, monthly Lunch and Learn sessions as well as our new membership directory smartphone app. We also support the PCMS Healing the Healers Foundation which serves as a free, confidential resource enhancing physician well-being. Please consider donating to this important cause. Any amount is greatly appreciated.

Finally, the practice of medicine is both a sacrifice and an honor. Thank you for the opportunity to serve as your president. There is a reason that God gave me two ears and only one mouth. I look to our membership for guidance and support. I promise to serve you and our community well.

Best wishes for a healthy 2017,  
Kristen Lienhart, M.D.



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# 2016 Survey of American Physicians

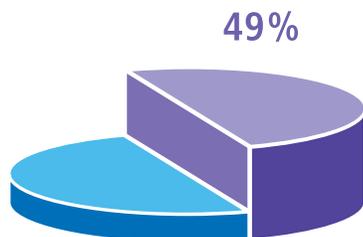
## Key Findings:

**PHYSICIAN PRACTICE PATTERNS ARE LIMITING PATIENT ACCESS TO CARE. MOST PHYSICIANS NOT ENGAGED IN THE LEVERS OF HEALTHCARE REFORM.**



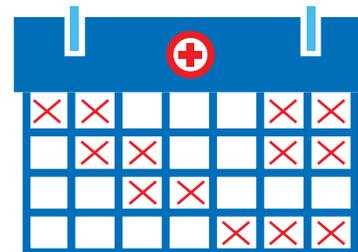
Key findings of the 2016 Survey of America's Physicians suggest a continued struggle among physicians to maintain morale levels, adapt to changing delivery and payment models, and to provide patients with reasonable access to care. Key findings include:

- 54% of physicians rate their morale as somewhat or very negative.
- Only 37% describe their feelings about the future of the medical profession as positive.



- **49% often or always experience feelings of burn-out.**
- 49% would not recommend medicine as a career to their children.
- Physicians spend 21% of their time on non-clinical paperwork, the equivalent of 168,000 physician FTEs not engaged in clinical activities.
- Only 14% of physicians have the time they need to provide the highest standards of care.

- **80% of physicians are overextended or at capacity, with no time to see additional patients.**
- 72% indicate that external factors such as third party authorizations significantly detract from the quality of care they are able to provide.
- 27% do not see Medicare patients, or limit the number they see.
- Employed physicians see 19% fewer patients than practice owners
- 20% of physicians practice in groups of 101 doctors or more, up from 12% in 2012.
- 17% of physicians are in solo practice, down from 25% in 2012.

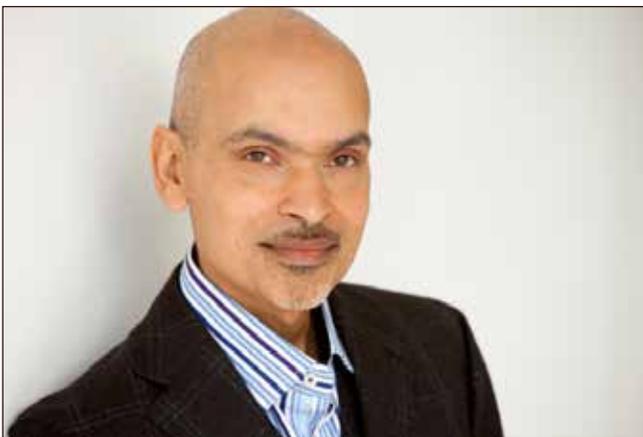


- **48% of physicians plan to cut-back on hours, retire, take a non-clinical job, switch to "concierge" medicine, or take other steps limiting patient access to their practices.**
- Only 43% have their compensation tied to quality or value.



# **Brain Wellness** is the **First Step to Sustainable Wellness**

by Gopal Chopra, MD



Dr. Gopal Chopra is an experienced neurosurgeon and co-founder and Chairman of pingmd, Inc., a New York City-based mobile healthcare solutions company.

Mental fitness should be the focus of our daily health routine. Protecting our cognitive and emotional intelligence is an investment to a vital and productive life as we age but more importantly has significant implications on maintaining and engaging in our present general wellbeing. Good mental health motivates us, enables our engagement, rationalizes our choices and is the critical primary intervention to our health routine. As the chronic care conditions and their associated co-morbidities in society continue to rise, a common theme of non-compliance with our doctor's instructions surfaces as the failure to curtail the issue. Science is continuing to support the impact of diet, exercise and mindfulness to our mental health and is adding to the armamentarium of ways to boost it (as referenced in my prior HyperCognition article). The prescriptive intervention is simple and the exciting thing is adherence is self-fulfilling.

Nutritional psychiatry has been at the center of management of many complex pediatric conditions for a long time and various diet regimens have been studied in conditions such as epilepsy

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and attention deficit disorder, with positive effect. We now see, literally in functional MRI scans how serotonin, a key neurochemical that can affect our mood and self-esteem is impacted by what we eat. Newer research explains the gut-brain linkage of bacteria and their influence on our energy, mental agility and propensity to depression. Phytochemical superfoods are appearing and will continue to improve that are focused on enhancing our memory or at least offer metabolic neuroprotection.

Physical exercise is now accepted as essential to mental wellness and that a sedentary lifestyle exacerbates the chronic disease state that plagues our mental wellness. Aerobic exercises, including jogging, swimming, cycling, walking, gardening, and dancing, have been proved to reduce anxiety and depression as stated by Exercise for Mental Health, by Sharma MD et al. The positive impact that we realize from regular and strenuous exercise is on our mood and motivation but also the structural

and functional integrity of the brain itself. To be able to think well we need to keep the brain template healthy. Research is uncovering ways that specific exercises can modify degenerative diseases such as dementia and even Parkinson's to improve cognitive and motor function. Neurosciences is coming of age and allowing us insights into how we feel better and enable us to perfect the ability to design technologies and environments that improve it.

Health benefits from regular exercise, a healthy diet and regular programmed mindfulness result in improved sleep, healthy libido, mental endurance, reduced stress, improved mood, weight reduction, controlled blood pressure and more.

Mental health service providers can now provide effective, evidence-based physical, dietary and mindfulness activity interventions for individuals that will improve our overall wellness and its success.



## First Time in US: Virus Used to Attack Brain Tumor

In the first time the method has been used in the United States, doctors injected a cold virus into a Hazen woman’s brain tumor in an effort to eradicate it as part of a clinical trial at the University of Arkansas for Medical Sciences (UAMS).

Beth Rogers, 63, successfully underwent the procedure Oct. 5 and has been taking immunotherapy treatments with the drug pembrolizumab – brand name Keytruda – every three weeks since without complications or unexpected side effects.

Rogers said that despite the unknowns involved in being the first person to receive the treatment, she had no fear.

“I’ve got so much to live for,” Rogers said. “I’ve got a wonderful family, five grandchildren, wonderful friends and a community. And I’ve just had so much support. I’m a retired elementary school librarian. They’ve written me letters and sent me cards. I owe it to them to try and see what I can do and that’s why I have no fear. I know I’m on the right path.”

J.D. Day, M.D., professor and chairman of the Department of Neurosurgery in the UAMS College of Medicine, performed the surgery and described the treatment as a combination of therapies that he hopes will destroy Rogers’ cancer. If successful, he hopes the treatment will become a first line of defense for patients and doctors in treating glioblastomas.

During the surgery, Day used a new and specially designed cannula to inject Rogers’ tumor with an adenovirus, which is a common cause of respiratory illness. Once in place, the virus began multiplying, attacking cancer cells but not affecting healthy cells. The virus replicates on its own, continuing the attack as long as cancer cells are present, so no further injections will be needed.

The immunotherapy infusions aim to weaken the cancer cells and improve immune response to aid in attacking the tumor.

The combination of treatments has proven successful with other types of cancer, but this is the first time it has been tried with a brain tumor.

Rogers came to UAMS for the procedure when her tumor continued to grow despite two previous surgeries and a combination of chemotherapy and radiation. She went for a consultation from an out-of-state cancer institution and they referred her back to Arkansas for this trial.

“That is so neat,” Rogers said of being treated so close to home. “I’m just hopeful through this trial that I’m going to help them find better treatment for because we’ve got to do something. And I’m proud that it’s being done in Arkansas at UAMS.”

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left to right: Dr. Mohamed Tolba, Dr. Krishnappa Prasad, Dr. Amir Prasad, Dr. Anshad, Dr. \_\_\_\_\_

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# Interview with Dr. Kristen Lienhart

## What motivated you to choose medicine as a career?

I have respected those working in health care since childhood. The first meaningful encounter with a physician occurred during a family vacation when I was 7 years old. I had a battle with a wooden barstool, and the barstool won – landing me in a Florida emergency department with a huge gash in my chin. The EM physician suturing me back together was so calming and reassuring. I felt safe in this stranger’s care despite not having my parents at my side. I had a newfound respect and appreciation for physicians (and local anesthesia) after that experience.

I have always been intrigued with science. I learned from many excellent elementary and high school teachers, but no subject was more stimulating than Mrs. Robertson’s Anatomy and Physiology class my senior year. With her encouragement, I started shadowing physicians from various specialties. I knew that I had the determination, drive and thirst for knowledge that only medical school could provide. And I wanted to serve the people of Arkansas just as that EM physician from my youth had served me.

## Why did you choose your specialty?

While in undergraduate school, I was a gymnastics coach for 3- and 4-year-old children. I noticed that many parents picking up their

“little Olympians” were dressed in scrubs. Coincidentally, they all happened to be anesthesiologists. I spent many Christmas, spring and summer breaks shadowing physician anesthesiologists at Baptist Health. Out of all of the physicians that I had shadowed, anesthesiologists were the only specialists who repeatedly stated that they would choose no other profession.

I certainly kept my mind open throughout my clinical rotations in medical school, but anesthesiology best fit my skillset and personality. I have never regretted my decision. Each day I get to work with caring faculty, resident physicians, nurse anesthetists, ancillary staff and surgeons. I get to serve Arkansans at some of the most vulnerable and joyous times in their lives. I feel truly honored and humbled to be able to practice the art of medicine in my home state.

## Who are the people who influenced you the most in your professional life and why?

My family and church have always been my foundation. “Do unto others as you would have done unto you.”

## What advice would you give a medical student in school right now?

1. Get your head out of the books (paper or electronic) every now and then. Take a look at the world around you. The practice of medicine is a



sacrifice and honor, but you have to take care of yourself (spiritually, physically, mentally, and socially) so that you can better provide for your family and your patients.

2. Get involved in organized medicine. The AMA advocates for many legislative issues on behalf of residents and students. Some of those issues include: medical student debt, resident work conditions, student work hours, clinical skills assessment exam, and medical education.

3. Learn as much as you can. Time will fly. YOU are the future of medicine!



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